

Prepared Childbirth Class

New England OB/GYN

Goals of the Class

- ▶ You will have received information about labor and childbirth.
- ▶ You will have a greater understanding of the stages of labor
- ▶ You will a have greater understanding of how to cope with the pain of labor
- ▶ You will learn about normal postpartum changes



Before We Begin...

- ▶ *Our overriding goal: Healthy Moms & healthy babies*
- ▶ Does anyone have a pressing question or concern?
- ▶ Does everyone have car seat...that they can install?
- ▶ Have you discussed circumcision?
- ▶ Do you have a pediatrician? Most don't come to BWH, but we have staff pediatricians for in hospital care
- ▶ If you're not planning to take the hospital tour there is an on-line tour under "Having your baby at Brigham & Women's Hospital"

Where, What, How



- ▶ Communicate your preferences (feeding, skin to skin, etc) so we can support what's right for you
- ▶ BWH - 75 Francis Street, Boston
- ▶ Obstetrics admitting office: L&D CWN building - 5th floor
- ▶ Parking information
- ▶ How many people can you have? Labor support, not visitors

▶ Have you considered public cord blood banking?

▶ BWH/DanaFarber is partnered with Duke University Carolinas Cord Blood bank

▶ All our doctors can collect

▶ If there is a *current* directed need, prenatal arrangements can be made

▶ If interested, let your labor nurse know

Celebrating 10 Years of Cord Blood Donation at Brigham and Women's Hospital

Diseases treated by cord blood units collected at BWH:

• Acute Lymphoblastic Leukemia • Acute Myelogenous Leukemia • Acute Undifferentiated Leukemia • Beta Thalassemia Major • Chronic Granulomatous Disease • Chronic Myelogenous Leukemia • Chronic Myelomonocytic Leukemia • Fanconi Anemia • Familial Erythrophagocytic Lymphohistiocytosis • Hodgkins Lymphoma • Hurler Syndrome • Metachromatic Leukodystrophy • Myelodysplastic Disorder • Non-Hodgkins Lymphoma • Plasma Cell Disorder • Severe Aplastic Anemia • Severe Combined Immunodeficiency • Sickle Cell Anemia

Countries and States that have received cord blood units collected at BWH:



Australia



Brazil



Canada



Italy



Netherlands



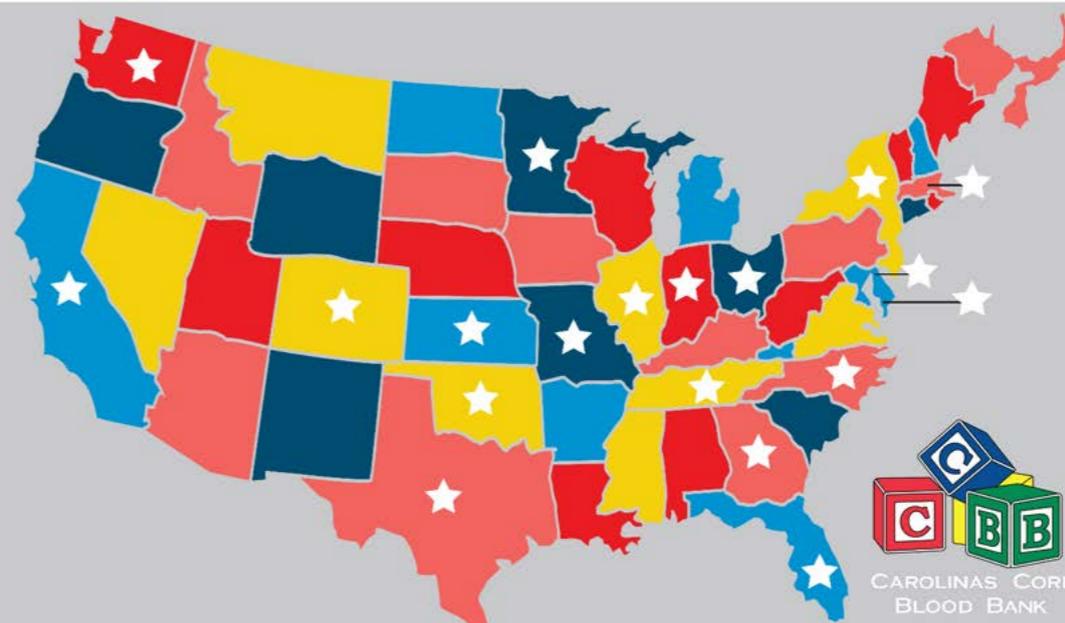
Spain



United Kingdom



United States



What to Pack for the Hospital

▶ FOR LABOR:

- ▶ Large water bottle
- ▶ Hair scrunchy/something to hold hair off your face
- ▶ Long charging cord
- ▶ Bluetooth speaker
- ▶ Small snacks for partner

▶ FOR POSTPARTUM:

- ▶ Toiletries for self, partner
- ▶ Nursing bra
- ▶ Loose fitting, seasonally appropriate clothing for self, infant to go home

The 4 Ps of Labor

Labor is guided by the 4 Ps: Powers, Passage, Passenger & Psyche

- ▶ **Powers:** The force of the contracting uterus, the force of maternal pushing
- ▶ **Passage:** The shape, size of mother's pelvis
- ▶ **Passenger:** The size, position of the baby in uterus
- ▶ **Psyche:** The state of mind of the mother

First Stage of Labor

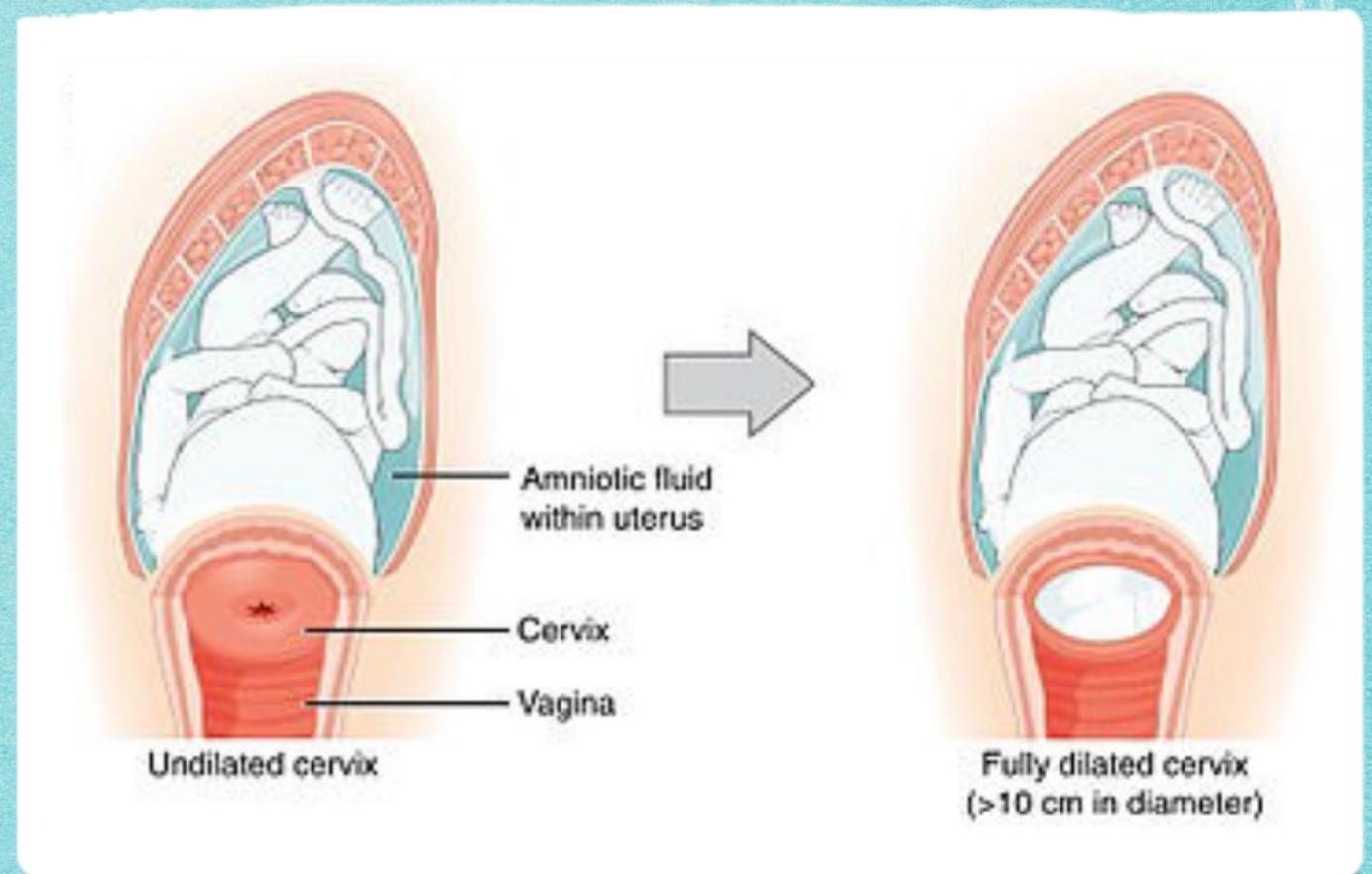
0-10 cm or onset of labor to fully dilated

First stage divided into 3 phases

Early phase:

Can take up to 20 hrs

0-4/5 cm, contractions gradually increase in frequency & intensity



First Stage of Labor (cont'd)

Active phase:

- ▶ Dilation about 1 cm/hr
- ▶ 5-6 cm to 7-8 cm
- ▶ More breathless, harder to rest between contractions, may have urge to bear down. Contractions more frequent and painful

Transition phase:

- ▶ Dilation more rapid
- ▶ May feel like you can't or don't want to continue
- ▶ If natural childbirth, this is a time you may consider pain management

How will I know it's labor?

