

Preparing for Parenthood Course Summary 2

Things to help birth, different sorts of births, choosing your options and making decisions

Birth is a normal, natural and very *physical* process. It is normal, and right to feel nervous or apprehensive, or down right scared about it. It is an important event in everyone's lives and this should not be taken lightly. It is important to give proper respect to both partners' feelings about birth and think about what would make birth amazing for them.

There are many things women and their partners can do to help make the sensations of birth (whatever sort of birth) feel manageable and make the experience of birth positive. A very important part of having a positive birth experience being responsible for the path that birth took. This means asking questions and making *informed* decisions.

(More) Aiding and enjoying the birth process

The previous handout includes details on support, environment and relaxation and emotional confidence. Add to those these further suggestions

Breathing

There are a range of different breathing techniques that may help. The most important thing is that the mother keeps on breathing – the uterus needs oxygen to work, and the baby is also relying on mum's breathing. Many people hold their breath in anticipation of pain. This tenses many muscles, and so makes the pain feel greater. It is important not to get into a cycle of fear-tension-pain, and breathing regularly, and using the breath to relax is important.

Use them in whatever sequence and at whatever stage feels right or comfortable:



During first stage to ensure mother and baby keep breathing:

- ✓ Slow deep breathing in abdomen
- ✓ Medium depth and speed, breathing at a chest level (feeling ribs or shoulders move rather than abdomen)
- ✓ Fast shallow breathing like blowing out candles or small individual bubbles

During second/pushing stage:

- ✓ Breathe out as you push, try roaring like a lion
- ✓ Pant like a dog if midwife asks mother to stop pushing (eg if risk of tearing)

Partners can help by breathing with the mother and by reminding the mother to breathe and to relax with the out breath. This may be verbally reminding her to relax different parts of her body.

Massage

If in doubt as to what sort of massage to try, think of the sort of massage one might do during sex (as part of the purpose of massage is to get oxytocin and endorphins flowing) or when you have banged your elbow or knee (since massage also works by providing alternative sensory stimulation to block the pain sensations and by relieving tension in sore muscles)

- ✓ Simple touch
- ✓ Gentle stroking
- ✓ Firm stroking with palm or help of hand, or massage tools such as a tennis ball, massage balls or even an orange

Talk to each other as to what feels nice, and try massaging in time to breathing. Make sure the person giving the massage is comfortable as well as the recipient. You may find it helpful for the mother to massage the father as well as vice versa, remember hormones are infectious (sort of).



Various different techniques – try them out:

Face and head massage:

Use gentle stroking and squeezing movements around the eye sockets, across the cheek bones and along the jaw line. Try around the ears, over the scalp and down the neck and throat.

Use slow and gentle movements in time with the breath to loosen neck muscles. Repeat each movement several times:

- ✓ Drop chin to chest (exhale), and then raise head straight (inhale)
- ✓ Drop head sideways, ear towards shoulder (exhale) and raise to centre (inhale) and repeat on otherside)
- ✓ Roll head in a forward semi circle from shoulder to shoulder

Pelvic Hip Massage:

In this massage partners are using either hands, or legs to press the hip bones inwards, gently. The partner's hands or legs should be in line with the mum's things when she is on all fours (ie pointing down her legs), and apply as much pressure is as comfortable. Partners may need to move their position to find the optimum point of pressure for the mum.. If she doesn't like it or it hurts STOP, but many women find they like the counter pressure, and it does also help open up the pelvis. Many women find it is very relaxing if their partner rocks them gently (for example makes circles with their pelvis) – this is particularly easy to do if the mother is leaning over a ball. It gives the mother the sensation of movement without her needing to do anything.

Hypno/massage:

1...2...3...relax. This uses the two simple principles to help someone relax. The gentle sweeping or stroking down part of the body (face, arms, back, hair, legs etc) helps physically to remove tension in those muscles. The verbal counting helps focus the recipients mind into relaxing. This can be particularly effective during the rests between contractions.



Hand massage:

Massage is useful as an aid to relaxation and increasing endorphins and oxytocin levels whatever sort of birth. If an epidural or spinal block means you can't feel the lower back or legs consider hand or face massage techniques.

Optimal foetal positioning and birth positions

We looked at the mechanics of how a baby gets through the pelvis, easiest route being head first, facing backwards, and the clever turns the baby makes to exit the pelvic capacity.

