Chapter 4:

Prenatal
Development
and Birth

Pregnancy:The Mother's Perspective



1st Trimester

- Physical Experience
 - Missed period
 - Tender, enlarged breasts
 - Morning sickness (misnomer)
 - Tired
- Cognitive Experience
 - Nervous about miscarriage
 - Excited

2 nd Trimester	_
• Physical	
Most women feel less morning sickness	
Weight gainFeel baby move for the first time	
Hair changes (fuzz on tummy, etc)	
• Cognitive	
- Excited to see baby (ultrasound)	
Starting to bondFeel unattractive	
- Clothes don't fit anymore	
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3 rd Trimester	
 Physical Physical cont'd 	
 More Weight gain Frequent urination Greating time	
- incontinence	
- Stretch marks	
 Trouble sleeping Cognitive Difficulty getting up, rolling Excitement for birth 	
over – Fear apprehension	
- Back pain - Swelling, Edema - Not in control of body	
Hip discomfortNeed to "nest"	
– "baby brain"	
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Birth	
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Pain, Anesthesia, and Drugs

- Pain is a subjective, psychological phenomenon that cannot be easily measured
- Epidural anesthesia produces numbness from the waist down and an inability to walk or push during delivery
- Walking epidurals, or dual spinal epidurals, use smaller needles and administer a continuous dose of anesthetic so woman may walk around and have fewer side effects
- Effects on baby and mom?

Approaches to childbirth

- Natural childbirth: Bradley Method
 aims to reduce pain by decreasing fear and educating parents
- Prepared childbirth: <u>Lamaze</u>
 special breathing and education about anatomy and physiology.

The Bradley Method

- Natural childbirth Nearly 90% of Bradley® moms having vaginal births do so without pain medication.
- Active participation by the husband/partner as coach
- Excellent nutrition (the foundation of a healthy pregnancy and baby).
- Avoidance of drugs during pregnancy, birth, and breastfeeding, unless absolutely necessary.

The Bradley Method cont'd

- · Relaxation and NATURAL breathing
- "Tuning-in" to your own body and trusting the natural process.
- Immediate and continuous contact with your new baby.
- Breastfeeding, beginning at birth provides immunities and nutrition.
- Parents taking responsibility for the safety of the birth place, procedures, attendants, and emergency back-up.
- Parents being prepared for unexpected situations such as emergency childbirth and cesarean section.

- · Other non-medicated techniques to reduce pain
 - Waterbirth
 - Hypnosis
 - Acupuncture
 - Massage
 - Music therapy

Cesarean Delivery







Cesarean	Delivery.

- May need to be used if baby is in breech position or other complications.
- Women in need of cesarean delivery are more quickly identified.
- Doctors may order cesarean out of caution, and to avoid lawsuit if there is a possibility of maternal or fetal distress.
- Many today are choosing cesarean delivery.
- VBAC (Vaginal Birth After Cesarean)
- Today, 29.1 percent of all US births are cesarean.
- 1999 study of 3283 women in Sweden found only 8% wanted a C-section (fear of birth, anxiety, previous c-section)

C-Section v. Vaginal Birth

- Physical problems in mothers:
 - potentially life-threatening problems,
 - hemorrhage (severe bleeding),
 - · blood clots
 - · bowel obstruction
 - more common concerns
 - · longer-lasting and more severe pain
 - · infection.
 - scarring and adhesion tissue increase risk for ongoing pelvic pain and for twisted bowel.

C-Section v. Vaginal Birth

- · Longer Hospitalization of mothers
- · Emotional well-being of mothers
- · Early contact with, feelings toward babies
- · Breastfeeding

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C-Section v. Vaginal Birth

- **Health of babies**: Babies born by cesarean are more likely to:
 - **be cut** during the surgery (usually minor)
 - have breathing difficulties around the time of birth
 - experience asthma in childhood and in adulthood.

C-Section v. Vaginal Birth

- Future reproductive problems for mothers:.
 The likelihood of experiencing some of these conditions goes up sharply as the number of previous cesareans increases. ectopic pregnancy
 - reduced fertility
 - placenta previa
 - placenta accreta
 - placental abruption
 - rupture of the uterus

C-Section v. Vaginal Birth

- Concerns about babies in future pregnancies: A
 cesarean section in this pregnancy can affect the
 babies of future pregnancies. Studies have found
 that they are more likely to:
 - be born too early (preterm)
 - weigh less than they should (low birthweight)
 - have a physical abnormality or injury to their brain or spinal cord
 - die before or shortly after the birth

C-Section v. Vaginal Birth

- Extra risks associated with vaginal birth: In a few areas, mothers or babies with vaginal birth have poorer outcomes in comparison with cesarean birth.
- · Perineal pain
- Incontinence
 - (urinary incontinence)
 - (bowel incontinence).
- Nerve injury in babies: In comparison with a baby born by cesarean section, a baby who is born vaginally is more likely to have a nerve injury that affects the shoulder, arm or hand.

Physical Appearance and Initial Encounter

- The neonate is covered by vernix, a thick, greasy substance that covers the entire infant.
- The infant is also covered in fuzz, called languno, which soon disappears.
- Bonding of parent to infant has its strongest components at this moment after birth.
 - C-section, premature babies, & others...not given directly to mom?
 - Breastfeeding v. bottle feeding

- Bonding (formation of emotional attachment) between infant and mother:
 - Usually occurs in period shortly after birth.
 - Critical component in child's development.
 - Isolation of premature baby and use of drugs in birth process may harm bonding process.
 - Some experts advocate a rooming-in arrangement while mother and child are in the hospital.

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A Father's Adjustment:

- Generally ignored, but fathers go through considerable adjustment.
- Some feel baby has replaced them in terms of mother's affection.
- Fathers should actively care for the baby.
- Parents should set aside time to be together.

"The Virgin Mary Nursing Her Child" Hans Memling



