

MECHANISMS OF LABOUR

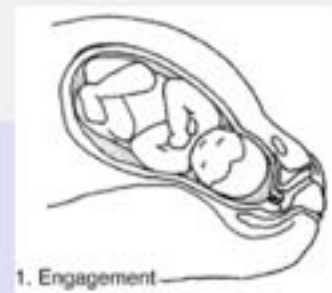
A Guide for Healthcare Professionals

What Are the Mechanisms of Labour?

The mechanisms of labour are the passive movements the fetus undergoes to navigate through the maternal pelvis during normal vertex delivery. These are guided by uterine contractions (powers), fetal positioning (passenger), and pelvic dimensions (passage).

Engagement

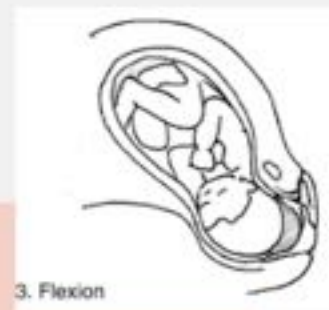
- The biparietal diameter of the fetal head enters the pelvic brim.
- In primigravidas, often occurs before labour begins; in multigravidas, during labour.



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Flexion

- Fetal head flexes, allowing the suboccipitobregmatic diameter (~9.5 cm) to present.
- Facilitated by resistance from the pelvic floor.



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Extension

- As the head passes beneath the pubic symphysis, it extends.
- Allows sequential delivery of the occiput, bregma, forehead, face, and chin.



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Expulsion

- Shoulders deliver: anterior first (under pubic symphysis), followed by posterior. Remainder of the body follows rapidly.



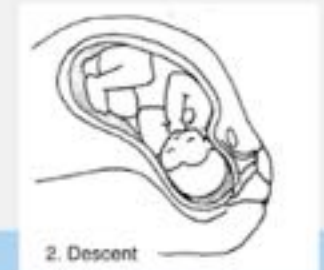
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Understanding the sequence of fetal movements during normal labour is essential for assessing labour progress and anticipating complications.

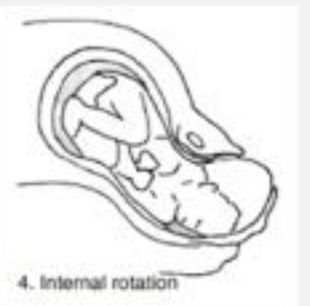
Descent

- Progressive downward movement of the fetus.
- Influenced by uterine contractions, intra-abdominal pressure, and fetal straightening.



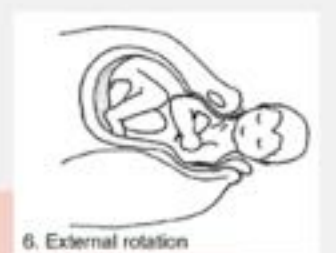
Internal Rotation

- Fetal head rotates from occiput transverse to occiput anterior (typically).
- Aligns the head with the anteroposterior diameter of the pelvic outlet.



Restitution (External Rotation)

- Head rotates to align with the fetal shoulders still within the birth canal.
- Indicates shoulder rotation within the pelvis.



Clinical Significance:

- Helps assess normal vs abnormal labour progression
- Aids in recognising malposition or malpresentation
- Guides timely clinical interventions (e.g. instrumental delivery)
- Supports informed decision-making for mode of delivery
- Enhances maternal and fetal safety during birth