In order to help the baby into this position and to keep him or her in that position during labour remember that the heaviest part of the baby is the back of his head, and use gravity to help. Therefore positions that are:

- ✓ Upright
- ✓ Forward
- ✓ Open

such as squatting, standing or sitting upright (for example on a birth ball) or kneeling forward or on all fours. These positions help in late pregnancy and throughout labour. I attach a handout "best positions for birth" which gives more details and examples.

We also saw how you can increase your pelvic capacity by up to 28% though flexing and moving your hips and legs and torso (the "open") part.

Movement

Movement can help ease the baby through a tight squeeze in the pelvis as well as helping to relax tense muscles. Consider:

- ✓ Dancing
- ✓ Swaying
- ✓ Figure of eights with hips
- ✓ Rocking on birth ball
- ✓ Swinging from door or rope



Upright positions and movement generally help labour progress in a straightforward fashion and help relieve pain. A recent Cochrane review showed that upright labours shortened first stage of labour by about an hour and reduced the need for epidural pain relief, without having any adverse effect on mode of delivery etc. For more details and links to both this and other relevant Cochrane reviews please see:

<http://www.sciencedaily.com/releases/2009/04/090415074951.htm>

Food and drink and general comfort:

In Switzerland the birth philosophy is very much that women are not ill, they are having a baby. Therefore couples are encouraged to make themselves comfortable in whatever way they can whilst they are in hospital. This can really help with relaxation as music, dim lighting, comfortable chairs/cushions, food and drink are readily available (though it is worth noting that generally food and drink is provided within the maternity unit for the mother but not for supporters, and therefore the supporters may need to either bring supplies with them, or be prepared to go to the café or kiosk.

Professional support during and after birth:

Birth supporters are important in so many ways, including becoming guardians or protectors. If you think of birth at a mammalian level, birth supporters are very important for helping to manage the different hormone levels through their actions.

Whilst birth is hard work for the mother, it is also hard work and stressful for the birth partners (they do not have endorphins flowing in the same way). For many people having additional support from the midwives, from other birth supporters or family or from doulas can be really helpful. It allows all the birth supporters to have a break or a rest, and allows them to support each other as well as the mother.



One option some people choose is to hire a doula. This is a professional birth companion, who has lots of experience of supporting mothers (and their partners) during birth. This then takes the pressure off the birth partner (if they are there) and reassures the mother they are not alone if the partner has not yet arrived. Doulas are not midwives, so they are not responsible for any medical care, but they are supporters and protectors and can help the mother feel safe from those lions!

<http://www.doula.ch/doula/doulas> lists the registered doulas in Switzerland, and the languages they speak.

For midwife support at home after the birth you are advised to make contact with a suitable midwife before the baby is born to arrange for her to come to visit you. The midwives working on Basel doing home visits are listed on the following two websites:

<http://www.baslerhebamme.ch/>

<http://www.sage-femme.ch/>

Birth balls

(great for a sitting down version of pelvic movement and also very good for sitting on to soothe an upset baby after the birth)

I know some of you already have birth balls and some are considering getting one. I also therefore attach a handout about different ways you can use the birth ball during pregnancy, birth and after birth for those of you who want to have your own at home. The hospitals do also have birth/gym balls in every birth room. We talked about various shops you can get them from. The specific “birth ball” can be ordered via <http://www.nctshop.co.uk/Pezzi-Ball-Maxafe/productinfo/3295/> but many people find an ordinary gym ball from a sports shop perfect.

Perineal protection

Some mothers are very concerned about tearing or needing an episiotomy and how to prevent that. In advance of birth perineal massage and pelvic floor exercises can both help this. During labour there are a number of things that can help. The perineum is least likely to tear if the baby is coming down in a



good, head down, chin tucked in, back forwards position, as then the smallest diameter of the head needs to pass through the perineum. Any other position requires the perineum to stretch further. Anything that helps this will help prevent serious tears. Thus, the UFO positions and the movements both really help. Similarly maintaining natural oxytocin levels and reducing adrenaline levels also help. Finally, water can help soften the perineum and help it stretch. This does mean that one of the most significant things a mother can do to avoid tearing is to not have an epidural.

In some cases the baby is coming too fast to allow the perineum to stretch, in these cases the midwife may gently hold her hand against the baby's head as it appears at the perineum to slow it down slightly, or she may ask the mother to get into a position with her bottom up in the air so that the baby has gravity working against it and is again slowed.

