

## Induction of labour with Cervical Balloon (Foley’s) catheter

Date of induction: .....

Please come to Rothschild Ward at 08.30/09:00 for inpatient induction

Please come to DAU at 08:30/09:00 for outpatient induction

Please bring your handheld notes with you

You have been given this leaflet as you have chosen to have your labour induced by cervical balloon catheter, also known as a ‘Foley’s induction’. Your midwife or doctor will have discussed the reasons why it is necessary to induce your labour but you may want to read this leaflet in conjunction with the leaflet ‘Induction of Labour with Intact Membranes’ which will also explain what happens after the balloon is removed. This leaflet can be found here:



### What is balloon induction?

Balloon induction is a mechanical form of induction of labour and is the only method used for outpatient induction of labour at present. This is because mechanical methods of induction of labour have the least chance of over stimulating the uterus and causing too many contractions (uterine tachysystole).

The procedure involves a soft silicone tube, also known as a catheter, being inserted into the neck of your womb (cervix). It has a balloon near the tip and when it is in place the balloon is filled with a sterile saline (salt water) fluid. The catheter stays in place for up to 24 hours, with the balloon putting gentle pressure on your cervix. The pressure should soften and open your cervix enough to start labour or to be able to break the waters around your baby.

If you are suitable for outpatient induction of labour, you can go home while the catheter is in place. You will be given a time to attend Rothschild ward for removal of the catheter in 24 hours. If it falls out before this time you should call maternity triage and will be invited in for assessment.

### Who is balloon induction suitable for?

Induction by the balloon method can be offered to any woman undergoing induction of labour, if she chooses to have this method. The only instance where it is not to be used is when the membranes have already ruptured.

## **How does balloon induction work?**

The balloon rubs against and stretches the neck of the womb (cervix) to produce a hormone called prostaglandin. The prostaglandin causes the cervix to become shorter and soften (ripening). This prepares the cervix for labour and allows your midwife or doctor to break your waters. Sometimes, the release of hormones as the cervix is stretched is enough to trigger your waters to break naturally and for labour to begin.

## **How is the balloon catheter fitted?**

First, a tracing of the baby's heart will be done to check the heart rate and ensure all is well. A vaginal examination will be then performed with your consent. This allows assessment of your cervix in preparation for the balloon to be inserted. An instrument called a speculum may be introduced into the vagina to help in the process. The catheter is then inserted through the cervix and the balloon is gently filled with water to apply pressure to the walls of the cervix. If you find the process uncomfortable, you can ask for gas and air for pain relief.

## **How long does it take?**

The balloon catheter is kept in place for up to 24 hours. It then either drops out of the cervix or is removed. At this point, it should be possible to break your waters.

## **Are there any risks or complications?**

Inserting the balloon into the cervix is uncomfortable, but not normally painful. There is a small risk of infection and if this is suspected you will be re-assessed, and your plan of care will change.

## **Going home after insertion of the Foley catheter**

During the time you are at home, you can do things as you would normally, for example, showering, bathing or walking. However, please avoid sexual intercourse. After going to the toilet please wash your hands and make sure the catheter is clean.

If you have any of the following:

- Bleeding
- Contractions
- Concerns about baby's movements
- You feel unwell
- The waters around baby break
- The balloon falls out

You are advised to call Maternity Triage on 01296 316103. A midwife will talk to you and advise you what you need to do.

## **What if the balloon doesn't work?**

If the cervix is not dilated enough for balloon to be inserted or if the balloon doesn't soften the cervix enough for your waters to be broken, a plan to continue the induction process using an alternative method will be discussed with you, if appropriate. In some cases, a caesarean section may be necessary. Your doctor will discuss this with you.

## Further information

For further information about induction of labour and all other aspects of pregnancy and childbirth please talk to your midwife or doctor.

Additional information leaflets can be found on the Buckinghamshire Healthcare NHS Trust website by clicking on 'For Patients and Visitors' → 'Information Leaflets' → 'Pregnancy, labour and postnatal care' or by scanning the following code:



National guidance on inducing labour is available from the National Institute of Health and Care Excellence which can be found at the following link <https://www.nice.org.uk/guidance/cg70>

## Useful numbers

Antenatal Clinic: 01296 316140 (Stoke Mandeville Hospital)  
01494 425569 (Wycombe Hospital)

Labour Ward/Triage 01296 316103 (Stoke Mandeville Hospital)

This leaflet explains some of the most common side-effects that some people may experience. However, it is not an exhaustive list.

If you experience other side-effects and want to ask anything else related to your treatment, please contact your community midwife or Stoke Mandeville Hospital Labour Ward: **01296 316103**