Absolutely Everything You Need to Know About Labor and Delivery

Are you ready to give birth?

If you're pregnant, it is highly likely that you've asked yourself that very question before. Sure, getting pregnant may have been tough, but from what you've heard, you undoubtedly know that going through labor can be tougher still – in a different way.

Admittedly, it is a satisfying and beautiful experience. That much should go without saying.

But still, it is a trying experience too, and one that you should definitely be as prepared for as possible.

Bearing this in mind, let's ask that same question again: Are you ready to give birth? Do you know what you should know about delivery? Do you know what you should do when you go into labor?

Many people are inclined to think that everything will just fall into place when the time comes. While that can happen, the truth is that it helps to be fully prepared so that you can be completely certain that everything is going to fall into place, and not have to face the prospect of anything going wrong.

Being confident, well informed, and fully supported, you'll find that child labor can truly be one of the most memorable and rewarding experiences of your lifetime.

That's what this guide is going to aim to provide for you – all the information that you need to overcome every uncertainty that you may have about labor and delivery. So when the time finally does come, you'll know how to recognize it, and exactly what to do!

Of course, this doesn't mean that you should forego any childbirth education classes that you may be taking. They too can help you, and provide you with some practical exercises that would be beneficial in the long run.

Still, now that you have this guide in your hand, you're off to a flying start.

Chances are, you fully expected that the very first thing we'd discuss is labor itself, and that discussion is going to take us to a period in time that is actually right before you actually go into labor.

Why are we looking at what happens before you go into labor? Well, you're about to find out in this next section!

Identifying the Signs and Symptoms of Pre-Labor

Deep into your third trimester, your body is already preparing itself for the labor that it knows is about to follow.

Due to this, there are many changes, both noticeable and unnoticeable, that will occur. And, as a direct result of these changes, you might even sometimes mistake some of them to be the signs that you're going into labor.

False alarms such as this, while common, are something that you'll want to avoid.

Each and every time that you feel you're going into labor, it automatically gives you a sense of urgency and you'll want to get everything sorted and rush off to the hospital. When this happens due to a false alarm, it can be quite tedious.

Imagine if you had numerous false alarms, as you very well may end up having!

Honestly, it isn't too difficult to spot the differences between the false alarms, and real labor, if you know what to look out for. That's why we're kicking this guide off during the timeline right before actual labor occurs.

By doing so, you should be able to grasp exactly what your body is going through, and be able to pinpoint the difference between what are just natural bodily changes, and actual labor. Understanding this difference is the main drive of this section.

Shall we get started?

Symptoms in the Days and Weeks Leading Up to Labor

Within the third trimester, you'll eventually find yourself facing various symptoms and signs that will help you to know that your due date is fast approaching.

Admittedly, these signs vary from person to person, but if you're able to know and understand them, then you should be able to spot at least one or two, which will then give you an inkling of just how soon you may go into labor.

Most notable among these symptoms is the one known as 'lightening' or 'dropping'.

In short, lightening occurs when your tummy seems to descend into the pelvis, lightening the load on your upper abdomen. For some mothers, this is a very obvious change, but in others it could be almost unnoticeable.

As a result of this lightening however, you can expect that you'll sense yourself carrying your baby differently, and also may find that the urge to pass urine comes stronger and more frequently, due to the increased pressure at the pelvic area.

Also, this increased pressure can cause cramps, groin pain, and even a constant lower backache.

Coupled with this, all the other changes in your body can cause several other symptoms.

For one thing, you can expect to lose some weight during this period, the amount of water your body retains is going to fluctuate. In some cases, you may find that you don't actually lose weight, but gain weight more slowly than previously.

Furthermore, you're going to have a lot of hormonal changes, and can expect your energy levels to soar and dip at the drop of a penny. Sometimes, these soaring and dipping energy levels may be accompanied by various urges, to do things like prepare for your baby's arrival.

