

Maternity

What happens when my waters break at 37 weeks of pregnancy or more?

Introduction

Sometimes your waters (amniotic fluid) break before your labour starts. This is called pre-labour rupture of membranes. This can be quite normal. About 10% (1 in 10) of women will experience 'pre-labour rupture of membranes' (PROM), meaning that contractions start after the waters have broken rather than before. Research has shown that approximately 60% (6 in 10) women will go into labour within the 24 hours after breaking their waters. The rest may take a bit longer to start experiencing contractions and some may need their labours to be medically induced.

This leaflet explains to you what you need to do if you think your waters have broken but you're not experiencing any contractions.

How do I know my waters have broken?

You may notice a 'gush' of fluid, or that your underwear feels damp. The amount of fluid you lose may vary from a trickle to a gush. The colour of the fluid is usually clear, pink or straw, but occasionally it can be green. Green-coloured fluid can mean that the baby has pooped inside the womb.

What should I do next?

Put a maternity pad on and call the maternity unit on 0203 312 6135 for advice. If you are having your baby on the Birth Centre, please ring directly on 0203 313 1140 (Queen Charlotte's Hospital) or 0203 312 2260 (St Mary's Hospital).

The midwife or healthcare professional will ask for some details over the phone and advise whether you need to come in for a check-up.

Group B Streptococcus.

If you have been told at any point during your pregnancy that you have Group B Streptococcus (GBS) or are GBS positive, you will need to please come to the maternity unit as soon as your waters have broken. This is because risks of GBS infection travelling through to the baby are higher once your waters have broken and so you will be offered antibiotics through a drip.

What happens during the check-up?

The midwife will ask you some questions and get details of when you think your waters broke. They will take your temperature, pulse, respiration rate and blood pressure, feel for the position of your baby (similar to an antenatal appointment) and listen to the baby's heart rate. They will ask to see your maternity pad if you've used one. This is so that they can assess the amount and colour of the waters.

Sometimes if it is not clear that the waters have broken, the midwife or doctor will ask you if they can do an internal check. During this test a speculum (plastic duck-bill shaped instrument) will be

gently inserted into your vagina. It is very similar to a smear test. It should not hurt but may be uncomfortable. They may also take a swab to test for the presence of amniotic fluid, which will tell us if the waters are likely to be broken.

What are my options if my waters have broken but I am not in labour?

- 1) **Expectant management for up to 24 hours.** You may choose to go home and wait for contractions or other signs you're in labour. Alternatively, if labour does not start within 24 hours of your waters breaking, you will return to the maternity unit for an induction.
- 2) **Induction of labour as soon as possible:** You will be given a bed in hospital and the induction of labour will start as soon as the maternity unit can do it. This all depends on the activity on the unit at the time of your planned admission.

The doctor or midwife will explain the option they would recommend for you and why, depending on your clinical history and your personal circumstances. We will listen to what your choice is and put a care plan in place for you.

While waiting for your labour to start or for an induction, contact the maternity unit if you experience any of the following:

- **Your waters change colour**

The waters should remain clear, pink or straw colour. Any other colour may indicate infection.

- **Your temperature is more than 37.5°C**

Take your temperature every four hours while you are awake. If it rises above 37.5°C, this could indicate infection.

- **You are bleeding**
- **Your baby is moving less than normal**
- **You are experiencing flu like symptoms**

Shivering, sweating, generalised muscle ache or continuous abdominal pain are all signs of possible infection.

You should contact the maternity unit if you start to have regular and strong contractions that come every five minutes.

Please see the attached diary that will guide you through these observations and will provide more information on what to look out for. Please ask for this if you haven't been given it.

Frequently asked questions

Is it dangerous if my waters break before labour start?

Research has shown that the risk of infection to the baby is about 0.5% (1 in 200) when the waters are intact. Once the waters break the risk of infection rises to 1% (1 in 100). For this reason, we advise you to come to the maternity unit for a check-up so a personalised plan of care can be made according to your wishes and needs.

If labour is induced, will my baby be monitored throughout labour?

Yes. We would recommend continuous monitoring of your baby's heartbeat once you are in established labour.

Is it safe to have a bath or shower?

Yes. You can have a bath or shower.

Is it safe to have sex once the waters have broken?

We **do not** advise having sex as this would increase the risk of infection for you and your baby.

Where can I deliver my baby?

If your labour is induced, or if you go into labour after 24 hours from your waters breaking, we recommend you give birth on the labour ward as we advise continuously monitoring your baby's heartbeat in labour.

How long will I need to stay in hospital for after I have had my baby?

We advise that women with PROM of more than 24 hours before starting labour stay in hospital for at least 12 hours following the birth. This is so that we can observe your baby and make sure there are no problems.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3312 7777** (10.00 – 16.00, Monday to Friday). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:
Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street
London W2 1NY Email: ICHC-tr.Complaints@nhs.net Telephone: **020 3312 1337 / 1349**

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team:
imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

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DIARY

Instructions: Please complete the following diary after your waters have broken until you go into labour, OR until come to hospital to have your labour induced. If you have any questions or concerns about your health, or the wellbeing of your baby, please contact your community midwife, your birth centre, or the labour ward.

	Things to look for, every 4 hours whilst you are awake	Normal values	Abnormal values	Action
1	Your temperature (taken under your tongue)	36.0*c -37.5*c	35.9*c or less 37.6*c or more	If within normal values continue checking every 4 hours while awake. If unsure, call your midwife If abnormal values call your midwife
2	Amniotic fluid/your waters	Colourless, pale yellow or slightly pinkish Slightly cloudy No smell	Green, brown Lumps of meconium Smelly	
3	Uterus	Contractions that come and go Only painful during contractions	Painful all the time, painful between contractions	
4	Vaginal bleeding	Mucosy plug – it looks like a piece of mucus (snot) or jelly, thick gelatinous mass, can be clear-yellowish or blood stained.	Haemorrhage, bleeding, running bright red blood	
5	Fetal movements/movements of the baby	The normal pattern for your baby	No fetal movements in the past 4 hours Less movements than usual or change in the movements	
6	General wellbeing	Feeling well, your normal self	Feeling unwell	

DATE & TIME	TEMPERATURE	COLOUR OF AMNIOTIC FLUID	SMELL OF AMNIOTIC FLUID	UTERUS	VAGINAL BLEEDING	FOETAL MOVEMENTS	GENERAL WELLBEING	Any other concerns?
<u>Example</u> 01/06/12 10.00am	36.1	clear	No smell	Not painful	NO	YES	Feeling well	NO

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<u>Example</u> 01/06/12 10.00am	36.1	clear	No smell	Not painful	NO	YES	Feeling well	NO