

NORMAL DELIVERY GUIDE

BREATHING EXERCISES

The birth of a child is a cherished and life-changing experience for a couple and their family and everyone would want it to be a perfect moment. The delivery of a baby is a unique event and different for every mother and even for every consecutive birth.

A lot of women are eager to have a normal delivery as they feel that natural childbirth with minimal interventions is the best thing for their and their child's well-being. An expectant mother may feel, that is how nature intended it to be. While normal delivery has some advantages over an assisted childbirth (typically Caesarean section), there are chances that a medical emergency during labour may make it necessary to have a surgery. Whatever it might be, the goal is always to have a safe and smooth delivery with the mother and child's health and safety in mind.

WHAT IS NORMAL OR VAGINAL DELIVERY?

Normal delivery is a natural process wherein the baby is born head-first, through the vagina (birth canal). The baby and the placenta are delivered from the uterus, through the cervix and the birth canal. This process results from contractions of the uterus during labour. Most women deliver 38 to 40 weeks after becoming pregnant. The whole process is supervised by a healthcare professional, who ensures that the mother and baby are well.

Most countries have a higher rate of normal deliveries compared to C-section deliveries and the World Health Statistics (WHS) shows that in India about 90 percent of all deliveries are normal. In developed countries, the number of C-sections is slightly larger for various reasons. According to the Centers for Disease Control and Prevention, about 32 percent of all deliveries taking place in the United States are Caesarean sections.

TIPS FOR NORMAL DELIVERY

If you are keen on a normal delivery, there are some steps you can take that will help you progress smoothly through labour into a normal childbirth :

- Prepare ahead: It is a good thing to make preparations for the birth in the pre-conception stage itself. So before you decide to get pregnant, it is advisable to optimise your health parameters such as bringing your weight down if you are overweight, taking appropriate steps to bring blood sugar under control if you are diabetic, keeping blood pressure normal and so on. If your health is in good shape, it is more likely that you will have a normal childbirth and may not need emergency medical interventions at the time of delivery.

- **Birth Plan:** A birth plan is a record of what you would like to happen during your labour and after the birth. It is a useful tool through which an expectant mother can chalk out her preferences regarding labour and the birth of her baby. Every birth plan is different but typically it might include preferences for managing labour pain, the primary support person during labour and what role that individual will play, instructions in case of unexpected complications during labour or delivery, such as C-sections, forceps use, episiotomy and so on. It may also talk about post-birth baby care such as cutting the umbilical cord, holding the newborn, breastfeeding, saving umbilical cord blood or the placenta. Make a birth plan after consulting with your doctor and discuss with her before finalising it.
- **Lamaze:** This is the mostly widely used childbirth preparation technique in the United States and has become quite popular with parents here too. Lamaze classes approach childbirth as a natural and healthy process and educate mothers-to-be on the labour and delivery process, how birth should be simple and safe and how to build confidence. These classes focus on normal childbirth, breathing techniques, massaging and relaxation techniques for labour pains, healthy lifestyle, breastfeeding and so on. Both the parents-to-be are encouraged to take Lamaze classes together.

NUTRITION

The American College of Obstetricians and Gynecologists (ACOG) recommends a diet rich in vitamin, minerals and good proteins for the mother-to-be and especially advises the intake of iron, folic acid and protein-rich foods. These nutrients are not only essential for the mother but help the development of the baby's brain and neural system, bones and muscles. A healthy well-balanced diet means that both the mother and the baby have the strength needed to withstand the pressure of labour. A pregnant woman's diet should include lots of green vegetables and fruits, eggs, nuts, pulses and legumes and dairy-rich food, say doctors. Eating right and at regular intervals is necessary as well as avoiding all kinds of highly – saturated and junk foods.

THE LABOUR AND DELIVERY PROCESS

The whole experience of labour is very individual for every woman but it is good to know and keep in mind what typically happens during the labour process. It is important to know that there is no way you can predict labour, therefore understanding what is going to happen well ahead of time helps.

