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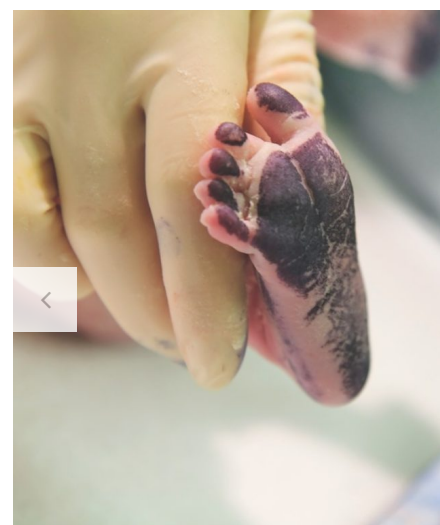


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## On your mark, get set

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*Wait, don't head to the hospital just yet! Read up on early labor, so you're prepared to push through the initial pains from the comfort of home.*



Labor room ling...



As excited as you are to feel that first contraction finally hit, you'll spend much—if not all—of the first phase of labor in your own home. Learn how to keep tabs on your progress and cope with those first pains when there's nary a nurse in sight, as well as what signs will indicate

when it's finally time to grab your hospital bag and hit the road.

### In the beginning

“One of the first signs that you're in labor is that the baby drops,” says Demetria Clark, director and founder of [Birth Arts International](#), an international doula-training organization. “You may notice that your belly is sitting much lower and your gait has changed.” Other signs include cramping, discomfort in your back and hips, the loss of your mucus plug and, for some moms-to-be, diarrhea.

If your water breaks, it can be a subtle leak or a big rush, though the latter is far less likely. While it's different for every woman, one thing is definite: “Early labor will begin within hours of your water breaking,” says Sherry Ross, MD, OB/GYN and women's health expert at [Providence Saint John's Health Center](#) in Santa Monica, California.

When you've spotted the first signs that baby is on the way, remind yourself that this is more than likely going to be a marathon, not a sprint. Pace yourself. “A first labor can be long, and it is hard work,” Clark says. “If you can rest, do it. Take a warm bath and a nap, if possible.”



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False alarms are very common, so how do you know if it's the real deal? "False labor may start out strong, but it usually just peters out. If walking makes the contractions go away, it's false labor," says Clifford J. Goodman Jr., MD, medical director and founder of **MomDoc**, an OB/GYN-focused practice in Arizona.

True labor contractions do not subside with rest or any change in position. Contractions that taper off or disappear completely with movement are likely Braxton Hicks. "True labor contractions intensify over time, are spaced at regular intervals that shorten as labor progresses, and typically begin in the lower back and move toward the abdomen," says Rachel Rising, a prenatal and pediatric chiropractor in Bozeman, Montana.

If it is real labor, one way to see how close you are to delivery is to time contractions. "The easiest and most effective way is to count how many contractions you have over a period of time, say 30 minutes or an hour," Goodman explains. "If you fall asleep while counting, it's probably not real labor."

### **No pain, no gain**

As labor progresses, you'll feel more discomfort and hurt with the squeeze of each contraction. Put these pain management techniques into practice to ease the ouch.

#### *- In and out*

Focus on your breathing instead of the pain you might be feeling. "Breathe in a calm and controlled manner—take a breath slowly in through your nose and out through your mouth," instructs Ross.

#### *- Water works*

Head for the bathroom, and run some warm water—just be sure it's not hotter than your normal body temperature (98.6 degrees Fahrenheit). Clark advises moms-to-be to take a bath or shower because water can be a soothing, natural pain reliever.

### - *Happy place*

Clark also encourages moms to do things that make them feel good and positive. “You can use a birth ball and dance to your favorite song, or watch a funny movie and laugh.” Being in a good mood mentally is important for the journey ahead.

### - *Pressure points*

Many moms find relief in massage, especially on the lower back. Rising notes, “Asking your partner or midwife to apply direct pressure on your tailbone (sacrum) can also provide relief.”

### - *Move it*

Walking and changing positions helps you manage pain, and it allows you to feel more in control of the situation. Try making circles with your hips to relax your lower back and pelvis. “Using a squat bar or being on all fours allows gravity to help and also relieves pressure,” says Rising.

## **Good to go**

As early labor ramps up, you’ll transition into active labor. Ideally, you want to time your arrival at the hospital or birthing center right in between these two phases.

“Essentially, when your labor becomes too uncomfortable and you are unable to speak in complete sentences, you are deep into labor,” says Clark.

You should be communicating with your doctor or midwife over the course of early labor to let her know when it starts and to check in occasionally. Most will advise you to head their way once you’ve met the 4-1-1 rule: Contractions are four minutes apart, lasting one minute, for at least one hour.

But Ross notes, it really depends on the amount of pain you’re experiencing. If it hits hard and fast, it’s better to be safe and make an early dash to the labor and delivery unit.

## **Is this your first baby?**

*Call your practitioner when your contractions ...*

- are too strong to talk through
- are consistently coming every four to five minutes

## **Have you had a baby before?**

Labor tends to progress more rapidly the second time around, so make the call as soon as you start having regular, painful contractions.

## **Go right to the hospital if you ...**

- bleed like you're menstruating
- have no relief between contractions
- get a fever above 101 degrees Fahrenheit



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By **Judy Koutsky**

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Pregnancy & Newborn is an online community that embraces the trials and triumphs of motherhood. From positive pregnancy test, adorable bump pics and real-deal contractions to sleepless nights, heart-melting coos and first words, we're here to cheer you on every step of the way.

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