Pain management techniques

I attach a handout which summarises the main pharmacological and alternative pain management techniques used in Switzerland (*Pain relief handout*). As the main two pain relief techniques used in the hospitals (and also the two most effective) are water and epidurals I also attach two "informed choice" leaflets about these (*water and epidural*).

If you feel strongly in advance of the birth that you think you will want to use the birth pool, during labour or for the actual birth as well, or if you think you either will, or won't want to have an epidural it is worth letting the maternity staff know when you arrive at the hospital. That way they can tailor their care suggestions to suit what you want. Remember, you can always change your mind.

Some couples find it helps to write a birth plan before the birth, and I attach a template for this, tailored for Switzerland (*birth plan*). This may help you consider the various choices you may have and discuss in advance how you feel about them. You can give a copy (or several) of your birth plan to your maternity care givers when you arrive in hospital in labour so that they are aware of your wishes and will do their best to help you fulfill them. It is important though to remember that situations may change such that your wishes can't be safely met, or that you may change your mind.



I attach a link to the information page about Group B Streptococcus which is necessary screening to use the birth pools.

<http://www.rcog.org.uk/womens-health/patient-information>

Different birth paths: choosing your way, taking responsibility

E-BRAIN

There are different ways to communicate with your HCPs, but the most effective forms use questions to elicit information so that you can then make an INFORMED CHOICE. One tool which can help covers the following questions

Is it an Emergency?

What are the Benefits?

What are the Risks?

What are the Alternatives?

What does my Instinct say?

What if I do Nothing?

Or you can simplify this to: Am I okay? Is my baby okay?

Informed decision making and medical technologies:

The three most commonly used medical technologies in Switzerland (apart from epidural, covered separately) are induction, forceps or ventouse and caesarean birth. I attach both the informed choice handouts and also links to further information on each of these technologies which list the benefits, risks and alternatives of each of the technologies. For information, around 11% of hospital births in Switzerland need forceps or ventouse.

Induction:

<http://www.babycentre.co.uk/pregnancy/ref/inducedlabour/>

<http://www.babycentre.co.uk/pregnancy/ref/overdue/>

<http://www.babycentre.co.uk/pregnancy/labourandbirth/planningyourbabysbirth/naturalbringonlabour/>



Assisted delivery (forceps or ventouse):

<http://www.babycentre.co.uk/pregnancy/ref/assisteddelivery/>

I also attach some information about foetal monitoring:

<http://www.babycentre.co.uk/pregnancy/ref/monitoringbabyduringlabour/>

All of these technologies can be invaluable during labour, however do be aware that they may all have side effects or cause further complications. It is important that if you are called on to make a decision about using one of these technologies you ask the medical team for as much information as you need to be able to make a properly informed decision.

Consider using the E-BRAIN questions and if at any point you are uncomfortable with the decision you made ask to discuss it again or ask further questions. If you have difficulty making yourself understood ask the hospital to provide a translator.

The research shows that parents report having better birth experience and find birth less stressful or painful (whatever sort of birth they have) if they feel empowered and well informed about what is happening around them. The hospital teams may not think to explain some of their procedures to you (either because they do things automatically or because they may not realize your level of knowledge), but they will always be happy to explain and discuss if you ask them. This can be an important role for birth partners.

You may also want to note your preferences on the birth plan template as a discussion guide for yourselves or with your midwife. Again, do remember that circumstances may change which may require you to take a course of action that you wouldn't previously have chosen, so it is important not to set anything in concrete before the birth.



Caesarean birth:

I attach a summary of who is present and what happens called *caesarean birth summary*, and a summary about recovery after caesarean entitled *caesarean and assisted birth recovery tips*.

In some case it is clear before the birth that a caesarean might be needed. In some cases it is only evident during the birth that despite the wishes and best actions of the parents and the hospital team the baby or the mother needs the assistance of a caesarean for the birth. In these cases it can feel very distressing for all to suddenly find their birth plans taking a very different route. In these do ask as many questions as you want before, during and after the birth so you feel informed and comfortable as possible. Also take the opportunity to talk about the experience afterwards with your midwife, doctor, each other or me as many people find that helps if it has been a stressful experience.

It is also important to “own” your c-birth. These might include listening to your choice of music, having something familiar with you in the operating room (obviously in the non sterile zone), requesting immediate skin to skin contact or feeding with the baby, ensuring your are properly introduced to all the staff involved and informed of what is going on at each stage.

