## True Labor vs. False Labor

<table>
<thead>
<tr>
<th>Characteristics of Contractions</th>
<th>True Labor</th>
<th>False Labor</th>
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</thead>
<tbody>
<tr>
<td>Frequency</td>
<td>Regular, become closer together with a consistent pattern over time.</td>
<td>Irregular, don’t show signs of consistency or becoming closer together.</td>
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<tr>
<td>Strength</td>
<td>Consistently increase in strength as time goes on, vaginal pressure likely to increase.</td>
<td>Mild, usually do not gain strength as time goes on, can begin strong then weaken as time passes.</td>
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<tr>
<td>Location</td>
<td>Starts in the back and moves forward.</td>
<td>Usually only felt in the front of the abdomen.</td>
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<tr>
<td>Changing Positions</td>
<td>Changing positions or walking may strengthen them. A warm bath may speed up contractions.</td>
<td>May stop or slow down when you walk, lie down, take a bath, increase fluids or change positions in any other way.</td>
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<tr>
<td>Cervix</td>
<td>Cervix softens, thins (effaces), and opens (dilates).</td>
<td>May soften but little thinning or opening.</td>
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### How to Time Contractions

![Diagram showing contractions with time intervals]
The six ways to progress in labor:
1. The position of the cervix changes from posterior to anterior.
2. The cervix softens (ripen).
3. The cervix effaces (thins).
4. The cervix dilates (opens).
5. The baby’s head rotates and molds to fit through the pelvis.
6. The baby’s head descends (changes station) and is born.

Usually the first three steps occur slowly in the last days or weeks of pregnancy. Stronger labor contractions are normally needed to complete the final three steps.

Effacement and Dilation

Pelvic Station
Caregivers refer to the location of your baby within your pelvis as pelvic station. Before labor you may hear your caregiver say that your baby’s head is “floating” above your pelvis. When your baby’s head is well into your pelvis, it is called “engaged” or at “zero station.”