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Birthing Naturally

Slow Labor (Failure to Progress)

What is a slow labor?

Many caregivers use the set standard of 1 cm dilation per hour in labor to be the normal course of a labor. If a woman is taking longer than this time she is considered to have a slow labor.

Why is a slow labor a challenge?

It is not dangerous to labor slowly. However the slow labor is a frequent reason woman are unable to achieve a natural birth. There are three different challenges to the mother experiencing a slow labor. Each will require different techniques and tools to handle.

1. The slow labor can cause concern among caregivers who may encourage the mother to use pitocin, artificial rupture of the membranes or other medical labor stimulation techniques to effect faster dilation. If dilation still does not conform to what the caregiver believes should happen, the mother may be considered "Failure to Progress" and a cesarean surgery would be recommended. There is very little you can do to negotiate with a caregiver who believes labor must follow the "normal" curve(/birth/progress/progress.html). To avoid this challenge it is necessary to interview caregivers(/pregnant/team/quest.html) well and choose a caregiver who does not feel that a labor being slow is a reason for intervention.
2. The slow labor may indicate a problem with the baby's position, such as an asynclitic (head not pressing fully on the cervix) or posterior presentation(/birth/challenges/posterior.html). It may also indicate a problem with the mother's anxiety level or hydration levels. However, if this is the case there should be other signs than just slow progress. For example, the mother who is anxious or fearful may be acting or reacting fearfully. To overcome this challenge it will be necessary to help her feel safe and comfortable again. A poorly hydrated mother will not have been taking sips of water or juice or sucking on ice chips between contractions. She will need to begin hydrating herself or request an IV.

Often a baby in a poor position will cause an irregular contraction pattern with short and painful contractions. If this is the case, it may be helpful to use positions and techniques that are believed to realign the baby in the pelvis. This will probably not be very comfortable for the mother but is necessary.

3. The slow labor can be exhausting to the mother, depleting her energy needed to handle the stress of labor. It is important for the mother experiencing a slow labor to take regular rest times, sleeping between contractions if the pattern allows. She should stay well hydrated and may do well with juice, broth or honey to help her stay energized.

Coaching Solutions

Make sure you are in [active labor](/birth/progress/activelabor.html) before you move to a hospital or birth center. The modern hospital is as likely to start your labor for you as it is to send you home if you show up before actually being in active labor.

Of all the factors that have been studied as ways to shorten the length of labor, the only one that works by itself is to have continuous support such as the care given by a [doula](/birth/progress/doula.html). In studies, moving around during labor such as walking was as effective at shortening labor as most medical treatments.

Stay positive. Remind her of the progress she has made.

Don't pay too much attention too soon. This makes even a normal length labor seem long. Make sure she is in [real labor](/birth/progress/isit.html) before you pay attention.

Try some natural stimulation techniques such as [nipple stimulation](/cn/technique/nipple.html) or [walking](/cn/position/walk.html).

Remind her that there are reasons labors are long. Her body may need time to get the hormone levels right.

Does she feel safe? Change the environment or your attitude to help her prevent the [Fear Tension Pain Cycle](/pain/ftpcycle.html).

Is she hungry? Give her something to eat and be sure she is drinking enough water.

Have her spend some time in the tub or a shower.

If necessary, get extra support to help her stay positive.

Things to discuss with your caregiver:

- Caregivers handle slow labors differently. It would be beneficial to know what your caregiver considers to be a slow labor and how it would be treated.
- You may want to discuss the possibility of using natural labor stimulation techniques, such as nipple stimulation, before trying medicated labor stimulation techniques.
- If it becomes important to speed labor, discuss the possibility of trying an amniotomy (artificially breaking the bag of waters) first. It does start a clock by which you must give birth, but studies show it increases the chances you will give birth vaginally and may prevent the need for artificial oxytocin.
- If you choose to use artificial oxytocin as a way to speed labor, understand that there is currently no evidence that high or rapidly escalating doses of oxytocin are any more effective at producing a baby than more moderate approaches. The moderate approaches may keep you more comfortable.

- Moving to the hospital too soon can make even an average length labor seem long and slow because most women find the hospital to be boring in early labor. Your caregiver can help you decide when would be a good time to go to the hospital to prevent getting there too early.
- For many women, cervical dilation does not happen according to the 1 cm per hour rule. If you feel that there is change and you are progressing according to the emotional markers for progress, you may want to discuss with your caregiver the possibility of putting off intervention for an hour or two. This may be the time your body needs to get over the hump and begin dilating.

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