

Premature Rupture of the Membranes (PROM)

What is Premature Rupture of the Membranes (PROM)?

Rupture of the membranes means that there has been a break or tear in the fluid-filled sac (membrane) that the baby lives in. Ruptured membranes means the same thing as “broken bag of water.” This usually occurs just before or during labor. Premature rupture of the membranes means that the amniotic fluid leaks out before labor starts and is of special concern if it happens more than 3 weeks before your due date.

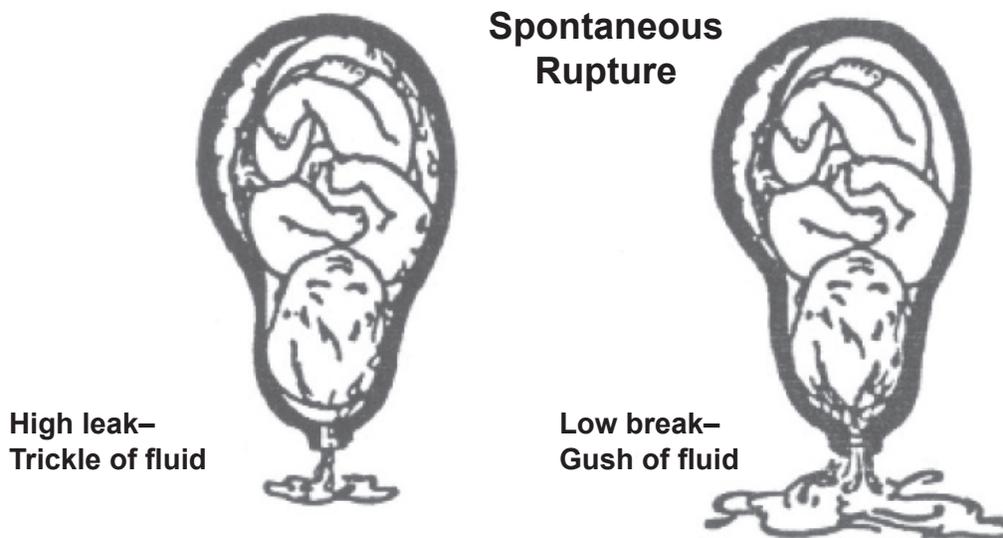
What is Amniotic Fluid?

Amniotic fluid is another name for the fluid that is around your baby. This is what leaks out if the membrane breaks. Even though you may lose a lot of fluid if your membrane breaks, your body will continue to make fluid for the baby to live in.

How Will I Know if My Water Has Broken (Membranes Have Ruptured)?

You may feel a gush of warm water from your vagina or just a small trickle that feels like urine is leaking out. It usually does not all gush out at once. Sometimes a heavy vaginal discharge or the baby kicking urine out of your bladder will make you think your water is leaking.

To tell the difference, your doctor or nurse will look into your vagina with a speculum just like the one used when you have a Pap smear done. They will look for fluid in the vagina or fluid leaking from the cervix (the mouth of the womb). Some of this leaking fluid may be put on a slide to be looked at under a microscope. This exam is the only way to tell for sure that it is amniotic fluid and not urine or a discharge. At the same time, your doctor may send some of the fluid to the lab to be checked for infection.



This information has been reviewed and recommended for use by the UAMS/CPED/Patient Education Advisory Committee.

What are Some of the Problems that Can Happen with PROM?

With PROM, there is a good chance that you will go into premature labor, and give birth to a premature baby. About 2/3 of women will go into labor within a week after their membranes rupture, but some women will continue their pregnancies until their due date.

If you do not go into labor and you are several weeks from your due date, your doctor will most likely prescribe bed rest in the hospital. This will help prevent premature birth and will give your baby the best chance to grow and develop. Since premature babies can have serious problems with breathing, eating, and keeping warm, as well as other problems, it is usually best for a baby to grow inside you for as long as possible before birth. However, if problems develop, your doctors may decide that it would be best to induce (start) labor or to deliver the baby by Cesarean birth.

One of the problems that you and your baby could get is an infection in your womb. During pregnancy, the membrane keeps infection out of the womb. If there is a tear or break in the membrane, this provides a way for water to leak out and may allow the germs that cause infection to get in. Every day, your doctors and nurses will watch you closely for signs of infection. These signs include fever, chills, a sore or tender womb, and a fast heart rate for you or your baby. You may be given an antibiotic medicine until the lab tests say you are free of infection.

Since there may be a smaller amount of fluid around the baby, there is a chance that the umbilical cord to the baby could get squeezed, shutting off the flow of oxygen and blood to the baby. For these reasons, the baby's heartbeat will be checked several times a day. You will also be asked how much the baby is moving. If the baby is active, it is usually a good sign that means he or she is getting the blood, oxygen and nutrition needed.

While in the hospital, you will need to watch for signs and symptoms of premature labor. These include:

1. Uterine contractions that occur every 15 minutes, or more often. These may or may not be painful. Ask your doctor or nurse to show you how to feel a contraction.
2. Menstrual-like cramps in the lower abdomen.
3. A low, dull backache, felt below the waistline.
4. Pelvic pressure. It may feel like the baby is pushing down.
5. Abdominal cramping or a feeling like "gas pains".
6. Bleeding or spotting from your vagina.

If you notice any of these symptoms, report them to your nurse or doctor immediately.

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When Will I Deliver My Baby?

It is usually best for the baby to wait until close to your due date to deliver. Your doctor will perform an ultrasound to help figure out your due date, and to measure the size and weight of the baby. As you get close to your due date, usually around 37 weeks, your doctor may perform an amniocentesis. For this test they withdraw fluid from around the baby and send it to the lab for testing. This testing will tell the doctor if the baby's lungs are developed enough to breathe without a respirator or extra oxygen. If the test is positive, your doctor will go ahead with plans for your delivery.

Your doctor may also decide to deliver you early if certain problems occur. These include:

- **Infection** – If you get an infection in your womb, it can make you and the baby sick. When this happens, your baby will have the best chance for a healthy life outside your womb, and your doctor will induce labor.
- **Premature Labor** – If you go into premature labor after having ruptured membranes, your doctor will not give you any medicine to stop the contractions. This is because of the increased chance of infection and because there are no completely effective medicines to stop contractions with PROM.
- **Baby Distress** – This will show up an abnormal heart rate pattern, or the baby will look underweight on the ultrasound. These are signs that the baby is not getting the oxygen and nutrients needed in the womb and would probably do better if delivered.

What Special Problems Could My Baby Have?

If your baby is born prematurely, the major concern is breathing problems. He can also have trouble with eating, keeping warm, bleeding, and other problems. Because the ruptured membranes have increased your baby's chance for infection, he may receive antibiotics through an IV. If your baby will be born prematurely, it is best to deliver at a hospital with an intensive care nursery that is properly equipped and has people who are specially trained to care for babies with special needs.

What About Future Pregnancies?

When you are considering another pregnancy, visit your doctor to discuss what you can do beforehand to reduce your chances of having a premature birth. When you find out you are pregnant the next time, it is very important to remind your doctor that you had PROM with your last baby. Together, you can watch for early signs of premature labor. Not all women who have had a premature baby with the last pregnancy will have a premature baby with the following pregnancy, but it does increase the chances.

Arkansas High Risk Pregnancy Program – UAMS

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