

What is Preterm Labor?

The length of pregnancy is counted from the first day of your last period. Your due date is figured as being 40 weeks from your last period.

Here are some terms used:

- Pregnancy that ends before 20 weeks is called a miscarriage or an abortion
- Pregnancy that ends at or after 20 weeks is called a delivery
- Delivery at or after 37 weeks is a full term birth
- Delivery between 20 and 37 weeks is a preterm birth

Why is Preterm Labor a problem?

- Babies born before 37 weeks may have various problems due to incomplete growth and development
- Generally the earlier babies are born, the more severe their problems
- Problems can be long-term, affecting your child for many years
- Early identification of preterm labor may help prolong your pregnancy

The early identification of preterm labor may lead to a prolonged pregnancy.

Obstetrical Homecare

If you are having preterm labor, your doctor might prescribe the Alere® Preterm Labor Program. Nurses and pharmacists, with experience in caring for pregnant women, will help you learn more about your condition. They work closely with you to watch for the early signs of preterm labor and to notify your doctor of any change in your condition. The Alere Preterm Labor Program allows you to receive quality care in your home.

For more information, contact your physician or call Alere at 800-950-3963

Preterm Labor

The facts you need to know



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Who is at risk for preterm birth?

The following conditions may be associated with preterm birth. If you have any of these conditions, you can talk to your doctor about them:

- Previous preterm labor or delivery.
- Current pregnancy with twins, triplets, or more.
- Abnormally shaped uterus or surgery on the uterus.
- Two or more second trimester abortions or miscarriages.
- Incompetent cervix, cone biopsy, large fibroids.
- Severe kidney and urinary tract infections.
- Cervical dilation or effacement before 36 weeks.
- Excessive uterine contractions before 36 weeks.
- Bleeding, placenta previa, too much, or too little amniotic fluid.
- Women younger than 18 or older than 35, and those with unusual physical or mental stress.

What is labor?

Labor is the process in which the uterus (womb) contracts or tightens in a regular pattern causing the cervix (opening of the womb) to open and prepare for delivery. You are in labor when both uterine contractions and cervical change occur. Changes in the cervix can be checked during a pelvic exam by your doctor. The changes that occur during labor include:

- Softening of the cervix.
- Shortening or thinning out of the cervix.
- Dilation or opening of the cervix.
- Movement of the cervix from a backward to a forward position in the vagina.
- Lowering of the baby's head into the birth canal.

These are changes that your doctor will look for to determine if you are in labor. Your role in early detection of labor is to notice uterine contractions and report any signs of preterm labor.

What causes Preterm Labor?

The causes of preterm labor are not clearly understood. It is known that certain factors are connected

with preterm labor and may increase your risk for early delivery. Very common factors include carrying more than one baby (twins, triplets, or more) or having had a preterm birth in the past. At this time, preterm birth cannot be prevented. We can only do the next best thing – detect it early and treat it effectively to help the pregnancy continue.

Are there warning signs of Preterm Labor?

You have a better sense of the changes occurring in your body than anyone else and therefore you are the best person to identify these early signs. Reporting them to your doctor may mean better management of your pregnancy. The following are signs that occur in preterm labor. However, they can also be a part of a healthy pregnancy. As you go over these signs, think about what is a change from the normal way you feel.

- **Uterine contractions** | A contraction is a tightening of the muscles in the uterus. Using your fingertips to feel your uterus, you should be able to indent your uterus when it is relaxed. During a contraction you can feel your uterus tighten and become hard. Contractions occur normally throughout pregnancy. They usually do not hurt and can occur at any time. Preterm labor often has a pattern to the “tightenings.” Your uterus will feel hard over the entire surface and this tightening may occur every 15 minutes or closer. Each contraction may last from 40 seconds up to over a minute.

Remember – preterm labor contractions are often painless and occur every 15 minutes or closer.

- **Menstrual-like cramps** | These are felt low in the abdomen, just above the pubic bone. The cramping may have a pattern, feeling like waves or fluttering. You may also feel constant cramping.
- **Low, dull backache** | The backache is located mainly in the lower back and may radiate to the sides or front. It may be rhythmic or constant, and often is not relieved by change of position.
- **Pelvic pressure** | You may feel pressure or a fullness in the pelvic area, in your back or your

thighs. It may feel as though the baby is going to “fall out.”

- **Intestinal cramps** | These may occur with or without diarrhea. You may have the feeling of “gas pains.”
- **An increase or change in vaginal discharge** | The amount may be more than you normally have. It may be more mucousy or watery. The color may become pink or brownish.
- **“Something’s not right”** | Many women with preterm labor just have a sense that things do not feel as they did before.

What should I do if I think I have Preterm Labor?

1. Go to bathroom and empty your bladder.
2. Check to make sure you have not missed a dose of any medicine you may be taking.
3. Maintain adequate fluid intake per your doctor’s instructions.
4. Rest on your LEFT side, lying down.
5. Record uterine contractions.
6. Call your doctor.

Emergencies

Sometimes, a problem can occur that needs attention right away. If you have any of the signs below, **CALL YOUR DOCTOR!**

- **Bleeding** | If you have vaginal bleeding, a large gush or steady stream of bright red blood, it is an emergency. Get help right away, lie on your side and put your feet higher than your head. Save the pads or cloths used to catch the blood.
- **Rupture of the Bag of Water (Amniotic Sac)** | Sometimes your water breaks early. If you notice a gush of fluid or a steady trickle of fluid, you should call your doctor.
- **Severe Stomach Pain** | If you have sharp, constant, severe pain, that doesn’t go away when you change position, with or without contractions or bleeding, call your doctor.