

According to the World Health Organization, “No geographic region should have rates of induced labour over 10%.” However, in a recent study of childbearing women in the United States, 44% of women reported that their care providers attempted to induce labor, and 36% of labors were actually induced. This list provides evidence-based tips for women who want to avoid labor induction.

1. Recognize that, according to almost all experts, a normal pregnancy lasts between 38 and 42 weeks. In your mind, add two weeks to your due date in case your pregnancy lasts 42 weeks.
2. Understand that many researchers believe that it's the baby that starts labor. Studies suggest that once the baby is fully mature and ready for life outside the womb, he releases a substance that tells the mother's body to start the process of labor. In most cases, the best way to know that your baby is ready to be born is to wait for labor to begin on its own.
3. Choose a care provider who induces labor *only* for medical reasons.
4. If you and your care provider are unsure of your due date, consider having an ultrasound in the first trimester (13 weeks) of pregnancy. First trimester ultrasound is more accurate at estimating the correct due date than an ultrasound done later in pregnancy.
5. Don't be induced without a medical reason. Be aware that a large baby is not a medical reason for induction. According to experts, including the American College of Obstetricians and Gynecologists, induction for suspected large babies does not improve outcomes for babies and almost doubles the risk of a cesarean for mothers.
6. Stay active and exercise at least 30 minutes most days at a moderate pace. Research indicates that healthy women who exercise regularly throughout pregnancy are less likely to need to be induced or have their labor sped up.
7. Stay well-nourished and drink plenty of fluids. If there's a concern with the baby being overdue, tests (such as

a biophysical profile and amniotic fluid index) may be scheduled to evaluate the baby. Several studies have found links between maternal dehydration and poor results on these. If you are scheduled for these tests, be sure to drink plenty of liquids and eat well in the days before the tests.

The mission of Lamaze International is to promote, support, and protect normal birth through education and advocacy. The following evidence-based practices, adapted from the World Health Organization, promote normal birth:

- 1) Labor begins on its own
- 2) Freedom of movement throughout labor
- 3) Continuous labor support
- 4) No routine interventions
- 5) Non-supine (e.g. upright or side-lying) positions for birth
- 6) No separation of mother and baby after birth with unlimited opportunity for breastfeeding

8. Tell your care provider right away if you have any symptoms of infection, especially foul-smelling vaginal discharge or itching, so that you can be treated. Some infections can be harmful to the baby and can cause your water to break early, which may lead to the need for labor induction.

9. If your water breaks before labor begins, ask your care provider to allow you time to go into labor on your own. Most women begin labor soon after their water breaks, and 90% will be in labor within 2 days of their water breaking. There's no need to rush labor unless you or your baby are in danger or there are

signs of infection. Follow your care provider's advice for reducing the possibility of infection and ask him or her to do vaginal exams only when medically necessary.

10. If labor induction is planned for non-emergency medical reasons or because you are getting close to 42 weeks, discuss alternative ways of inducing labor with your health care provider. To start labor, research suggests the use of acupuncture, nipple stimulation, and “sweeping the membranes,” a procedure in which the care provider uses her fingers to gently separate the bag of waters from the cervix during an internal exam. Many have suggested the use of sexual intercourse or castor oil to help labor begin, but these methods haven't been studied in high-quality research.

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