



Preterm Birth Prevention Clinic

Patient Information Leaflet



Why do I have this leaflet?

This leaflet will tell you more about your referral to the Preterm Birth Prevention Clinic.

Sections:

1. Why have I been referred?
2. Where is the clinic?
3. What will happen when I visit the clinic?
4. Should I ask for advice?
5. Should I still attend my antenatal appointments with my midwife?
6. Research in the clinic
7. Useful sources of information
8. Contact numbers

1 Why have I been referred?

You were referred to us by your midwife. They did this after your first appointment with them. You may have heard this called your booking appointment.

They chose to refer you because you may be at risk of premature (early) birth.

Your risk is based on your medical history and any past pregnancies. Some of the things that make a preterm birth more likely include:

- a previous birth before 34 weeks
- a previous late miscarriage
- a cervical stitch in a previous pregnancy
- your womb (uterus) has an unusual shape
- you had a caesarean section with a fully dilated cervix (10cm)
- you had a cervical procedure following an abnormal smear test
- your 'waters' (amniotic sac) broke earlier than 34 weeks in a past pregnancy

Our clinic helps you to manage your risk of a preterm birth. We do this with extra monitoring to make sure you get the right care.

2 Where is the clinic?

The preterm prevention clinic is in the Antenatal Clinic.

Sometimes emergencies and unexpected events can increase waiting times. We will warn you of any delays. We appreciate your patience.

3 What will happen when I visit the clinic?

We'll work with you to plan your care. This is guided by your 12-week scan and specialist appointments.

Depending on your level of risk, there are certain steps for us to follow. Together, these steps are called pathways. Most cases we support are on intermediate or high-risk pathways. Both pathways involve a series of extra scans:

Intermediate risk pathway: scans at 19 and 23 weeks.

High risk pathway: scans at 16, 19 and 23 weeks.

There are 2 kinds of scan each time:

The abdominal scan. This lets us check on your baby.

The vaginal ultrasound. A small probe is inserted into your vagina. This measures your cervix (neck of the womb). If it is 25mm or shorter, there may be more risk.

After your scans, you may see a doctor or specialist midwife. They will tell you more about your results and may book a follow-up. Otherwise, the person doing the scans will discuss your results with you.

The results will inform your personalised plan of care. This could include:

- staying on your planned pathway
- having another cervical length scan sooner
- an intervention to lower your risk of preterm birth.

There are separate information leaflets about our interventions. They can include:

- progesterone pessaries
- cervical stitch

If your cervical scans are all normal, we will reassure you and discharge you from the clinic.



4 When should I ask for advice?

Speak to a midwife if you have:

- period like pains or cramps
- a tightening across your middle that comes and goes
- fluid leaking from your vagina or if your waters break
- bleeding from your vagina

It's very important you speak to a midwife if you experience something like this. They can advise you on what to do next. They can also tell you if you need to get a full assessment.

These issues may be a sign that you are going into labour. So, we need to take them very seriously. Sometimes they don't lead to anything, but it's still important to check. That way, we can make sure you get the care you need.

If you think you may be in labour, call the Maternity Assessment Unit (MAU) immediately. Do not wait for your next appointment.

5 Do I still need my antenatal appointment with my midwife?

Yes. Keep going to all antenatal appointments as well as visiting us.

The preterm prevention clinic does not replace any other care you have. It is extra support to help manage the risk of a preterm birth.

6 Research in the clinic

There is still a lot we don't know about preterm birth. But we're always looking to find out more. The more we understand it, the better our care will be. That's why we run research projects.

Working with us on research can help us improve the care we give in future. So, we may ask if you want to take part.

If we do ask, it is your choice to say yes or no. No one can pressure you or force you. Saying no to research will not affect any other part of your care. We will also give you more information at the time to help you decide.

7 Useful sources of information

Tommys (Together for every baby)

- Website: www.tommys.org
- Phone: 0800 0147 800

Bliss (for babies born premature or sick)

- Website: www.bliss.org.uk
- Email: hello@bliss.org.uk

8 Contact numbers

If you have any questions or worries, please contact either:

- **Your Community Midwife**
- **The Antenatal Clinic**
- **The Maternity Assessment Unit**
- **Delivery Suite**

You can find the contact numbers for your local service on your BadgerNet app.