

Latent Phase of Labour

Labour is a journey and every woman's journey is different. This leaflet has been produced by midwives to try to help you help yourself during the early stages of labour.

We hope that using some of the tips in this leaflet will help.

Coping with the Latent Phase of Labour

The three stages of labour

The first stage

Is the longest stage and ends when the neck of your womb opens fully (10 centimetres dilated)

The second stage

Is when your baby moves down through the birth canal and is born.

The third stage

Is when your afterbirth is delivered.

What is the Latent Phase of Labour?

The latent phase of labour is the very first part of your labour. During pregnancy the neck of the womb (cervix) is long, firm and closed.

During the latent phase the neck of the womb shortens (effaces) and opens (dilates) to about 4 centimetres.

The next part of labour is called active labour and we say labour has become established or properly started.



What happens during the latent phase?

During the latent phase the muscles of the womb (uterus) contract and this causes the neck of the womb to shorten and open by 4 centimetres. The latent phase can last several days. Some women feel backache or cramps during this time. Some women will have bouts of contractions lasting a few hours. The contractions may start and stop several times. This is normal.

Many women pass a “show”, which is a plug of mucous from the neck of the womb, usually stained with blood. Some women pass a large plug of mucous all at once; others have several “shows” over several days.

In the latent phase of labour contractions can vary in length and how often they come. They may continue for several hours but not become much longer and stronger. This is also normal.

If your contractions do slow down or stop, this is a good time to rest and make sure you have something to eat. When your body has built up some energy supplies your contractions will start again. Many women find that coming into the hospital or having a vaginal examination during the latent phase slows down the contractions; this is why your midwife may encourage you to remain at home in early labour or avoid too many internal examinations.

THIS START-STOP PATTERN IS COMMON

In the active phase of labour contractions change, they become

LONGER, STRONGER AND CLOSER TOGETHER

and usually continue to become stronger until the baby is born

It is very important you have a supportive birthing partner with you. This should be someone who is happy to be with you throughout your labour. Choose someone who has a positive attitude about birth and who you feel totally relaxed, confident and comfortable with.

We welcome two birthing partners (occasionally there may be times when this is not possible- please check hospital website or speak to your midwife for more information)

What can I do in the Latent Phase of Labour?

It is best to try and stay as relaxed as you can, distract yourself from focusing on the contractions. It is a good idea to stay at home for as long as possible. This is because there is evidence that if you arrive in hospital in established (strong) labour you are more likely to have a straightforward birth.

You may also feel more relaxed and comfortable in your own home.

There are many things you can do to help your labour go well

Things to try:

- Potter around the house
- Take a walk
- Watching a DVD/video (one that makes you laugh is best)
- Take a warm bath or shower
- If the contractions slow down or stop, have a short nap or lie down
- Do some relaxation
- Keep your breathing quiet and sigh out slowly during contractions
- Ask your birth partner to give you a massage
- Kiss and cuddle or make love
- Use your TENS machine if you plan to use one
- Put a heat source, wrapped in a small towel on areas that ache
- Keep upright and mobile
- Change your position frequently
- Try a birthing ball
- Drink plenty of fluids
- Eat little and often – carbohydrates like bread or pasta and sugary foods

Remember

You should inform a midwife if you experience

- Constant or rapidly increasing pain
- You know or suspect your waters have broken
- You have a green or yellow vaginal discharge
- Vaginal bleeding that is not mucousy (jelly-like)
- Any change in your baby's movement pattern – Your baby's movements should continue throughout labour
- Persistent vomiting
- Feeling generally unwell or feverish
- You need further advice or reassurance

If you think you may be in early labour, call the Triage Midwife at the hospital for advice. If you have any pregnancy complications, please inform the midwife you speak to.

If you are not in established (strong) labour when you are assessed by a midwife, you may be advised to stay at home.

Research tells us that women who spend the early part of their labour at home are less likely to experience medical interventions such as caesarean section, a drip to speed up labour, or develop an infection.

If you have signs of labour or are concerned please speak with a midwife:

Call our Triage Midwife on 0151 702 4413

Or

The Midwife Led Unit on 0151 708 9900

This leaflet can be made available in different formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at pals@lwh.nhs.uk

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