SLOW PROGRESSION OF LABOUR



During labour, we monitor your 'progression of labour'. This refers to how quickly your cervix is dilating and the rate your baby is coming down into the birth canal.

It is important to diagnose and treat slow or halted labour because a long labour can put you and your baby at risk for things like Caesarean delivery, operative delivery, chorioamnionitis (infection), postpartum hemorrhage, fetal compromise, and neonatal intensive care unit (NICU) admission.

This handout outlines risk factors for slow labour and some ways that we manage a slow labour.

Risk Factors for Slow Labour



first vaginal birth



maternal obesity



large fetus



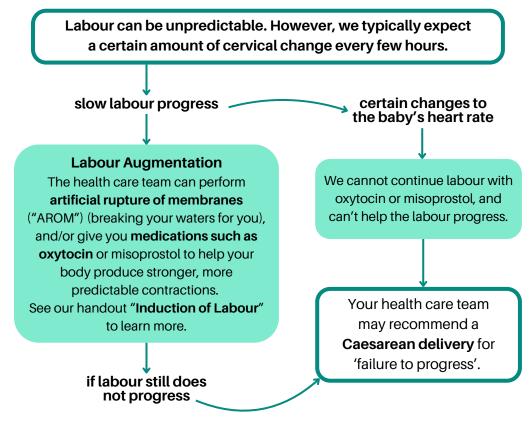
direction your baby is facing



advanced reproductive age of birthing parent



cephalopelvic disproportion (the baby's head does not fit through the maternal pelvis)



Please see our other handouts "Induction of Labour", "Assisted Vaginal Birth", "Episiotomy" and "Caesarean Delivery" for more specific information on some of the management strategies that can be used to support labour.

References

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This material is intended for use by Canadian residents only. It is solely intended for informational and educational purposes. The information presented in these handouts is not to be used as a substitute for medical advice, independent judgement, or proper clinical assessment by a physician. The context of each case and individual needs differ between patients and this material cannot be applied without consultation with a trained doctor. This information handout is not intended for the diagnosis of health concerns or to take the place of the care of a medical professional. This material reflects the information Dudley B, Shah N, Clarfield L, Aqib A, Harris K, Hobson S, Shirreff L available at the time of preparation.

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