

Dilapan—S for Induction of Labour

Information for patients

What is induction of labour?

Induction of labour (IOL) means starting your labour artificially – from starting contractions and leading to the dilatation of your cervix and birth of your baby.

Induction of labour is recommended when there is a clinical indication. This may include:

- Going overdue (41+6 weeks)
- Medical indications such as diabetes or high blood pressure
- Obstetric indications such as growth restriction or reduced fetal movements

The reason for induction will be discussed with you on an individual basis including benefits versus risks.

If you have been given this leaflet, then you have chosen to go ahead with induction of labour and deemed suitable for the use of Dilapan-S. You should have had a discussion with your midwife or obstetrician regarding the appropriate timing and method of induction.

What is Dilapan-S and what are the risks of the procedure?

Dilapan-S is a small rod that gradually absorbs fluid in the neck of your womb (cervix); this increases in size in order to dilate the cervix. This method contains no pharmacological substances (medicine/drugs) and is known as mechanical induction. Mechanical induction stimulates your cervix to release hormones (prostaglandins) that naturally ripen the neck of your womb.

The main aim of induction of labour is to be able to dilate your cervix to the point where we are able to comfortably break your waters. This is usually followed by the use of a hormone intravenous infusion (drip) called Syntocinon to encourage regular contractions and further dilatation of the cervix. Some women will go into labour without the use of the infusion.

Dilapan-S has a 90% success rate and contains no medicine or active substances that would be released during its application. This results in very low incidence of hyper stimulation (over activity of the womb), uterine rupture and fetal distress.

Side effects

You may experience a faintness episode, known medically as a 'vasovagal reaction'. This is a temporary state of dizziness, nausea, paleness or loss of consciousness that can be caused by cervical manipulation. By lying flat for 3-10 minutes these symptoms usually disappear and if they do not then you will be reviewed by a senior clinician.

What does Dilapan-S look like?



The diagram above shows 4mm Dilapan-S rods, which can expand up to 15mm over a 12-24 hour period

Can I be induced with Dilapan-S in an outpatient setting?

If you are assessed as suitable for a low risk outpatient induction you will be offered Dilapan-S.

You will be asked to attend the Maternity Day Unit at the Tunbridge Wells Hospital for an initial well-being assessment for both you and your baby. The Dilapan-S rod(s) will be inserted and you will be sent home for up to 24 hours with your Dilapan-S rod(s) in situ.

If you are not suitable for outpatient induction of labour then you will remain on the Antenatal Ward until you are ready to be transferred to Delivery Suite.

What should I expect with the process of Dilapan-S induction of labour?

You will be asked to contact the Antenatal Ward on the date agreed for induction of labour and given a time to attend.

On admission a midwife will:

- Perform routine observations including blood pressure, pulse, and temperature and ask you for a urine sample to test.
- Feel your abdomen to check baby's position and whether the baby's head has entered your pelvis (engaged).
- Assess your baby's wellbeing using electronic monitoring (CTG).

Once the midwife and your doctor are satisfied with the assessment of both you and your baby, the midwife or doctor will perform a vaginal examination in order to feel the cervix (neck of the womb).

You may hear them use the terms 'favourable' or 'unfavourable'. 'Favourable' – means the cervix is soft and may have already begun to dilate and waters can be broken to encourage labour.

'Unfavourable' – means the cervix feels much firmer and not dilated enough to break your waters.

If your cervix is 'unfavourable', up to five rods of Dilapan-S can be inserted in the cervical canal. The rods will stay there for approximately 12-16 hours but the process can continue up to 24 hours to expand and ripen your cervix before you are reassessed for suitability to break your waters.

Outpatient care

If you are having your Dilapan-S induction as an outpatient then you will be advised to return to the Antenatal Ward or Maternity Triage at the Tunbridge Wells Hospital for removal of Dilapan-S at the indicated time.

Delivery Suite

Once your cervix has dilated enough for your waters to be broken, you will then be transferred to the Delivery Suite to continue your induction of labour.

When the membranes (sac of waters) around your baby are artificially broken, this may cause a surge of hormones that can cause contractions to start. You may be encouraged to mobilise for 2-4 hours after this procedure to encourage your body to start to labour.

If labour or contractions do not commence through the breaking of your waters alone, then we will aim to start the hormone infusion (Syntocinon). This will build contractions over a number of hours. You and baby will be monitored closely during the process.

Where can I find further information?

You can watch a video in YouTube on how Dilapan-S works at this link: www.youtube.com/watch?v=xRfwASb7Ch4

To read up the useful information at this link: https://www.dilapan.com

To access to the patient information leaflet from the Dilapan-S website homepage at this link:

http://dilapan.wpengine.com/wpcontent/uploads/2019/06/DS pacienti USA-bez-ARM UP.pdf

After care advice whilst you have Dilapan-S rod(s) in place

If you are an outpatient and you are at home and you note any of the following, please contact Maternity Triage on ☎ 01892 633500

- If you have noticed excessive bleeding or pain
- If you have any concerns regarding your baby's movements
- If you think that your waters have broken
- If you begin to experience regular contractions
 Or
- If you have any general concerns regarding you or your baby

IMPORTANT

Please **DO NOT** attempt to remove the Dilapan-S yourself.

Please avoid bathing, douching and sexual intercourse while the Dilapan-S is in place.

You will be contacted by a Midwife after you have been at home for 10-11 hours to:

- Discuss you and your baby's wellbeing.
- Give you a time to return to the unit to have your Dilapan-S rod(s) removed.

If you are unable to return to the unit after 12 hours, the Midwife will then telephone you after 15-16 hours to update you and to check that you both remain well and, again, after 22-23 hours. You will be asked to return to the Antenatal Ward after a maximum of 24 hours at home.

If you have not heard from a midwife by the times documented below, please telephone the Antenatal Ward on \$\mathbb{\alpha}\$ 01892 633605

Dilapan-S inserted at:
Midwife will ring at:
Midwife will ring at:
Midwife will ring at:

If you have had any complications during your pregnancy then we are currently unable to offer you Dilapan-S as an outpatient as you and your baby may require closer observation during the induction of labour process.

Further information and advice can be obtained from:

NHS 111 NHS Choices online

↑ 111
 www.nhs.uk

MTW NHS Trust is committed to making its patient information accessible in a range of languages and formats. If you need this leaflet in another language or format please ask one of your clinical care team or the Patient Advice and Liaison Service (PALS). We will do our best to arrange this.

Maidstone and Tunbridge Wells NHS Trust welcomes all forms of feedback from our service users. If the standard of service you have received from the Trust does not meet your expectations, we want to hear from you. Please speak with the ward manager or the nurse in charge in the first instance, or you can contact the **Patient Advice and Liaison Service (PALS)** on:

Telephone: ☎ 01622 224960 or **☎** 01892 632953

Email: mtw-tr.palsoffice@nhs.net

or visit their office at either Maidstone or Tunbridge Wells Hospital between 9.00am and 5.00pm, Monday to Friday.

You can be confident that your care will not be affected by highlighting any areas of concern or making a complaint. The Trust will retain a record of your contact, which is held separately to any medical records. If you are acting on behalf of a patient, we may need to obtain the patient's consent in order to protect patient confidentiality. More information on PALS or making a complaint can be found on the Trust's website: www.mtw.nhs.uk or pick up a leaflet from main reception.

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