Finally though, there are the more solid signs of upcoming labor, and these include:

1. Passage of the mucus plug

During your pregnancy, there has been a thick wad of mucus that has sealed off your cervix, to protect your baby from infections that may travel through it.

Chances are, you didn't even know it was there, but as your delivery date approaches, you can expect that it will become dislodged, when your cervix begins to dilate. Mind you, this can occur anything from a few days before labor, to the point right at labor itself.

Many people feel that this is a firm indication that you're about to go into labor, but this really isn't the case. So even if you do notice the passage of the mucus plug, don't panic, you may not be in labor for quite some time still.

2. Pink show

During the dilation of the cervix that we just mentioned, some unfortunate side effects can be experienced, and the most common among these is the rupturing of some of the blood capillaries that lace the surface of the cervix itself.

While this isn't a big problem, it can manifest itself physically by a small amount of 'pink show', or bleeding.

Once again, the dilation of the cervix can occur anywhere from right before, up to a few days before, labor, so it doesn't mean that you're in labor, just that you will be soon enough.

Both of these two signs indicate the labor is going to happen soon. However, it is still a very subjective measure, and varies from person to person, so you're not going to be able to gauge exactly how soon it will be before you are actually in labor.

Furthermore, there is one other symptom that you'll face that serves to more than confuse the situation...

Braxton Hick Contractions

Mainly, this is the cause of the so-called 'false labor' self-diagnosis that many pregnant women face.

Essentially, Braxton Hick contractions are meant to be 'practice' contractions, or rather, the body's way of getting ready for the actual event itself. Unfortunately, unless you've been through labor before, it is understandable that you could find it hard to differentiate between these practice contractions, and the real thing.

Although some people say that there are readily apparent differences, the truth is that despite being billed as 'practice' contractions, Braxton Hick contractions can appear to be just as intense, and just as painful.

Add to that the fact that you have no benchmark to compare it against, and it should be easy to see why things can become rather confused.

Of course, you don't want to be rushing to the hospital, phoning up your midwife, or getting everything started for what amounts to a false labor. Bearing this in mind, it is crucial that you learn the difference between Braxton Hick contractions and the real thing.

Some ways to pinpoint whether or not your contractions are an indication of labor, or simply Braxton Hick contractions include:

1. Regularity and frequency of contractions

'Real' labor consists of contractions that increase in frequency, regularity, and intensity.

In other words, this means that you're going to be able to spot a pattern emerging, where the time between your contractions is steadily reducing, and they're getting longer, stronger, and more painful.

If this isn't the case, then chances are, your contractions are of the Braxton Hick variety.

2. Subsiding contractions

Should your contractions eventually subside, that means that they were obviously Braxton Hick contractions.

To check this out, try changing your position, or even drinking two glasses of water or some other (non-alcoholic!) beverage. Admittedly, this doesn't always work, but it is a good thing to try, just to be sure.

3. Center of pain

For some women, Braxton Hick contractions are accompanied by pain that is noticeably centered in the lower abdomen, as opposed to the lower back (where 'real' contractions would be).

Through these signs you should be able to safely identify the difference. Still, don't feel bad if you're unable to, for some women, false labor really can convincingly appear to be real labor, and so it may be close to impossible to differentiate.

Similarly, it is worth keeping in mind that for some women, their real labor could seem to be a false labor, and that's why you've undoubtedly heard the stories of women being surprised when their baby just 'pops out' while they're out shopping!

With what you know now though, you're as prepared as possible to identify pre-labor when it occurs.

So now, let's move on to the real thing!

Starting to Go into Labor: What to Do, and How to Handle it!

When you do go into labor for real, it can be a pretty daunting affair. Almost immediately, you'll recognize that you have to get so many things sorted out, and trying to do everything at once can cause you to panic.

Remember: Don't panic! Try to keep as calm and composed as possible so that you're able to do everything that you need to do.

To this end, there are several steps that you can take to ensure that everything is prepared for when you go into labor. Let's take a minute to go over some of these things...

