



Can Sex Really Start Labor?

What You Need to Know Before You Try

Quick answer: There is no proven amount of time between having sex and going into labor. Sex has been suggested as a natural way to encourage labor because semen contains prostaglandins and orgasm can cause temporary uterine contractions. But research has not shown that sexual intercourse **reliably** starts labor at term.

If you're Googling this question...

You may be 39, 40, or 41 weeks pregnant and wondering whether sex could finally get things moving. You may be hoping to avoid an induction, wondering what your provider means by recommending one, or simply wondering whether there is anything you can safely do to encourage labor. And yes, you may also be looking for a good reason to have sex. All of those are reasonable questions.

This guide explains what we know, what we don't know, and what questions are worth asking before you try to start labor on your own

How long does it take for sperm to induce labor?

There is no reliable answer because sperm has not been shown to reliably induce labor. Some people have sex and go into labor later that day or the next day. Others have sex repeatedly and remain pregnant for days or weeks. If labor happens afterward, timing alone cannot tell you whether sex caused it or whether labor was about to begin anyway.

One terminology point matters: it is more accurate to talk about semen, not sperm. Semen contains prostaglandins; sperm are the reproductive cells. The prostaglandin theory is one reason sex has been suggested as a way to encourage labor.

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Can Sex Really Start Labor?

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Why do people think sex might start labor?

Prostaglandins in semen: Human semen contains prostaglandins, substances involved in cervical ripening and the labor process. This is biologically plausible, but having prostaglandins in semen does not mean intercourse delivers a dose capable of starting labor.

Orgasm: Orgasm can cause temporary contractions of the uterus. Temporary contractions are not the same thing as established labor, and research has not shown that orgasm reliably starts labor.

Cervical stimulation: Penetrative sex can physically stimulate the cervix. This provides another possible explanation for the theory, but it has not been shown to make labor start reliably.

What does the research say?

A 2019 systematic review and meta-analysis combined three randomized controlled trials involving 1,483 women with singleton, low-risk, term pregnancies. Spontaneous labor occurred at similar rates in the sexual-intercourse and control groups. The pooled relative risk was 1.02, with a 95% confidence interval of 0.98 to 1.07. The researchers concluded that sexual intercourse at term did not significantly increase spontaneous onset of labor.

That does not prove that sex can never be followed by labor. It means that, when researchers compare groups, they cannot show that recommending sexual intercourse makes labor more likely to begin.

A separate randomized trial of women who were already scheduled for induction also found that advising them to have sex increased sexual activity but did not increase the rate of spontaneous labor.

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Can Sex Really Start Labor?

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So... is it worth trying?

If you have a healthy pregnancy and your healthcare provider has told you that sex is safe for you, there is no evidence that you need to avoid sex simply because you are close to your due date. But it is better to think of sex as something you may enjoy, not as a dependable labor-induction technique.

If you go into labor afterward, great. If you don't, you have not failed. Your body was not supposed to respond to a particular number of orgasms, a particular position, or a particular amount of semen.

Why are you trying to get labor started?

This question may be more important than whether sex works. Your reason for wanting labor to start can change what information you need

“I’m 40 or 41 weeks and I’m just ready to have this baby.”

That is a different situation. Being uncomfortable, tired of being pregnant, or simply ready to meet your baby is completely understandable. But there is no home method that can guarantee labor will start tonight.

If you are approaching or past 41 weeks, talk with your provider about monitoring, your options, and whether induction is appropriate for you. ACOG says induction may be considered at 41 weeks. That doesn't mean you should automatically be induced just because you've reached 41 weeks. Your individual circumstances and your preferences matter.

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Can Sex Really Start Labor?

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“My doctor or midwife is recommending an induction.”

If your provider is recommending induction, start by finding out why. Induction may be recommended because of a health concern, a concern about the baby, ruptured membranes, being past the recommended point in pregnancy, or another reason. In some healthy first pregnancies, elective induction may also be considered at 39 weeks, but that doesn't make it a good idea!

