

Induction using a balloon catheter

In consultation with you, your gynaecologist or midwife has decided to induce your labour. To prepare for this induction, gynaecologists and clinical obstetricians use a balloon catheter.

The cervix

An internal examination has shown that your cervix is not yet 'mature' enough for inducing labour at this time. An immature cervix feels long and rigid. There is usually no dilation yet either. A mature cervix is tilted forward, slightly open, soft and at least ½ effaced (effacement is the shortening of the cervix).

How do you mature a cervix?

To mature the cervix, one needs to insert a catheter (thin tube) into the uterus. This is done using a speculum (specula/spreader) or guided by internal examination. Due to the internal pressure on the membranes and the cervix, the balloon catheter exerts pressure, which causes dilation. The pressure also causes the body to produce hormones (prostaglandin), which mature the cervix.

After inserting the balloon catheter, a balloon is filled with water at the top, the size of a bouncing ball. Before and after inserting the balloon catheter, the condition of the child is monitored using a CTG (an ECG of the baby):

The balloon catheter often falls out by itself at a certain point. This usually takes a day, but it could also take longer. You can wait out this time period

at home, usually you will experience very little hindrance. You can continue to walk around or take showers. After this, the cervix is usually sufficiently mature for further induction.

We advise against bathing, internal rinsing or sex, since there is presumably an increased risk of infection if the balloon is in the uterus.

It is wise to stay at home on this day (these days) and to get enough rest for the coming delivery.

The arrangements

The balloon catheter will be inserted at the maternity ward of the Mother and Child Centre at the Amstelland Hospital.

After insertion of the balloon catheter, we will make an appointment with you for the next day. Sometimes an earlier reassessment is agreed on. A balloon catheter may remain in place for no more than 48 hours.

What can happen?

You may experience some menstruation-like abdominal/back pain, and somewhat more Braxton Hicks contractions. It is also normal for you to lose some mucous or blood. When the balloon drops out, you can simply dispose of it and contact us by phone.

Does it affect the baby?

The baby will probably not even notice it. After all, the balloon is on the outside of the membranes. You should therefore continue to feel the baby move as you are used to.

When should you call us?

- You can always contact us if you are worried.
- If you experience a lot of pain, or if you feel the baby moving less than you are used to.
- If your water breaks.
- If you have a lot of bright red blood loss (more than a menstruation).
- If the balloon falls out.

What happens then?

In some cases we will ask you to come to the hospital for an assessment and a CTG (an ECG of the baby).

- The day after insertion of the balloon catheter, we will ask you to contact our maternity ward via telephone at approximately 06:30, in order to discuss the time we can assess you (carry out an internal examination to feel how 'ripe' your cervix is) and to induce the labour upon sufficient ripening.
- If the uterus has not ripened sufficiently, a new balloon catheter will be inserted or refilled, and you can stay with proper check-ups of mother and child. Sometimes admission and observation is chosen.

Which telephone number should you call?

You can call the maternity ward at telephone number 020 - 7557111 (our direct number) or 020 - 7557000 (reception of the Amstelland Hospital, and then you can ask to be transferred to the maternity ward).

Notes on this leaflet

If any information in this leaflet is unclear or incomplete, please notify us. You can share your remarks with us via voorlichting@zha.nl.