Preparation for Labor

Right from the moment that you're pregnant, you know that eventually, you'll end up delivering your child. So, essentially, you should have a whole 9 months to prepare everything and get ready for when it actually happens.

Even if you're already well along in your pregnancy, it's never too late, and you'll find that most of the preparation that you need for your labor and delivery is really pretty basic.

Right now, we're going to give you an insight into the exact preparation that you'll need:

- 1. Be sure to arrange your caregiver. Essentially, your caregiver could be your husband, or could even be your mother, or anyone else close to you who is going to help you through your labor.
- 2. Plan ahead as to whether you're going to be delivering at home, with the help of a midwife, or going to the hospital.
- 3. If you're delivering with the help of a midwife, be sure to have their number somewhere that is easily accessible.
- 4. If you're delivering at a hospital, be sure that both you and your caregiver know the best way to get there, alternative routes if necessary (to avoid rush hour traffic and so on), as well as where the best car park is. Also, be certain that your doctor's phone number is somewhere accessible, and that you've done all the required paperwork well in advance too.
- 5. Assuming you have other children, you should prearrange for someone willing to come in and take care of them at a moments notice.

Now, you should notice that none of these steps are anything too complicated, and indeed, you should be able to do them without too much hassle.

Ideally, your caregiver should be the person that you trust and want by your side throughout the entire process. He or she is going to be a form of support for you, so you should definitely choose wisely.

Also, your caregiver should know what labor consists of, and be able to help you along as much as possible!

Preparing this well in advance is going to help ensure that your entire delivery goes as smoothly as possible. But we're getting slightly ahead of ourselves at this stage...

Although you may know how to identify real labor already, it is important that we establish just when exactly you should be calling your caregiver and midwife or doctor. Admittedly, if you really are in labor there's no such thing as 'too early', but it would still help to have some idea of what to expect...

What to Do When Labor Starts...

Based on what we discussed earlier about Braxton Hick contractions, you should already have a good idea of what 'real' contractions are going to be like. In a nutshell though, they're going to be increasing in intensity, frequency, and length.

Still, there are no hard and fast rules as to exactly when you should begin to call your caregiver. Needless to say, it will be a while before you are able to determine that it really is time for your baby to be delivered, so it would be helpful to have a rough guideline.

These are some things that you should consider, but do remember that it really is very subjective:

1. 5-Minute apart contractions

As a rule of thumb, it is time to start getting things in motion when you start to have contractions that are 5 minutes apart. Timing your contractions is, of course, part and parcel of determining that you're really in labor, so once you reach this point, it's time to get going.

Mind you, it wouldn't hurt to do it sooner, even at the point when the contractions are 10 minutes apart. This is due to the fact that some women do have very rapid labors, and their contractions can increase in frequency very quickly.

Similarly, if you have a long trip to your hospital, or your midwife will take time to get there, you might want to start earlier than usual.

2. When your water breaks

If your water has broken already, that means that you really are quite close to delivery, and you should immediately start to your preplanned arrangements.

In some situations, the fluid may be stained a dark, greenish-brown color, and if so, you should act quickly because your baby could be in distress. Remember not to panic though, the best thing to do is to take action calmly!

3. Vaginal bleeding

Should you notice vaginal bleeding (not just a pink show), it could be a sign of a premature separation of the placenta. Once again, don't panic, this is something that doctors can deal with, but it is imperative that you get to the hospital as quickly as possible.

Anyway, once you've identified these signs, and know that you should be getting things in motion – all that remains is to put your plans into action. Call up those people that you should call up, primarily your caregiver, doctor or midwife, and anyone else who is going to help you take care of things.

Then, head over to the hospital, or wait for your midwife to arrive, whichever is the case.

Now that you're in labor, this is where the real trying part begins...

Facing Both Labor and Delivery

Despite the fact that, now, you should be at the hospital and have professional care, or with your midwife, who essentially amounts to the same thing – you're really just getting to the tough part!