Pre-Labor Contractions

Labor Contractions

Uterus tightens but only in portions	Eventually tighten the entire uterus
Usually do not cause back pressure	Usually cause pressure in low back and/or lower abdomen
Do not get longer, stronger or closer together; may come and go	Get longer, stronger and closer together over time
May stop when you change your activity, like taking a bath or walking	Do not stop when you change activity. Walking may make them stronger
Do not cause cervical change	Cause the cervix to thin and open

How will I know it's labor?

- ▶ Contractions take your breath away, stop you in your tracks.
- ▶ You can't walk or talk through them
- ▶ May have bloody show - mucous with streaks of blood. (Not the same as losing mucous plug)
- ▶ Water may break

When to Call the Office

Call with any questions, anytime of day!

5-1-1 – when contractions are 5 minutes or less, lasting for about 1 minute for at least 1 hour.

Decreased fetal movement, pre-term labor <37 weeks, bleeding, SRM, especially if + GBS, need reassurance or scared,

You will be seen at office or BWH triage



Possible or Probable

- ▶ My water breaks just before labor — 10%
- ▶ Diarrhea/nausea
- ▶ Bloody show/ mucous plug
- ▶ Antibiotics — +GBS
- ▶ Epidural — about 85% use epidural at BWH

Possible or Probable

- ▶ Baby born on due date - about 3%
- ▶ Baby born pre-term < 37 wks or baby born after due date
- ▶ Induction – many factors
- ▶ Spontaneous urge to push

Induction of Labor

- ▶ Why might you be induced?
 - ▶ SROM (spontaneous rupture of membranes) when GBS+, SROM with no contractions, AMA, > 41wks, health of mom or baby is at risk if pregnancy continues
- ▶ How: cervical ripening (prostaglandins or cervical balloon, or combination), Pitocin, AROM (artificial rupture of membranes)
- ▶ Pitocin also used to augment labor

Coping with Labor/Pain Relief

Relaxation techniques, hydrotherapy, breathing patterns, massage, effleurage

Role of partner/labor support people

Narcotics - IV/IM medication Nubain, Stadol

Nitrous Oxide (laughing gas)

Epidural

- ▶ If I choose to have an epidural, when can I have it placed? Is it ever too early or too late?
- ▶ Will it slow down my labor? Will an epidural cause me to have a Cesarean section?
- ▶ Will I be able to push my baby if I can't feel things?



Second Stage: Pushing to Birth

- ▶ Fully dilated (10 cm) to birth of baby
- ▶ Labor down to pelvic floor
- ▶ 2-3 hrs to push first baby, often less with next baby; Positions for pushing
- ▶ Birth, baby skin to skin, delayed cord clamping
- ▶ Episiotomy / Vaginal tear / Repair

Third Stage: Placenta

- ▶ Delivery of placenta – can take up to 30 minutes. Watch for bleeding at this time
- ▶ You may feel mild contraction as placenta detaches
- ▶ Much easier than delivery of baby

Fourth Stage/Golden Hours

Assessment of Mom & baby

Unique time due to hyper-alert state of newborn

Bonding, skin to skin either partner, initiate feeding

- ▶ You will be asked if you would like to have the baby placed on your chest immediately after birth or would you like to have baby dried off first.
- ▶ Research indicates baby's respiratory and heart rates stabilize as well temperature when skin to skin contact is initiated
- ▶ Facilitates breastfeeding, bonding and a happier baby



