CHILDBIRTH CLASS
WEEK TWO
“We are the only species of mammals that can doubt it’s capacity to give birth. Think about that.”

~Ina May Gaskin
Childbirth education provides you with knowledge about the birth process as well as an understanding of the cause of labor pain.
Regardless of Your Pain Tolerance....

...you can find constructive ways to deal with the pain of labor.

THE FIRST STEP is to understand where the pain is coming from....
Factors Impacting Discomfort...

- The dilation and thinning of the cervix.
- Pressure of the baby’s head moving through the birth canal.
- Lactic acid build-up.
- Contracting uterus putting pressure on other organs.
- Size and position of the baby.
- The stretching of the vagina and perineum.
- Everyone has their own level of pain tolerance.
Your Baby, Your Birth

Think about how you want to manage your pain during labor.
Some Suggestions...

- Labor Support
- Birthing Ball
- Labor Tubs
- Showers
- Walking
- Aromatherapy
- Music
- Massage
- Epidural
- Stadol
Pain Medication
Epidural analgesia and Stadol
Epidural

Used for pain relief during labor, an epidural is a small flexible catheter inserted into the lower back. Medication is administered through the catheter that causes numbness from the top of the abdomen to the feet.
Epidural, continued

- Must be in active labor – typically 4 cm to 8 cm dilated
- You will be numb from the top of the abdomen down, so no longer getting up out of bed.
- May use a “peanut ball” to help change positions in bed and open the pelvis for fetal descent.
- Requires a catheter to empty your bladder. This will be removed before pushing.
- Some women notice discomfort high up in the abdomen, or “windows” of discomfort. Could be that the epidural doesn’t reach that high, or you may need to turn in bed to help gravity work it through the system.
- Blood pressure can decrease due to medication, so you will likely receive IV fluids to counteract that possible drop. Could lead to more swelling after delivery.
- The effects typically wear off/sensation in legs returns in 3-4 hours.
- Very few people experience a “spinal headache” a day or two after the epidural catheter has been removed from their back. May require a blood patch to resolve – they take blood from your arm and patch the hole where the catheter was to stop the spinal fluid leaking.
Stadol

- IV medication
- Must be 4 cm dilated, can get it up to 8 cm
- Takes the edge off, does not numb
- May feel “loopy”
- Must stay in bed while feeling effects - about one hour
Induced Labor

Medical reasons for induction include:

- High Blood Pressure
- Diabetes
- Post-dates
- Small for Dates of Pregnancy
- Ruptured Membranes
Assisted Delivery
Reasons for Intervention

- Fetal distress
- Maternal exhaustion
- Inability to push
- Persistent posterior position of baby’s head
Episiotomy

- Midline or Mediolateral incision is made on the perineum (the skin between the vagina and the anus) which allows more room for baby at delivery.
The blades are gently inserted into the vagina, one at a time.
Vacuum

Vacuums are often used in place of forceps.
Your Newborn Baby
Molding

Fontanelles in blue

Minutes after birth

After 24 hours
## Apgar Scores

<table>
<thead>
<tr>
<th>FIVE AREAS EVALUATED</th>
<th>POINTS GIVEN FOR APGAR SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0</td>
</tr>
<tr>
<td>Heart Rate</td>
<td>Absent</td>
</tr>
<tr>
<td>Color</td>
<td>Blue to pale</td>
</tr>
<tr>
<td>Breathing</td>
<td>Absent</td>
</tr>
<tr>
<td>Muscle Tone</td>
<td>Absent/flaccid</td>
</tr>
<tr>
<td>Reflexes</td>
<td>No response to stimulation</td>
</tr>
</tbody>
</table>
Normal Newborn Appearance

Moro Reflex
Umbilical Cord
Vernix

- A coating on the newborn’s skin to help prevent the skin from wrinkling while in amniotic fluid.
Vitamin K and Ilotycin
Identification of Your Baby
Skin to Skin Contact

Amazing Benefits for All!

https://www.youtube.com/watch?v=51xmkaj8dOg
BREATHING AND RELAXATION

Cleansing Breath

Slow-Chest Breath

Puff-Blow

Ratio
YOU CAN DO ANYTHING YOU PUT YOUR MIND TO! BELIEVE IN YOURSELF.