Honestly speaking, labor can last quite a long time.

For first time mothers, the average amount of time spent in labor is anything from 12 to 18 hours! Yes, that is pretty much half a day or more!

Admittedly, you won't be at hospital for most of this time, seeing as you would have been timing your contractions and only headed over when they were 5 to 10 minutes apart. Still, even by doing that, you could still be waiting for hours in the hospital before you actually deliver.

So that you know exactly what you're go to be facing, let's go over the four main stages of labor and deliver.

First Stage

In a nutshell, this first stage begins when your contractions do. From that point onwards, you're officially in labor, but as you know, the vast majority of this time will be spent away from the hospital, until your contractions are 5 to 10 minutes apart.

Initially, the full brunt of labor won't really hit you. When the contractions are rather mild, and spaced out, you'll have plenty of time to rest and relax in between, especially when the spacing between contractions is more than 20 minutes.

So just go about your normal schedule, and keep yourself occupied till the window closes.

Once it does, head over to the hospital, call your midwife, and start getting things into motion.

Gradually, as your contractions approach the 5-minutes-apart threshold, things will seem to be getting more serious. At this stage, you'll undoubtedly be realizing that your baby is about to come out, soon, and you'll be mentally preparing yourself for the trials ahead!

Still, 5 minutes in between contractions does give you some time to wait, so use that time to do what you need to do – go to the bathroom, have a drink, try to relax, and maybe read a magazine or talk to your partner.

Some women, at this stage, start taking various forms of pain relief, which your doctor or midwife should be able to provide. Others however opt to not take any form of pain relief, and the choice is entirely up to you.

Soon enough, the length of your contractions will get longer and longer, and may even be up to a minute long.

Finally, at the tail end of stage one, you're going to face one of the hardest portions of your labor. By now, the contractions you're facing will be about 2 to 3 minutes apart, and last up to a minute and a half or more. That means that you're going to just have mere seconds in between contractions.

Sometimes this stage can last up to an hour or more, so be prepared!

During this time, it is completely normal if you feel nauseous, and shake or vomit. Don't worry about it, it happens to many women, and it is just part and parcel of your body's reaction to being in labor.

Whoever your caregiver is, they should be aware of this trying time during your labor, and this is when any and all support they can offer is most crucial. You'll need all the backing and encouragement that you can get!

Try to get into as comfortable a position as possible, and in the few seconds of break you have in between contractions, sip cold water. Hang in there, no matter what!

Be aware that this stage officially ends the minute you become fully dilated, and that means that from there on out, you're officially delivering your baby!

Second Stage

Many people refer to this stage as the 'pushing' stage, because it begins once you are fully dilated, and ready to give birth, and ends, well, once your baby has been fully delivered!

Generally speaking, this second stage could possibly last for up to 4 hours. Yes, that is a long time, but optimistically, it rarely tends to run that long for most women, though it does vary greatly on a case to case basis.

Also, depending on the medications that you're taking, your position, and the position of your baby, the length of time it takes could be either shorter or longer.

Of course, such things as C-sections don't really fall under this umbrella at all.

Anyway, assuming you're going about it the 'old fashioned' way, and pushing, there are several things that you can do to smooth things along and help yourself and your child!

1. No contractions after dilation

Sometimes, right after you are dilated, your contractions suddenly subside and go away for a period of time. Don't be anxious if they do – this is a completely natural occurrence.

In some cases, this 'rest and relax' period as it is termed, could last for as long as an hour.

In theory, this lapse in contractions exists so that the mother can gather her strength, and the baby can get into position. Some hospitals advise that you try to forcefully push even during this period, but that isn't really necessary.

Best advice: Just sit back, relax, and wait for the contractions to come back.

2. Getting into position

Now that your baby is ready to come out into the world, you should be getting into the best position possible to help him or her do just that!

