



UNDERSTANDING induction

Inducing labor is a big decision that needs to be made by you *and* your care provider. It's essential to have a thorough discussion with your healthcare provider about the risks, benefits, and suitability of these methods based on your individual situation.

what is labor induction?

Inducing labor means prompting the uterus to contract, initiating labor to continue and the baby to be born. Your health care provider may recommend inducing labor for a variety of reasons, particularly if there is a concern for the parent or baby's health. Labor can be induced in several ways, from low-intervention methods to medically assisted inductions. The method of your induction depends on why you're being induced, the gestational age of the baby, your cervix, and any particulars about your health or pregnancy. Generally, inductions are not done unless the benefits outweigh the risks.

what are the risks?

The risks associated with induction may change depending on the method being used. Generally, risks include:

- The induction may be unsuccessful
- Contractions may be stronger and more difficult to manage
- Increased risk for c-section
- Fetal distress, resulting in unstable heart rates
- Uterine infection (risk increases the longer that membranes are ruptured)
- Uterine rupture, though rare, can be life-threatening

why induce?

Your care provider may suggest induction for reasons, such as:

- Postdates pregnancy (beyond 1-2 weeks past your due date)
- Pregnancy complications (high blood pressure, diabetes, etc)
- Placenta complications such as placental abruption
- Growth concerns in baby (intra uterine growth restriction)
- A uterine infection (chorioamnionitis)
- Insufficient fluid around baby (oligohydramnios)
- Maternal age over 35
- Elective induction (history of fast births, personal reasons, etc)

do I qualify?

Your care provider will help you weigh the pros and the cons of induction. Induction of labor isn't usually recommended for:

- You have a complication like placenta previa (placenta is covering the cervix)
- Your baby is in an unfavorable position (breech or transverse)
- You've had a complicated prior c-section or other uterine surgery
- Umbilical cord prolapse
- Active genital herpes outbreak