



How Do I Know I am in Labor?

Many patients are anxious about knowing when labor begins and getting to the hospital on time. At the same time, patient often present to the hospital, only to be sent home due to a “false alarm”. Here are some things to keep in mind.

False Labor

A contraction is when the muscles of the uterus (womb) begin to tighten. You may experience pressure or the uterus “balling up”. In false labor, there are contractions but they don’t cause the cervix (the opening of the womb) to dilate open. It may be very difficult to tell the difference between a contraction of false labor and one in true labor. However, in false labor the contractions tend to be less strong and less frequent. Typically, the contractions do not intensify and do not get more frequent. In some cases, they go away with walking.

True Labor

True labor is when the uterine contractions cause the cervix to dilate. Usually these contractions come more often, are stronger and tend to last longer.

Because these contractions cause changes in the cervix, there may be other symptoms in true labor. It may cause “bloody show” which is a pink-tinged mucous discharge from the vagina. They may also cause your “bag of water to bust”. The baby and its water are surrounded by the amniotic membrane and when it ruptures during labor, there may be significant loss of fluid.

As a rule of thumb, timing contractions can cut down on unnecessary trips to the hospital. If it is your first baby, wait until your contractions are about five minutes apart for two hours. If it is not your first baby, then wait until your contractions are five minutes apart for one hour.

False labor is common and frequently, a vaginal examination is required to tell if it is true labor or not. Please feel free to call if you have problems.

For more information call:

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