Modern birth beds can be adjusted to accommodate a wide range of positions, and the best ones are those where you're at least relatively 'upright' so that gravity helps the process along.

Some mothers find this very uncomfortable though, in which case the more traditional 'lying-down' positions are okay too.

Normally, you would have talked to your doctor, midwife, or anyone else who is assisting you, and determined the position that you'd like to give birth in well in advance of this point in time.

End of the day, it's up to you!

3. Pushing urges

Some women end up feeling an almost uncontrollable urge to push. Others feel nothing at all.

Depending on your circumstances, you may find that it is impossible to fight against the urge to push, and by this stage – you really shouldn't. Really, this is the more 'natural' type of childbirth, where your body tells you where and when to push, and you do so.

However, for women who don't feel the urge to push at all, there are other options.

One of these includes the much-used 'hold your breath' technique, or 'purple pushing', as it is otherwise known. Basically, purple pushing consists of holding your breath to the count of ten during contractions, while pushing.

While, as you would expect, your doctor or midwife will advise you as to when and how to push, it is definitely something that you should discuss beforehand.

No matter what you do though, when purple pushing do not hold your breath for more than a ten-count. What you're trying to accomplish is to help along the 'push', but you don't want to starve your body, and baby, of oxygen in the process!

4. No time limits on pushing

Although standard birth coaching does recommend that you push whenever possible, the truth is that it really isn't necessary. We now know for a fact that forcing pushes doesn't really help you deliver that much faster – the difference is a few minutes, at very most.

So therefore, you can request of your doctor or midwife that there be no time limits placed on your pushing, so long as both you and your baby are doing well.

That way, although delivery might take just a little longer, you're also cutting down the risk of meconium stained amniotic fluid – which can cause your baby to go into distress.

Everything said and done, as long as anesthesia isn't used, and as long as your baby is fine, there is no real reason to impose a time limit on yourself. Sure, you might want to

not make this stage last too long, but that should be entirely up to you, and you can decide to push at your own comfort level.

Knowing all of this about pushing, you should be able to get through this second stage with little or no problem. Of course, your caregiver should be there, supporting you every step of the way, and you're going to be grateful for that help.

In normal situations, the child is born headfirst, and as his or her head begins to crest, and eventually the rest of the body emerges, that is the end of this second stage of labor.

Naturally, you're probably wondering, "So, what's left after this?", and many people do, but the truth is that there is at least one more formal stage to childbirth, and another, more informal stage too!

Third Stage

When compared against the two other stages that we've already discussed, this third stage really is a 'mini' stage.

As we said, by now, your baby has already been delivered, and chances are you may actually even be holding him or her in your arms for the very first time, which is a beautiful and joyous moment for every mother!

So when you're asked to push again, the first thing to cross your mind would undoubtedly be, "Why?"

And the answer to that is simple: Even though your baby has been delivered, you need to expel yet another thing from your body: The placenta.

Admittedly, pushing the placenta out is a lot easier than the process of delivering your baby. For one thing it has no bones, and can be pushed out with ease as a result of its more flexible structure.

In some cases, this could take up to an hour, though for most mothers, it takes just a matter of minutes.

Seeing as the 'push' involved this time is a lot easier, you don't really need to concern yourself too much with it, and can really just afford to concentrate on your newborn child. Don't let the fact that your work isn't over spoil this very special moment of bonding!

Some evidence suggests that nursing your baby will help the uterus contract naturally and expel the placenta. If you plan to breastfeed, even if just initially, this certainly isn't going to hurt, and so you might as well try it.

With your baby in your arms now, the three official stages of labor are over. But, as we did mention, there is a fourth 'unofficial' stage...

Fourth (Unofficial) Stage

Mind you, the reason this stage of labor is considered unofficial is because, now that your baby has been delivered, and your placenta expelled, there really aren't going to be any more contractions.

But this point of time, after childbirth, known otherwise as the 'postpartum' stage, is unofficially accepted as the fourth stage of labor, despite its lack of contractions.

