

What Else Can I Do to Prevent a Preterm Birth?

While 17P can help reduce your risk for another early birth, there are also other things that pregnant mothers should do to reduce their risk.

- Be sure to go to every prenatal care appointment. Go even if you feel fine.
- If you smoke, stop smoking. It's best to stop before you get pregnant, but stopping at any point—pregnant or not—will help your baby. If you can't stop smoking, try to cut down. Avoid being around other people who smoke.
- Don't drink alcohol.
- Talk to your health care provider about any medicine you are taking.
- If you use drugs or herbal remedies or supplements that are not prescribed by your health care provider, stop using them.
- Try to reduce stress. Talk to your health care provider and your supervisor about how much time you should take off work. Ask friends and family for help. Rest and relax whenever you can.
- Have sex only with the same partner throughout your pregnancy. Try to make sure that this person has no sex partners other than you.
- If you are in an abusive relationship, talk to someone. Abuse often gets worse during pregnancy. Do what you need to do to protect yourself and your baby.
- If you feel burning or pain when you urinate, you may have an infection. Call your health care provider.
- Know the signs of preterm labor and what to do if you have any of them.

How Do I know If I'm in Preterm Labor?

There are several signs that might suggest a woman is in early labor. They are:

- Bleeding
- The feeling that the baby is balling up
- Contractions (your abdomen tightens like a fist) every 10 minutes or more often
- Changes in vaginal discharge (leaking fluid)
- Pelvic pressure (the feeling that your baby is pushing down)
- Low, dull backache
- Cramps that feel like your period
- Abdominal cramps with or without diarrhea
- A general feeling that something is not right. Many women with preterm labor just have a sense that things do not feel as they did before.

Call your health care provider (doctor, midwife, or nurse) right away if you have any of the warning signs. Call even if you have only one sign.

Questions?

Ask your health care provider if you have other questions.

Contact your provider at: _____

(Provider, please place your phone number here.)

Noirbaby
www.noirbaby.com

Published by Noirbaby, Inc., for
the 17P Project, the NC
Department of Public Health,
and the UNC Center for
Maternal and Infant Health.



The 17P Project is a partnership among the
NC Division of Public Health, Duke University Medical
Center, Mission St. Joseph's Memorial Hospital,
Wake Forest Medical Center, UNC/NC Women's
Hospital, New Hanover Regional Medical Center and
Pitt Memorial Hospital/ECU.

Preventing Preterm Birth: Progesterone Treatment (17P)



Have you had a premature baby? Are you pregnant again or do you want to become pregnant? If yes, then you need to know that there is a new type of treatment that may help prevent another early birth.

What is Preterm Birth?



Preterm or premature labor happens when you go into labor before 37 weeks of pregnancy. This is too early for your baby to be born. Preterm birth is the leading cause of infant death.

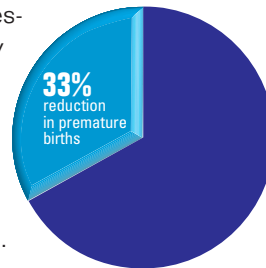
A baby born too early can have health problems her whole life, and she can die. Baby's health problems can include vision problems, brain damage, and asthma. About half of all childhood brain and developmental problems are the results of early birth. Research also suggests that early birth puts a baby at greater risk for diabetes, heart disease, and certain cancers. African-American babies have a higher risk for being born too soon than other babies.

The number one risk factor for preterm birth is having had a prior preterm birth.

What Is 17P?



The full name for 17P is alpha-hydroxyprogesterone caproate. It is a medicine that is very similar to *progesterone*, a hormone normally made by a mother's body to support a pregnancy. In 2003, two major research studies found that this medicine (17P) reduced the chance of preterm birth happening again for 33% of the women studied.



Is It Safe?



Experience has shown that 17P is safe. Current studies have reported no serious side effects from 17P for the mother or the baby. None of the babies born after their mothers received 17P had birth defects. Long-term follow-up studies of the children need to be done and are underway. One small study that followed children to their teenage years found no side effects. A larger study currently underway has shown that children who are now 5 years old have had no increased risk for birth defects.

Who Should Get 17P?

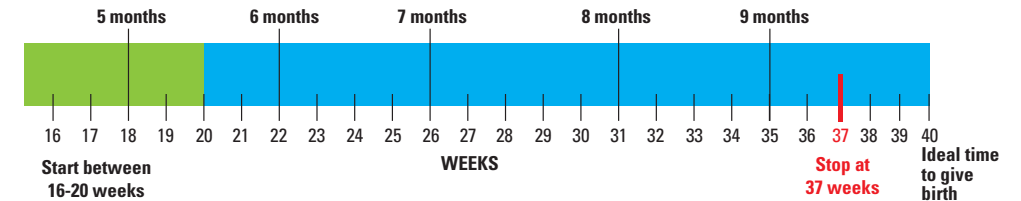
17P should only be used for pregnant women who meet these three conditions:

- They have already been pregnant at least once with a single baby (not twins or more).
- With that baby, they began labor after 20 weeks (5 months) and before 37 weeks of pregnancy. Medical professionals did not use drugs or other methods to start labor
- They are currently pregnant again with a single baby.

There are no studies right now that show that 17P prevents preterm birth in other pregnant women. Researchers are continuing to study 17P and premature birth to see if it could help more women.

How Do I Get the 17P Treatment?

A woman should get the 17P treatment from her health care provider. Once her provider has made sure she should get 17P, she will receive one shot of 17P each week. Women need the shots *every* week. It is important that there is a steady supply of 17P in a woman's body to help reduce her risk of another preterm birth.



A woman should start receiving shots between 16 and 20 weeks of pregnancy. She will get the shots until she is 37 weeks pregnant. At this time, a baby is considered full term. The best time for a baby to be born is between 39 and 40 weeks. Some women may think they can stop the shots sooner than 37 weeks, but this is not a good idea. Babies born before they are full term are at risk for health problems and long hospital stays.

17P is not available in local drug stores. Doctors must order it through special pharmacies.

What Are the Potential Side Effects of 17P?



Side effects are very rare. If side effects do occur, they commonly include injection site soreness, swelling, itching, and bruising.

Taking 17P does not mean that your provider will not need to use other measures to stop preterm labor. These might include medications to stop contractions (*tocolytics*), medications to help develop your baby's lungs (*steroids*), bedrest, etc. Research shows that 17P will reduce the chance that providers will need to use these tools.

Tips for Dealing with Any Side Effects

If you are having bothersome side effects, please contact your health care provider's office for help.