

# PRE-LABOUR RUPTURE OF THE MEMBRANES

## Patient Information Sheet

Your waters have broken but you are not yet in labour – this is known as pre-labour rupture of your membranes. In other words, your 'waters' have broken but you are not yet in labour.

Recent studies have suggested that after 37 weeks it is reasonable to offer women the choice of either induction or waiting for the onset of labour.

Most women who have pre-labour rupture of membranes go into labour by themselves. More than 60% give birth within 24 hours and about 95% within 72 hours, although there may be a small associated risk of infection (about 2%) for this baby and the mother. This risk appears to be reduced if labour is induced and it is the recommendation of Obstetricians in this hospital that this occur as soon as it is practicably possible.

Induction would usually involve the use of an intravenous drip containing the hormone Syntocinon, which produces contractions. This situation would also involve continuous foetal rate monitoring.

If you choose to await the onset of labour, this is thought to be safe for up to four (4) days, unless fever or other signs of infection develop. During this period you do not need to remain in hospital, though you should attend the Birth Suite daily for review, including a period of foetal monitoring. If there is thought to be a higher risk of infection in your situation, we may recommend that induction is safer than waiting.

At home you will need to:

- take your temperature four (4) hourly
- note the colour and odour of vaginal fluid loss
- abstain from sexual intercourse or the use of tampons

You should phone the Birth Suite with a view to returning if:

- your temperature is 37.2<sup>C</sup> or above
- the colour/odour of your vaginal loss changes
- you have abdominal pain other than contractions
- if you are concerned about your baby's movements
- if you feel unwell or have any other concerns not listed here

Hospital staff will be glad to discuss any of these issues with you further if clarification or further explanation is needed.