

WPFW Radio Show
Topic: Birth
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Good evening. This is Claudia Booker of Birthing Hands DC. Over the last two shows we have talked about pre-conception and pregnancy. This show I would like to talk about labor and birth.

GETTING CLOSE TO THE BIG DAY

You have reached the 37th week of pregnancy. Your friends have given you a wonderful Blessingway Celebration and your gorgeous belly cast is waiting to be painted.

You have achieved the goal of reaching “term” and your baby can come anytime now. However you know that it is best that the baby remain inside growing in the womb as long as possible, thriving on the nourishment and calm of her mother. Recent evidence has shown that not only does the baby put on extra weight that she may need for the first few days of life, but also the baby’s brain will increase in size by 1/3 from 37 weeks to 40 weeks!

Most babies are born between 37-42 weeks gestation. At 37 weeks you baby weighs about 5-6 pounds and is about 18 inches long. She has listened to her parent’s voice and learned to recognize them; she has been practicing breathing, and can open and close her eyes. Because of her growing size and length there is less and less room for the baby to make big movements.

She is now head down in the mother’s uterus and will remain that way. Although she can turn and spin like a top, she does not have strong enough neck muscles to turn herself head up.

TAKE TIME FOR YOURSELF and YOUR PARTNER

Take these days to reconnect with your partner. These are precious moments because it is the last time when you will be a couple—just the two of you, or a family like you are now.

Take time to create and savor some “just the two of us” time—go out to dinner or a movie, review your photo album and reminiscence on when you met, share your dreams and hopes of this new baby, be intimate.

Take some time just for yourself. Get a manicure and pedicure, get a massage, get your hair done in a style that requires little work, rent a “chick flick” and invite your best girl friends over!

Take the time to coax your baby into the loving world of your family. Take a relaxing warm bath, complete with candlelight and music (perhaps a back rub in the tub too), some chamomile or peppermint tea; then rest yourself in a soft chair or on the bed and oil your belly while talking softly and lovingly to your baby about how everything is ready to welcome her, and coax her home to your arms.

UNDERSTANDING PRE-LABOR

A few weeks before birth a woman's body starts to prepare for labor. Because the baby is dropping lower into your pelvis (called lightening) you can breathe easier for the first time in months! But, now there is even more pressure on your bladder causing more bathroom visits.

Your body holds more fluid, your lower back begins to ach, and your anxiousness to meet this new one is only equal to your tiredness.

Your body starts to show the signs of pre-labor, also called "practice labor". You have been having Braxton Hicks contractions over the last few months. These contractions may feel like period cramps and you may notice your stomach getting hard like a basketball, but they make no change in your cervix; the cramping may last for a few minutes or hours but they do not become more intense or more frequent. However, now they are becoming more noticeable.

The protective plug known as the "mucous plug" that has kept your cervix closed to prevent bacteria from entering the uterus is lost. Expectant mothers shouldn't worry if they see the remnants of the plug; it may dislodge hours or days before labor starts. When you are still at night you can sometimes feel the flutter of your baby's fingers and hands.

It is also you and your partner's chance to practice the comfort techniques, relaxation, and breathing exercises you learned in childbirth class and will use during labor.

UNDERSTANDING LABOR

When will labor start?

Labor can start at any time. Who knows!! Live your life, don't live for labor!!! Each day your body is preparing itself for labor and when it is ready to let you know, it will!

One day or night, early labor will begin. The contractions will become more frequent and intense; you may start to see some "bloody show" and if you have not lost your mucous plug you may now as the cervix starts to thin and open. The lower back pressure will intensify.

Your "bag of waters" may break. If you suspect that you water has broken, it is important to immediately call your care provider and tell the following things: color, odor, amount of fluid, time it broke, and if you have felt the baby move since.

What do you do in early labor or until it is time to go to the hospital or birth center?

Do what you normally do: cook, read, nap, clean, talk, dance, sit on the birth ball, check the bags for the hospital or birth center, play cards, watch TV, get in the tub or shower, listen to music, go for short walks, DRINK PLENTY OF WATER AND EAT. You will need the energy in labor. Don't concentrate on the contractions; concentrate on the time between them—take a contraction vacation!

What is labor?

Before I explain, let me describe what your body has been doing while growing this baby, which will help us better understand what happens during labor.

When you are pregnant, your body's uterus has the fantastic ability to grow not only your baby but a fluid-replenishing sealed bubble (the amniotic sac) in which the baby will grow. Inside the amniotic sac is a blood-rich organ called the placenta which attaches to the growing baby by a cord called the umbilical cord (it attaches to the spot where the baby's navel will be) through which the baby gets oxygen and nutrition from the mother's system. The baby grows through many stages of development into a healthy and calm baby ready to be born, reflective of the mother's commitment to eat healthy; exercise; and avoid stress, alcohol, and smoking. The baby grows and the uterus expands to make more room, but the space is becoming too small for her. In short, it is time for your baby to leave by being born.

The body has developed several safeguards to keep the baby in protected in its sealed water universe safe from harm. At the base of the uterus, is the opening called the "cervix". It has grown thick and hard (about 4 cm) and is kept firmly closed by blood vessels and the mucous plug. The cervix has also tilted backwards.

No one knows what triggers labor—perhaps the baby starts to produce hormones that are released in the amniotic fluid, are carried back to the mother's body and start the process of sending the baby to the outside world.

Labor is all about the process of the mother's body systems working together to get the baby to descend through and out of the uterus and cervix and into the outside world.

