



Water Birth in the Hospital Setting

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Many women are expressing a wish for more autonomy in their birth experiences, and some are choosing to use water immersion during labor and birth. The actual number of water births in the United States is unknown because documented statistics in state birth registries for this type of birth option are not recorded nationally. As of 2001, at least 143 hospitals in the United States were providing water birth (Mackey, 2001).

History of Water Birth

The history of water birth is fascinating in its global reach and the pervasive themes that exist

as to why women choose this method of birth. The first documented water birth occurred in France (Embry, 1805). The first reported “water baby” in the United States was Jeremy Light-house, who was born in 1980 in his parents’ San Diego hot tub (Cassidy, 2006).

The water birth movement gained traction with the publication of “Birth Without Violence” (Leboyer, 1975). Providers’ observations from thousands of births noted that laboring women are attracted to water for the benefits of relaxation, comfort, pain relief and control over their births (Odent, 1983; Ponette, 1996; Rosenthal, 1991).

Abstract Many women seek alternative birth methods, including water immersion for labor and birth, which several hospitals now offer. Although thousands of water births have occurred with few adverse outcomes documented, research findings on water birth have been sparse and mixed, and further study is necessary. Clinicians should discuss the potential risks and benefits of water birth and utilize informed decision-making with women desiring this option. With careful selection and informed decision-making, water birth should continue to be a choice for parents considering birth options. DOI: 10.1111/1751-486X.12144

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Box 1.

One Woman's Experience With Water Birth

“For my third child I decided to labor naturally and have a water birth. In active labor my contractions were uncomfortable but not unbearable when entering the warm water. My body began to relax and I felt my labor progressing and my baby descending. I was able to move freely and change positions as needed. After his head emerged under the water, he didn't budge. I heard my midwife's calm voice instructing the nurses to assist me in standing and to place my leg up on the side of the tub. The nurse in me knew my worst fear was being realized--I was having a shoulder dystocia. One very intense push and a few seconds later, my third son arrived, by far my biggest baby!”—Jill, registered nurse and mother of three.

Jill's birth, while not ending in her goal of a water birth, illustrates the freedom of movement mothers have while utilizing water immersion in labor and birth that allows for easy position changes when indicated.

As early as 1993 all maternity centers in England and Wales were providing facilities to support the use of water for labor and birth, with approximately half of these centers having specially designed birthing pools (Mackey, 2001). Mackey notes that globally, more than 150,000 water births have occurred between 1985 and 1999; and, as water birth continues,

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these older data likely offer just a glimpse of the true total numbers of women opting for this birth choice.

Benefits and Risks

Research evidence on water birth is limited and no large rigorous studies exist. Two randomized controlled trials found minimal benefits for mothers and absence of benefit for babies (Chai-chian et al., 2009; Woodward & Kelly, 2004). Large observational, nonrandomized controlled trials and meta-analyses have documented decreased risk of operative birth, shorter labors and strong maternal satisfaction with the birth experience (Cluette & Burns, 2009; Mackey, 2001; Ponette, 1996). In a large Australian birth center study, Korin (2013) concluded that water birth was not associated with Apgar scores <7 at 5 minutes when compared to other birthing positions

and was advantageous over birthing stools for outcomes related to major perineal trauma.

The benefits reported by women who have experienced water birth include increased pain relief, relaxation, increased self-esteem and satisfaction with birth. These maternal responses are essential to the process of the normalization of birth in the United States, where interventive, technologic birth seems to be the norm even in the low-risk population. Box 1 highlights one woman's birth story and describes some of the risks and benefits as perceived by an experienced labor and delivery nurse, and how a complication can be managed calmly and effectively in the water birth environment.

A limited number of adverse outcomes have been found associated with water birth. There are case studies on record from the past several years identifying complications, such as neonatal aspiration and respiratory distress that have occurred in low-risk infants after underwater birth (Simpson, 2013). These potential risks must be discussed as part of informed decision-making when parents are considering their options (American Academy of Pediatrics [AAP] & American College of Obstetricians and Gynecologists [ACOG], 2012; Simpson, 2013).

The American College of Nurse-Midwives (ACNM) contends that all families have a right to experience childbirth in an environment where human dignity, self-determination and cultural family values are respected when women choose alternative birthing options (ACNM, 2011). ACOG and the AAP in a joint committee opinion (ACOG & AAP, 2014) recognize the

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