

Labour and Birth in Water

The benefit of using water to reduce the pain of childbirth is well established and accepted in most care settings. The use of a shower or hot wet towels for pain relief is common practise, however women wanting to labour and give birth while immersed in warm water may find caregivers and birth settings unprepared to provide this option.

The buoyancy of water enables a woman to move more easily than on land. This alleviates pain and optimises the progress of her labour (Burns & Kitzinger, 2001, Enkin et al 2000). Water offers a labouring woman an environment where she can behave instinctively and feel in control. When a woman feels in control during childbirth, she experiences a higher degree of emotional well-being postnatally (Green et al, 1990).

Women who wish to labour and/or birth while immersed in deep warm water know it is a simple way of assisting them to cope without the use of strong drugs. A reduction in the use of pain relieving drugs not only benefits the mother (who is more alert and responsive after the birth) but the baby will also benefit considerably. One study has demonstrated how babies whose mothers had epidural anaesthesia were still showing adverse effects of the drug up to six weeks later (Rosenblatt et al, 1981).

Women also know to labour in water increases their chances of giving birth naturally and normally with a minimum of interference or medical intervention. A prospective observational study in Switzerland in 1999 found waterbirths had the lowest rate of analgesia use, the lowest episiotomy rate and lowest incidence of 3rd and 4th degree tears, as well as the lowest maternal blood loss. Babies born in the water had the lowest rate of neonatal infection, and the average Apgar score at 5 minutes was significantly higher after waterbirths. Women who gave birth in the water had the most satisfying birth experience (Eberhard & Geissbuchler, 1999).

I practised with the Community Midwifery Program and in private practice in Western Australia from 2001 to 2005 conducting home births and waterbirths. The following sequence of photographs is provided as **an illustration** of a labour and birth in water. **It is in no way intended to be instructional. Any woman planning a home waterbirth must ALWAYS be attended by a midwife appropriately skilled and equipped to manage a labour and birth in water.**

For further information about water birth I recommend the following:

AIMS publication “*Choosing a Water Birth*” by Beverley A. Lawrence Beech.

The National Childbirth booklet “*Labour and Birth in Water – How and Why You Might Use Water*” available from www.nctms.co.uk

There are many websites about waterbirth, however www.yourwaterbirth.com provides a comprehensive list of link sites to explore.

For specific guidelines for midwives interested in conducting waterbirths, I recommend the Standard 10-3 “Labour and Birth in Water” 2002, from Women’s and Children’s Hospital, Adelaide, South Australia.

References:

Burns, E Kitzinger, S (2001) Midwifery Guidelines for Use of Water in Labour. Oxford Centre for Health Care Research and Development, Oxford Brookes University.

Eberhard, J & Geissbuehler, V (1999) Influence of alternative birth methods on tradition birth management.

Enkin M, Keirse M, Neilson V, Crowther C, Duley L, Hednett E and Hofmeyer J, (2000). "A Guide to Effective Care in Pregnancy and Childbirth". Oxford: Oxford University Press 316-317

Green JM, Coupland VA, Kitzinger JV (1990). Expectations, Experiences and Psychological Outcomes of Childbirth: A Prospective Study of 825 Women. "Birth" 17(1):15-24.

Rosenblatt DB, et al, The influence of maternal analgesia on neonatal behaviour:II epidural bupivacaine, BrJObGyn, 1981;88:407-13