Now it is time for labor. The new, more powerful contractions which feel more like waves of energy begin. They may start off like period cramps, progress to your back and move to the front of your belly and then radiate downward; you can watch your belly tighten.

These contractions are pushing the baby lower into the uterus toward the exit, the cervix. As the contractions push the baby downward, the cervix is pulling itself upward, attempting to pull itself like a tight turtleneck sweater from around the baby. The cervix will open (dilate) and thin (efface). One set of uterine muscles pushes the baby down as another set of muscles pulls the cervix up and the baby makes many turns on its path to birth.

Why does labor take so long?

The body must coordinate many systems at the same time in order to get the baby in the right position, the baby to descent, turn, the cervix to open and thin, bones to soften and let the baby through, and systems to clean themselves out to make more room.

This can take time; labor for a first-time mother can take between 16 - 28 hours. The process of birthing can also be affected by whether you are relaxed, feel emotionally supported and calm, drinking, changing positions to encourage the baby to come down, and, to some degree, the size and position of the baby.

What are the stages of labor and what happens?

With each phase of labor the cervix opens more until it reaches 10cm open and is paper thin. Imagine the metal ring inside of the clothes dryer tube—that is 10 cm.

It's time for the baby to complete its descent and be pushed out. Now the mother can take control of her labor and push the baby out! She will feel this overpowering urgent need to push but will hold back on her urge until the contraction is at its strongest. With the help of

your partner and labor support team, you can push the baby down and out using many pushing positions including squatting and hands and knees.

Lastly, the placenta can be delivered with a few pushes. Once the umbilical cord has stopped pulsating and the cord is cut, freeing the baby from the placenta, and the placenta will detach from the lining of the uterus and be expelled with a few pushes. You may want to keep the placenta—many families keep it for various rituals.

What about the discomfort labor—it hurts!!!

Yes, there are stages of labor that very uncomfortable but they are short. It passes and leaves no lingering behind—it ends as soon as the contraction is over and it has a purpose. These are the times when you practice your meditation, breathing exercises, comfort techniques, changing of positions, and rely on the emotional and physical support of her labor team. In addition, if you have a doula she can guide you through various comfort techniques to minimize your discomfort and to keep your labor progressing.

What about pain medication?

The choice on whether you want pain medication is a personal one. Hospitals generally have available two types of medication. One is Nubain, a narcotic that is given by way of an injection in the thigh and through the IV into your blood stream. It lasts about 2 hours and passes through the placenta to your baby. The other pain medicine is administered through an epidural, which is a continuous source of pain medication. Once you get pain medication you will be confined to the bed and have several other hospital procedures that may inhibit your ability to move.

What happens after the baby is born?

When the baby emerges she is covered with fluid and blood and may have pieces of a thick cold cream called “vernix” on parts of her body. She will still be attached to the umbilical cord and may be placed on your abdomen or chest. She will be dried off, rubbed, and a hat will be put on her head. You and your partner will be asked to speak to her because she will recognize your voices. Once the umbilical cord has stopped pulsating it will be cut (your partner can ask to do the honors) and then she can be placed on your chest.

Immediate skin-to-skin contact and breast feeding are important to both mother and baby to help the baby adjust and to minimize postpartum bleeding.

Imagine how traumatic getting born may be for a baby! Leaving a warm liquid world and entering a world of with lots of light, new voices and new sounds and smells. “WHERE AM I?” She must be wondering.

The baby is placed on the mother’s skin and the mother’s body has the ability to regulate her temperature to keep the baby at the perfect temperature (the baby says, “Hmm, I’m warm and cuddly here”). The mother’s chest makes a substance that smells and tastes like amniotic fluid and the baby can smell and taste it (the baby says, “Hmm, it smells and tastes like back home”). The baby lying on her mother’s chest can hear the familiar heartbeat it she has listened to for many months (and the baby says, “Hmm, this sounds like back home”). The parents speak to the baby and she hears familiar voices she heard in the water universe (and the baby says, “Hmm, I know those voices from back home”). And the baby finds the breasts and gets its first meal on the outside world. The baby is calm, reassured, feels safe after the

great adventure of birth. She knows that she is now at home on the outside with people she knows and feels safe.

And in one moment this dream comes true, takes your heart and you will never be the same again. Happy Birthday Love of My Life and Welcome!

PRENATAL CHECKLIST

Let's review the checklist of the many things you have completed over the last few months:

1. Attended all prenatal visits with your care provider
2. Attended a breastfeeding class at perhaps Howard University Hospital's Blessed Initiative program or at the Breastfeeding Center of Washington
3. Chosen your birth site and have clear directions and transportation to there
4. Invited your labor support team who will be positive, nurturing and involved
5. Finalized your birth preference plan with your husband/partner and your care provider
6. Got your bag, your husband/partner's bag and baby's bag packed and by the door
7. Have the base of the baby's car seat installed in the car and checked by the Fire Department or other appropriate agency
8. Hired your doula and arranged your laboring plan—a doula will bring you support, nurturing, information and non-medical comfort
9. Selected a pediatrician for the baby and made your decisions about such things as vaccinations and circumcision
10. Chosen the music and other items to make the atmosphere just right so that you feel safe, calm and relaxed during labor
11. Have purchased your personal items and baby's items for when you two return home from the birth
12. Joined a mommy support group like Mocha Moms or a neighborhood parent list serve
13. Set up a "phone tree" to be handled by a friend to spread the word about the baby's arrival and run interference on incoming calls
14. Have a few prepared meals to take care of your family's eating needs in the refrigerator or freezer for when you and your new family return from the birth