There are three stages in the labour process:

- During the first stage, the cervix begins to open up (dilates) and thins out to stretch and prepare for birth. This happens in the ninth month of pregnancy, very close to the due date. According to the Mayo Clinic, early labour, especially for a first-time mother, may last anywhere from six to 12 hours. This

happens so that the baby may travel from the uterus through the bony pelvis to the vaginal opening. The amniotic sac breaks and the amniotic fluid comes out – this is what we term as water breaking. The labour begins with regular contractions that cause cervical dilation. At this stage the contractions are few and far between and if the woman is not uncomfortable, she may want to spend the time at home. In some cases, the woman may not experience active contractions, and her doctor may decide to give a medication (typically oxytocin), to initiate the labour process. During active labour, contractions become more frequent and painful. Each contraction may last for about one minute. When active labour begins it is advisable to take the pregnant woman to the hospital. At the hospital, an electronic fetal monitor will be placed around the woman's abdomen to check the strength, length and frequency of her uterine contractions and keep track of the baby's heart rate in response to these contractions.

- The second stage begins when the cervix dilates to 10 centimetres. At this time, the woman will be asked to start pushing to deliver her baby. She will push hard during contractions and rest in between them. The mother-to-be feels a lot of pain and pressure at this time and as the baby's head keeps coming down, the pressure on the vaginal opening increases. As the baby's head emerges, there is a great relief from the pressure, although the woman may feel some Spinal block – This is a type of regional analgesia that may be used to provide relief from pain shortly before delivery. The medication is injected to the patient while lying on the side, into the sac of fluid below the spinal cord in the lower back. It starts working quickly. A spinal block may sometimes be combined with an epidural block during labour. There are a variety of ways in which pain can be managed if you want to have a normal delivery and the childbirth can progress smoothly with the help of these pain relief medications. All these medications are advantageous but some may have their cons such as nausea, itchiness, low blood pressure. But the demerits rarely surface and don't really have a detrimental effect on the mother or baby.

ADVANTAGES OF NORMAL DELIVERY FOR MOTHER AND BABY

Normal delivery is a more natural form of childbirth, so the advantages in this type of delivery may be more for the mother and baby compared to a C-section, which is a surgical process. Moreover, the complications generally associated with Caesarean section birth may not be seen in normal deliveries.

These are some of the advantages of normal delivery:

- While the mother-to-be seems physically spent and can have a tedious time during labour and delivery, once the childbirth is over, she recuperates faster

compared to someone who has had a C-section, which means that her stay in the hospital is shorter and recovery time is faster.

- All the problems and risks typically associated with C-section can be avoided in vaginal births and these include anesthesia-related complications, severe bleeding, scarring and scar rupture, infections typically associated with surgery and pain which may last longer. Moreover, since the mother recovers faster after vaginal delivery, she can hold the baby and start breastfeeding sooner.
- One advantage for the baby after vaginal delivery is that the mother will have more early contact with her baby than a woman who has undergone surgery. Moreover, during the normal delivery process, when the child is coming out of the birth canal, fluid from the baby's lungs is thrown out and the baby is less likely to suffer respiratory disorders in future. But studies have shown that children born through C-section are more prone to breathing problems and other respiratory disorders.
- A C-section involves an increased risk of blood loss and a greater risk of infection. There is also a risk of the bladder or bowel being injured. With a Ceasarean delivery, damage can occur to the bladder in the course of the surgery to deliver the baby. Sometimes, a catheter may need to be in place for weeks after discharge from the hospital, that this may cause some injury to the bladder.
- In most cases, bowel function after a Caesarean section is restored more or less quickly. But sometimes, bowel function does not return normally because of unknown causes. But if there is actual bowel injury, the nature and degree of complication depend on the size, severity, and location of the injury. Unrecognized bowel injury can lead to life-threatening illness with severe abdominal pain and fever.
- Other complications involving the placenta such as placenta previa are avoided in vaginal delivery.

Courtesy: The Nest