Preterm Labor, Home Care

Preterm labor is defined as having uterine contractions that cause the cervix to open (*dilat*e), shorten and thin (*effacement*) before completing 37 weeks of pregnancy. Preterm labor accounts for most hospital admissions in pregnant women.

CAUSES

- Most cases of preterm labor are unknown.
- Small areas of separation of the placenta (*abruption*).
- Excess fluid in the amniotic sac (*poly hydramnios*).
- Twins or more.
- The cervix cannot hold the baby because the tissue in the cervix is too weak (*incompetent cervix*).
- Hormone changes.
- Vaginal bleeding in more than one of the trimesters.
- Infection of the cervix, vagina or bladder.
- Smoking.
- Antiphosolipid Syndrome. This happens when antibodies affect the protein in the body.

DIAGNOSIS

Factors that help predict preterm labor:

- History of preterm labor with a past pregnancy.
- Bacterial vaginosis in women who previously had preterm labor.
- Home uterine activity monitoring that show uterine contractions.
- Fetal fibronectin protein that is elevated in women with previous history of preterm labor.
- Ultrasound to measure the length of the cervix, if it shows signs of shortening before the due date, it may be a sign of preterm labor.
- Using the fibronectin and cervical ultrasound evaluation together is more predictive of impending preterm labor.
- Other risk factors include:
  - Nonwhite race.
  - Pregnancy in a 17 year old or younger.
  - Pregnancy in a 35 year old or older.
  - Low socioeconomic factors.
  - Low weight gain during the pregnancy.

PREVENTION

Not all preterm labor can be prevented. Some early contractions can be prevented with simple measures.

- **Drink fluids.** Drink eight, 8 ounce glasses of fluids per day. Preterm labor rates go up in the summer months. Dehydration makes the blood volume decrease. This increases the concentration of *oxytocin* (hormone that causes uterine contractions) in the blood. Hydrating yourself helps prevent this build up.
- **Watch for signs of infection.** Signs include burning during urination, increased need to urinate, abnormal vaginal discharge or unexplained fevers.
- **Keep your appointments** with your caregiver. Call your caregiver right away if you think you are having uterine contractions.
- **Seek medical advice with questions or problems**. It is much better to ask questions of your caregiver than to be in untreated preterm labor unknowingly.

MANAGEMENT OF PRETERM LABOR, IN & OUT OF THE HOSPITAL

There are a lot of things to manage in preterm labor. These things include both medical measures and personal care measures for you and/or your baby. Most preterm labor will be handled in the hospital. Things that may be helpful in preterm labor include:

- **Hydration** (oral or IV). Take in eight, 8 ounce glasses of water per day.
- **Bed rest** (home or hospital). Lying on your left side may help.
- **Avoid intercourse and orgasms.**
- **Medication (*antibiotics*) to help prevent infection**. This is more likely if your membranes have ruptured or if the contractions are caused by infection. Take medications as directed.
- **Evaluation** of your baby. These tests or procedures help the caregiver know how the baby is doing and may do in the case of an early birth. Including:
  - Biophysical profile.
  - Non-stress or stress tests.
  - Amniocentesis to evaluate the baby for fetal lung maturity.
  - Amniotic fluid volume index (AFI).
  - An ultrasound.
- **Medications (*steroids*) to help your baby's lungs** mature more quickly may be used. This may happen if preterm birth cannot be stopped.
- Tocolytic medications (medications that help stop uterine contractions) may help prolong the pregnancy up to 7 days. This is helpful if steroids medication is needed to help the baby's lungs mature.
- Your caregiver may give other advice on preparation for preterm birth.
- Progesterone may be beneficial in some cases of preterm labor.

TREATMENT

The best treatment *is* prevention, being aware of risk factors and early detection. Make sure to ask your caregiver to discuss with you the signs and symptoms of preterm labor, especially if you had preterm labor with a previous pregnancy.

HOME CARE INSTRUCTIONS

- Eat a balanced and nourished diet.
- Take your vitamin supplements as directed.
- Drink 6 to 8 glasses of liquids a day.
- Get plenty of rest and sleep.
- **Do not** have sexual relations if you have preterm labor or are at high risk of having preterm labor.
- Follow your care giver's recommendation regarding activities, medications, blood and other tests (ultrasound, amniocentesis, etc.).
- Avoid stress.
- Avoid hard labor or prolonged exercise if you are at high risk for preterm labor.
- **Do not** smoke.

SEEK IMMEDIATE MEDICAL CARE IF:

- You are having contractions.
- You have abdominal pain.
- You have vaginal bleeding.
- You have painful urination.
- You have abnormal discharge.
- You develop a temperature 102° F (38.9° C) or higher.

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