Also, this stage is not without its own trials and tribulations.

All things said and done, now that your child has entered this world, and is in your arms, you're really entering a new stage of your life. Understandably, you're going to be feeling a mix of emotions, and although happiness and joy tend to be overwhelming at the start, gradually, they are going to give way to apprehension and uncertainty.

Don't feel guilty about this – it is only natural to worry, and as a parent, you're going to find that you're bound to worry a whole lot more than you did previously!

At the same time, your body is also undergoing changes of its own. Having changed in so many ways to accommodate your pregnancy, it is now facing a reversal, and going back to be close to the way that it once was.

During this time, a lot of things are happening at once, externally and internally, and so you can expect that you're going to be affected in more ways that one.

Among the trials of this period, none is more apparent than that of postpartum depression.

Many things are linked in to cause it, and they range from such things as hormonal imbalances due to your condition, right down to conflicts, stress, a difficulty with adjusting to changes, and so on.

Really – the list of possible factors is a long one, and encompasses most everything that you'd naturally go through after a pregnancy.

So many women go through postpartum depression of some form or other, though in most cases it is pretty mild. Occasionally though, some women find themselves faced with more severe cases of postpartum depression, and it is in situations such as that where you should definitely get help.

Do not take postpartum depression lightly. It can, quite frankly, develop into a very serious disorder and cause a host of other problems.

While feeling down occasionally is perfectly normal, and natural, if you find that it is spiraling out of control you should quickly let others know, and seek professional medical help. Nip off the problem quickly, so that it doesn't get to the point where you're unable to function due to being so severely depressed.

Yes, in some cases postpartum depression can be so severe that it actually leads to complete mental breakdowns.

Anyway, now that you're aware of the risk, you know that it is something to look out for. Be sure to let your partner know too, as he is going to be a support that you definitely require, and could help you when you feel down.

Apart from that, this fourth stage is really something that you'll find yourself easing into, slowly but surely.

One thing that definitely helps is to be prepared for your child right from the start. That means that you should have as much as possible sorted out before you even go into labor, so that by the time you've delivered your child, and are ready to go home, you can be assured that everything is nicely sorted out and awaiting your arrival.

With that, your labor and delivery is done, and you're pretty much at the last legs of your journey. Granted – an even bigger journey awaits you, and that is the journey of motherhood that is going to last you the rest of your lifetime!

Getting ready for that, and learning about it, is another story though.

Final Words on Labor and Delivery

Do you feel like you now know everything you need to know about labor and delivery? Well, you should! Over the course of this guide, we've walked you through absolutely everything – starting right from the very beginning, in the days leading up to labor, and ending with the delivery of your child, and a few days after that!

In essence, you now should have a solid grasp of the whole picture.

As you read this guide, you may have noticed several points of interest that stuck with you, but it really is necessary that you remember that each point made is really just part of the bigger whole.

Let's go over some of the highlights of what we've covered, just to be certain that you're on top of everything:

- 1. First, we started off by looking into some of the signs and symptoms that start a few days before labor.
- 2. Next, we looked at 'false labor' and how to separate Braxton Hick contractions from 'real' contractions.
- 3. After that, we delved into labor itself, and what you should do to prepare for it, as well as how you should handle it when it starts.
- 4. Then, we explored the three official stages of labor, making certain that you know what to expect in each and every one.
- 5. During this time, we also covered some of the essential 'need to know' aspects of pushing during labor.
- 6. Last, but certainly not least, we dealt with the final 'unofficial' fourth stage of labor, and you should know the risks of postpartum depression now too.

If any of what we just mentioned sounds unfamiliar, then you should be leafing back through the pages before this one, and reading up on what you might have missed out on!

Equipped with the knowledge that you now have, you'll find that you aren't likely to get thrown any 'curveballs' during your labor, and you should be able to face it fully aware of everything that is going on, and how to prepare and deal with it fully.

Good luck!