Questions you can ask:

- Why are you recommending induction for me?
- How urgent is the recommendation?
- What are the benefits of inducing now?
- What are the risks of waiting?
- Is my cervix showing signs that my body is getting ready for labor?
- What are my options if I wait a little longer?

Sex should not be used as a substitute for understanding a medical recommendation. If your provider is concerned about your health or your baby's health, ask the questions you need answered.

“I really want to avoid an induction.”

If this is your concern, don't focus only on sex. Find out why induction has been recommended and whether waiting is reasonable in your situation. Your Bishop score, cervical changes, gestational age, your health, and your baby's condition may all matter.

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“I'm looking for a good reason to have sex”

You don't need a medical reason. If you want to have sex, your pregnancy is healthy, and your healthcare provider has not told you to avoid it, sex can simply be sex. It may be pleasurable, relaxing, or a nice way to connect with your partner. Just don't count on it to produce a baby on a schedule

When should you NOT have sex?

Sex is generally safe during a healthy pregnancy, but it is not appropriate for everyone. Follow your own provider's instructions. Your provider may recommend avoiding vaginal sex if you have certain pregnancy complications:

- Your water has broken or you are leaking amniotic fluid. Avoid vaginal sex because of the increased risk of infection.
- You have vaginal bleeding. Call your healthcare provider for guidance, especially if bleeding is heavy.

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Can Sex Really Start Labor?

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- You have placenta previa or another placenta problem for which your provider has restricted sex.
- Your cervix is opening too early or you have been told to avoid sex because of cervical or preterm-labor concerns.
- You have another pregnancy complication or your provider has specifically told you not to have sex

If you are not sure whether sex is safe for you, ask. There is no embarrassing question when it comes to pregnancy and birth.

What about sex after the water breaks?

Don't use sex to try to start labor after your water breaks unless your healthcare provider specifically tells you it is safe. Current NHS guidance recommends avoiding sex after the waters have broken because of increased infection risk. If you think your water has broken, contact your obstetric or maternity care provider and follow their instructions.

The bottom line

Semen contains prostaglandins, and orgasm can cause temporary uterine contractions. Those facts help explain why sex has long been suggested as a natural way to start labor.

But there is no proven timeline for sex to start labor, and good-quality research has not shown that sexual intercourse reliably increases spontaneous labor at term.

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Can Sex Really Start Labor?

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If your pregnancy is healthy and your provider has said sex is safe, have sex because you want to. If you're trying to avoid or understand an induction, talk with your provider about the reason for induction and your options. And if your water has broken or you have been told to avoid sex, don't use intercourse as a labor-induction experiment.

Want to know what else people mean by “natural induction”?

There are many things people recommend when they are ready for labor to begin. Some have been studied more than others, and some are simply traditions passed from one generation to another.

Read more: [Natural Induction Methods](#)

Learn about commonly suggested ways to encourage labor, what we actually know about them, and what to discuss with your healthcare provider.

Need childbirth preparation?

If you're close to your due date, you may feel as though it's too late to take a childbirth class. It isn't too late to get answers to the questions that matter most to you. B*E*S*T Doula Service offers hospital-birth education and individualized support. [Let's Talk!](#)

If you have time to read a book to help you prepare for your birth, [700 Babies: Expectant Parent's Survival Guide to Hospital Births \(2nd Edition\)](#) will help guide you through your late pregnancy, labor, birth, and immediate postpartum.

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Can Sex Really Start Labor?

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Sources and Further Reading

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7. Mayo Clinic. Sex during pregnancy: What's OK, what's not. <https://www.mayoclinic.org/healthy-lifestyle/pregnancy-week-by-week/in-depth/sex-during-pregnancy/art-20045318>

Educational information only. This guide is not a substitute for individualized medical advice. Pregnancy and induction decisions depend on your health, your baby's health, how far along you are, and other factors. Talk with your doctor or midwife about what is appropriate for you.