

Signs you're in early labour

Persistent backaches and pelvic cramps may signal the possibility of preterm birth, says obstetrician and gynaecologist Serena Koh Meiling

In the final weeks of pregnancy, a baby is still growing and getting stronger. But when a mother goes into labour early – known as preterm labour – that process can be cut short.

This can be concerning because babies born too soon may face health and developmental issues, says Dr Serena Koh Meiling, obstetrician and gynaecologist at Mount Alvernia Hospital. Here, she explains the signs and how doctors can help.

Q What is preterm labour and why does it affect the baby?

Preterm labour is when the body starts preparing for birth too early. This means regular womb contractions begin to open the cervix, or neck of the womb, before the usual delivery window of 37 to 40 weeks of pregnancy. When this happens, the baby may lose some of the important time needed in the womb for organs such as the brain, lungs and liver to keep growing and maturing.

As a result, preterm birth can raise the risk of breathing problems, feeding difficulties and developmental delays. Babies may also experience longer-term health issues such as learning difficulties, and vision or hearing issues.

Q What are the early signs of preterm labour and what factors increase the risk?

The early signs can be easy to miss because they often resemble the usual discomforts of pregnancy. Women in preterm labour may feel regular cramps or tightening in the lower abdomen, a dull backache, spotting, pelvic pressure, or a change in vaginal discharge that is more watery, mucus-like, bloody or heavier than usual.

Some women may be at higher risk, such as those with a twin or triplet pregnancy, a previous preterm birth, womb infections, or conditions affecting the cervix or womb. Other factors include smoking, a



Pelvic and lower tummy cramps are common in pregnancy, but if they keep returning, feel regular or become more painful, it is important to get them checked. PHOTO: GETTY IMAGES

very short gap between pregnancies and certain medical complications, such as high blood pressure or an abnormally shaped womb.

To get a fuller picture, doctors may check whether the cervix is starting to open and monitor for contractions. A vaginal ultrasound or swab test, or even biomarker testing can be used to help confirm whether preterm labour is likely.

Q What happens if preterm labour is suspected?

Doctors will first assess whether it is safe and possible to delay the birth for a short time. If so, the mother may be given steroid injections to help the baby's lungs mature faster. Medicines may also be used to relax the womb and slow the contractions.

To further protect the baby, doctors may give magnesium sulphate in very early labour to lower the risk of cerebral palsy. Antibiotics may also be needed in certain situations, such as when there are signs of infection.

However, delaying labour is not always the safest option. If continuing the pregnancy puts the mother or baby at greater risk – for example, if there is a serious infection in the womb – doctors may advise delivery instead.

While preterm labour can carry risks, not every baby born premature will experience serious complications. Many babies, especially those born closer to full-term, do well with timely medical care and close monitoring. Outcomes today are often very encouraging.



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