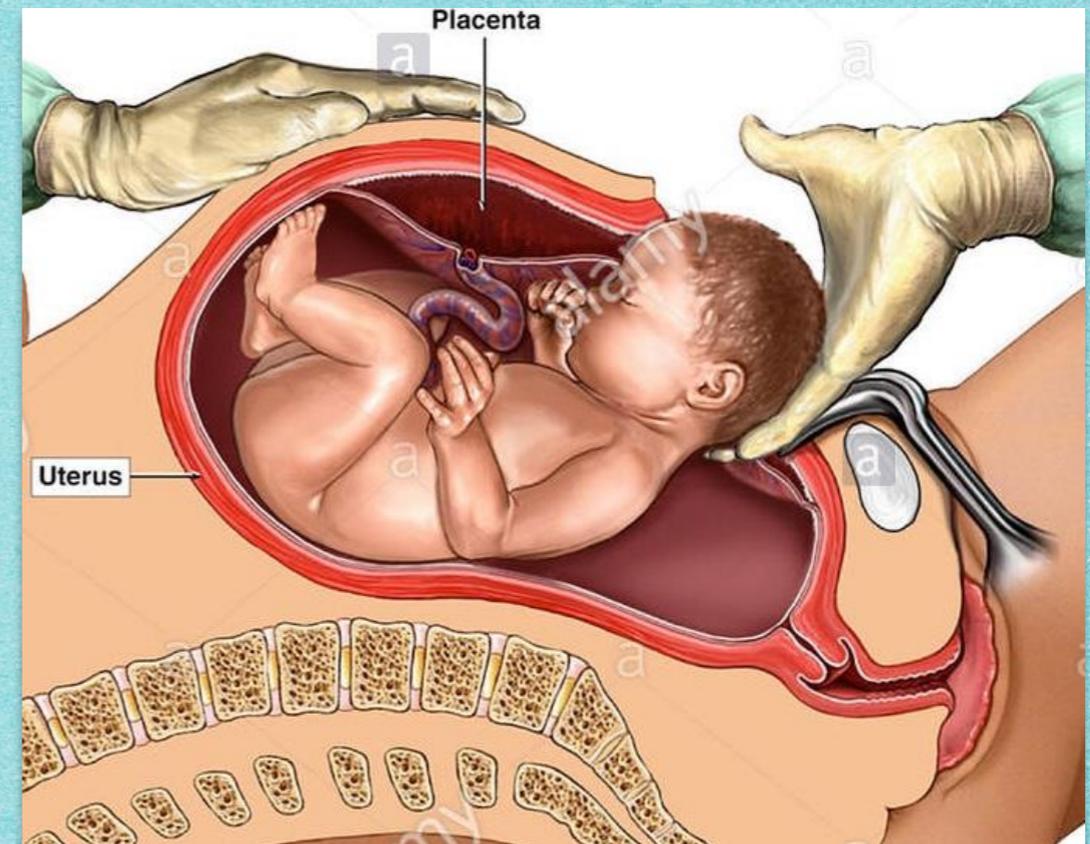
Cesarean Birth

Birth of baby through an incision in lower abdomen & uterus

Everyone is at risk for cesarean

What are some reasons why you may need a C/S?

- ▶ When maternal or fetal integrity is in question
- ▶ Labor progression stops - arrest of dilation
- ▶ Unable to push baby out of pelvis - arrest of descent
- ▶ Baby's size or position, pelvic size - breech, OP, asynclitic



Postpartum

- ▶ Length of stay in hospital:
 - ▶ 2 nights for a vaginal birth
 - ▶ 4 nights for a Cesarean section
- ▶ Vaginal flow for first few weeks, ice packs, sitz baths, hydration, ambulation
- ▶ Baby Blues: first few days you may be more emotional
- ▶ Postpartum depression: outside the range of your behavior
- ▶ Make an appointment for 2 & 6 week follow-up with your doctor

Fourth Trimester

- ▶ Effects of pregnancy and birth continue up to 3 months after birth
- ▶ Pregnancy involves physical, emotional & psychological changes all of which continue in the fourth trimester
- ▶ Body changes don't happen quickly. Remember it took 9 months to get there

Postpartum Warning Signs

- ▶ Shortness of breath, pain in your chest
- ▶ Fainting or seizure
- ▶ Headache not responding to medications or with visual disturbances
- ▶ Blurry or distorted vision
- ▶ Bleeding soaking through pad/hour, clots the size of an egg or bigger, or with odor
- ▶ Temperature >100.4 , incision that is not healing
- ▶ Redness or swelling in leg that is warm or tender to touch

Lactation Counseling and Support

- ▶ Jen Harper, NP, CLC
- ▶ Breastfeeding counseling and management support to families who are thinking about breastfeeding or who have questions or problems during the course of lactation/breastfeeding.
- ▶ Individualized care available by appointment for you and your newborn.



4th Trimester Classes and Support

▶ JCC (Jewish Community Center) Early parenting programs

- ▶ New moms, second time moms and infant and toddler classes

▶ Early Parenting Partners and Healthworks Consultations, Workshops and Classes

- ▶ Infant and toddler sleep, nutrition and behavior

▶ Look for resources now in your area

Last Point

Be flexible, open-minded, and communicate with your partner and medical professional about what you think will give you the most satisfying birthing experience!