AIMS For a better birth...

Homebirth after Caesarean

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I had wanted a home birth since my first pregnancy but had followed medical advice and had our two sons in two different hospitals. Our first son, Remy was born by caesarean section; our second Jared was born vaginally. Unfortunately, he developed jaundice and we were hospital bound for seven days, much to Remy's horror. Because my husband John and I felt the hospital procedures had led to too much interference and separation from the family, we decided to stick out for a home birth when I became pregnant with our third child.

Our GP fully supports home births but asked me to see the hospital consultant for a second opinion - home births are not recommended after a caesarean. We agreed to this request and saw the consultant who did not feel a home birth was appropriate in view of the risk of uterine rupture. It was suggested we give the matter further thought. After reading all the available literature and very careful consideration, we decided the risks involved did not outweigh the benefits of a home birth. The consultant agreed that all would probably be well but felt unable to approve our decision. We made it clear that the responsibility was ours and that we'd made an informed decision. Our decision was accepted but not agreed with. To our delight though, our GP agreed to continue to support us.

By the time all this had been sorted out. I was 6 months pregnant. I now started attending my local ante-natal appointments and met mixed reactions from the midwives. They were generally supportive but there was one mid wife who would not have been welcome at the delivery. The midwife responsible for our area was extremely supportive but was to be away around the E.D.D.

My pregnancy was uneventful until the actual E.D.D. when it was discovered that my haemoglobin level had gone down to 9, despite taking two iron tablets a day. The midwife worried me by suggesting this indicated the need for hospitalisation and probably induction. (The acceptable min. level is 10). After allowing myself to calm down and to get my facts right I contacted my GP who in turn contacted the consultant. It was agreed that I'd have a course of 6 iron injections, what fun.

From here on, I Saw Or spoke with my GP on a daily basis. Whilst he felt all was well. he was concerned that I did not go too long over because baby would just be getting bigger and he felt, thereby increasing the risk of uterine rupture. I agreed to a scan 6 days after the E.D.D. and this showed the baby was in a posterior presentation. that there was no amniotic fluid, that the placenta was calcifying and that it was a small boned baby.

The TECHNICIAN expressed her concern but we did not share this as we knew baby was still very lively. My GP again contacted the consultant who felt I should attend her clinic that day (7 days over) and bring my things for admission. I told my GP that I did not wish to be admitted but agreed to see the consultant. After a 2 hour wait in the clinic we were finally seen and I was examined. To our amazement, I was already 2-3cms dilated. I was advised to remain in the hospital but we refused - it was Remy's 6th birthday the next day. The consultant compromised - it was thought I'd spontaneosly go into labour within the next 48 hours. I was asked to come in on the 25th January (9 days over) if I hadn't already gone into labour. After satisfactory monitoring of the heartbeat, we went home much happier than we had been that morning. Further good news was my haemoglobin level had increased to 10.3.

We were naturally elated that I had actually started labour but this turned to trepidation as the 24th went by without any signs (I had lost the plug some week ago and had had occasional pains but nothing consistent. My GP called in to see how things were and to check if I was going into hospital. I explained I still felt this unnecessary and he agreed that he would see me at home instead but warned me in a fairly good natured way that I was 'pushing my luck'. As my mum was staying overnight with us (as a precautionary measure) we decided to take advantage of our resident baby-sitter and go for a long walk in the hope that this might bring things on. (At this point, I should mention the invaluable help and support we received from the N.C.T., particularly the ante-natal class teacher whose advice and calming manner I sought often during the last few days of pregnancy. She mentioned the walk). We were out for an hour and took a hilly route. I felt very tired when we arrived home at 1030pm and my back ached. I went to bed at I I at l. loam I woke with strong contractions - I could not believe this was it, I refused to let John run a bath for me as I was worried the contractions might stop. We started timing the contractions when it became clear that I was in labour and by I .50amJohn persuaded me that it was time to call the midwife. Contractions were every 5 minutes and very strong. He did this whilst I was sitting on the 100 - not only was I having contractions but diarrhoea too. I could not find a comfortable position at all but found relaxation easier and more effective this time. I again went through a phase of doubting my ability to cope (transition stage?) which I had also done in my previous labour but this time John was with me from the start and was a great help. Contractions were now increasing in intensity and more regular - every 2 minutes or so now.

Two midwives arrived (Barbara and Elizabeth) at 2.20am and laid out their equipment in our bedroom. They were quite relaxed and friendly and efficient. They were quite happy to wait until I was ready to be examined, patiently waiting for the contractions to ease. When I was examined I was told I was already fully dilated and could push when ready. As the waters had not broken, Barbara suggested she break

them now. I agreed and was surprised at the ease with which this was done. I had intended to squat for the 2nd stage but decided to stay where I was (on the bed) when my legs shook uncontrollably. I was propped up with pillows and I waited until I knew I wanted to push. After about 4 pushes, Barbara began to urge me on - obviously concerned there too much delay here because of my previous scar. It had taken several attempts before I was able to push properly but once I had re-learnt this procedure I was able to use the contractions more efficiently. The head crowned and then appeared and Barbara asked me not to push whilst she checked the cord as the baby was arriving looking up instead of looking down. All was well however, baby was turned and delivered onto my stomach by 3.06am. In our joy we forgot to even look at whether we had a boy or a girl and had to be reminded to do so by Elizabeth.

We had agreed to have syntometrine, but only after the cord had stopped pulstating. (The (iP Maternity Unit was being manned by only one midwife whilst Barbara and Elizabeth were with me so they "'ere in a hurry to return to hospital.) I was shown that the cord had stopped pulsating and agreed for it to be cut. Within 5 mins of the syntometrine, the placenta was delivered and was said to be healthy - contrary to the scan report. Dominicweighed in at approx. 81b, his body length was 54cm, head size 37.5cms. He was the biggest of our babies in every way but I was lucky enough not to need any stitches. He successfully took to the breast and seemed to take an interest in his new world from the start. (Apgar scores 9 and 10).

His two brothers (and grannie) had appeared just as hed been delivered: Remy wanted to know what the white stuff was on his brother and was keen to hold him; Jared was bemused; grannie delighted - cleaning up all around and several cups of coffee followed, then the midwives left at about 4.00am less than two hours after arriving. We had yet another drink, tidied up basked in the wonder of it all and finally went to bed at 5.00am - the five of us in our bed, grannie in hers. John and I barely slept - the excitement, the wonder, the love, the re-living Of the whole birth experience was enough to keep us on a high for several days to come. Our GP came at about 7.30am mainly to congratulate us but also to see how we were.

Its interesting to note that despite the scan results, I did have a fair amount of amniotic fluid both before he was born and after he popped out. He was said to be only about 39 weeks and the placenta was healthy. He was a large baby with an above average size head and body length. None of this tallied with the scan and one wonders how often interference is advised because of results similar to these. It i so easy to give in to supposed greater knowledge. I firmly believe that insufficient credit is given to the mothers instinctive feelings regarding the child she carries.

I would recommend a home birth to anyone who really wants one and feel it is well worth fighting for particularly where there are children already in the family. The difference we felt was trememdous. Words cannot express our joy. What a shame that home births are considered to be abnormal, why make birth into something to be feared?