

Premature birth

If your child is born before the 37th week of pregnancy, we call that a premature birth. This occurs in about one in ten pregnancies.

If your child is in danger of being born prematurely, you will have contractions too early during pregnancy. These so-called premature contractions feel basically the same as contractions around the due date. You may also lose blood, mucus and/or amniotic fluid. Sometimes premature labor begins with the breaking of the membranes. You will then notice that you lose fluid.

If your child is born prematurely, it needs extra medical care, because it is not yet fully grown. We therefore try to postpone delivery if you get contractions too early during pregnancy.

Examination

If you have contractions before the 37th week of pregnancy, the gynecologist will do an internal examination to determine, for example, whether there is already dilation.

The gynecologist can also do an ultrasound to see how your child is exactly lying. With a CTG, the gynecologist can see how your child is doing, register the contraction activity and see how your child reacts to this. The nurse will check your blood pressure and temperature.

If your membranes are already broken, there is a chance of infection. Therefore, in this case, the gynecologist will usually no longer do an internal examination. You will get an internal ultrasound to measure the length of the cervix. For example, with a blood or urine test, we check whether you have no infections.

CTG examination

A CTG is a heart film of your unborn child.

With a CTG, the beating of your child's heart is registered. We can also see if you have contraction activity. We can make a CTG during pregnancy or childbirth.

Blood tests

We take one or more tubes of blood with a hollow needle. This blood is then examined in the laboratory by an analyst.

Blood tests or tests of urine or stool are necessary when the general practitioner or specialist wants to find out more about your health. The doctor also has research done to determine the course of disease and the effect of a treatment.

Blood tests are done at any local laboratory.

Urinalysis

Urinalysis is necessary when the general practitioner or specialist thinks that there is a disease.

Your treating doctor will provide you with the right materials for this. This is a package with a combination of a urine jar and a urethra. Sometimes it is important that you have to hand in the first pee of the day (morning urine), sometimes it does not matter. You will hear this from the doctor who requests the examination.

Treatments

If your child is in danger of being born prematurely, you will be admitted to the hospital.

Contact your obstetrician or gynecologist immediately if you think you have contractions or that the membranes have broken before the 37th week of your pregnancy. Lie down until you hear what you need to do next.

Do the contractions start before the 34th week of pregnancy? Then we try to inhibit contraction activity with medications. You will also be prescribed medication (corticosteroids) to ensure that the lungs and other organs of the child mature.

These drugs have reached the maximum effect after 48 hours. Then we can stop inhibiting the contractions.

If the delivery can no longer be stopped and your child is born prematurely, the pediatrician will be present at the delivery to take care of your child as well as possible. If your child is at risk of being born before the 30th to 32nd week, your child will be transferred to the neonatal intensive care unit (NICU). This is an intensive care unit especially for premature babies.

Giving birth in the hospital

There are several reasons to give birth in the hospital.

Sometimes it is medically necessary. But you can also choose to give birth in the hospital. We call this an outpatient delivery.

Outpatient clinics and departments

Gynaecology and Obstetrics

The specialism Gynecology and Obstetrics is medical care intended for women in all stages of their lives.

Source: Jeroen Bosch