The ABCs of Birth

Your Prenatal Guide to Experience the Birthing Process in the Healthiest and Most Efficient Way
ABCs of Birth

Birth is.....

Amazing

Bringing a new life into the world

Caring for another life

Key Points for a Successful Labor:

- Labor is the work you do to deliver your baby.
- Stay home as long as possible.
- Keep moving and changing positions.
- Have help and support.
- Learn about what you can do in labor – take a class and read this booklet!
A for Attitude

- Look at how you view labor. Labor is not something that happens to you, nor is it a medical event. Rather, as the word implies, labor is the work your body does to deliver your baby.
- Trust your body to do its work. The uterus is a very strong capable organ, very muscular and fit to do its work of carrying the baby, dilating the cervix and bringing the baby into the world. Labor is a healthy, normal process that works very well when we work with it.
- See labor as a “ladder;” contractions are the rungs; each contraction is a step closer to your baby.

A for At home

- It is best to stay home as long as possible, as long as you and your baby are doing OK.
- Most women wonder how they will know if it’s labor. Irregular contractions are common in late pregnancy. Ignore contractions until they get your attention. Irregular contractions are your body’s way of working out the uterus to make it strong for birth. Carry on with your usual activities of life. If it’s early enough in labor, try to sleep or at least get some rest. Avoid lying on your back; instead lie on your side.
- When contractions get stronger and longer, and are getting closer together, start timing them. You know when you are having true labor when:
  - Your contractions are 5 minutes apart from the beginning of one to the beginning of the next.
  - Your contractions are 1 minute long and getting stronger this pattern persists for more than an hour.
  - It is normal to have spotting called “bloody show.” That happens when the cervix is starting to open.
- If you think it’s time to come to the hospital, or have any concerns, call your midwife or physician.
- If your water is broken while at home, avoid getting in your tub, although getting in your shower is fine.

A for Activity

There are things you can do that not only help the labor progress, but also help with pain. Best of all, there are no unhealthy side effects. These activities include:

- Staying home as long as possible.
- Staying out of bed and off the monitor. Baby’s heartbeat can be intermittently checked when you are having a low-risk pregnancy.
- Being upright. This helps gravity bring your baby down. This also applies for pushing.
- Walking as much as possible. Moving your muscles helps your labor move along, too.
- Being in water. As the baby enjoys the watery world of the womb, you can enjoy being in water during labor.
  - Get in the shower: the warm shower spray can be directed to sore spots on your back or abdomen, and the warmth and pressure of the water helps with pain. It also helps circulate your labor hormone. Being upright helps bring your baby down.
  - Get in the hospital birthing tub: warm water immersion helps your circulation and increases the labor hormone. It helps you relax and dilate faster. It decreases pain and pressure. The baby has a nice gentle transition from water into water. The tub allows you more movement. You can labor and deliver in the tub. Your helper is welcome to join you in the tub if you like.
B for Birth
Your uterus is doing the work of birth. First dilating the cervix, then when the cervix is open, your uterus will push the baby outward. Your job is to cope and cooperate with your uterus.

B for Breathing
- Our natural reaction to pain is to hold our breath, tense up, and get away from it. That’s because pain usually signals something dangerous or damaging is happening. Labor is neither. It is the signal that the baby is coming. So we need to retrain and override these natural responses by breathing, relaxing and working with the process.
- There are many breathing techniques, but here’s a simple one: just slowly breathe in your nose and out your mouth, like you would when you are relaxing or falling asleep. Conscious breathing like this through contractions helps you focus on breathing and it keeps you breathing rather than holding your breath. Most importantly your breathing is how your baby gets oxygen.

B for Ball
- The birthing ball is a great labor tool. It is a soft sitting surface, which means there is no pressure against your tailbone, so your pelvis stays wide open for your baby to drop down. Upright positions and staying out of bed also help in this way. You can slightly bounce or roll side to side on the ball.
- Your helpers can massage your back while you sit or lean over the ball. You can put the ball on the floor, bed or chair and lean over it.

B for Back
Sometimes labor involves a backache. Positions that help the uterus drop away from the back can help.
- Leaning forward over your helper’s shoulders, and swaying like slow dancing. Your helpers can also rub your lower back during contractions in this position.
- Leaning over the birthing ball or onto the bed. This allows your helpers to massage your back and put pressure on sore spots.
- You can lean onto the wall of the shower or over the tub’s edge and have the handheld showerhead spray your back. These positions also allow for back massage.
- Your midwife may suggest small water injections over tiny areas in your back. Called “papules,” these can decrease pain yet allow complete mobility and have no side effects.

B for Bathroom
- Keep your bladder empty. This helps your baby to drop.
- Sitting on the toilet is a great position for labor. It allows your pelvis to open up, promotes dilation, and brings the baby down. Get a pillow behind you or lean into your partner for comfort, if needed.
- You may sense rectal pressure at some point in your labor.
- It’s OK to try to have a bowel movement, but if you can’t, the pressure may just mean your baby’s head is coming down!

C for Class
Take a childbirth class. You will learn stages of labor, breathing and relaxing techniques, and activities and positions that help you cope with labor and help it progress. Practice together with your partner.
C for Coach

- Have a coach or support person to help you through labor. She'll give you support and guidance. Having a helper in labor has been shown to shorten labor, decrease complications, help breastfeeding go better and make for a happier birth. Your helper can coach your breathing, remind you to relax, recommend activities and position changes, and do massage.

- Sutter Davis Hospital also has volunteer doulas to help with the labor process. A doula is trained and experienced in helping women through labor.

C for Closeness and Comfort

These words are lumped together because they mean one thing to your newborn baby, YOU. Your baby will be placed immediately upon your chest at birth, skin to skin. This is the best recovery room for your baby. You will both enjoy this continual contact throughout your stay. This contact comforts the baby and also helps baby stabilize vital signs, blood sugar, temperature and oxygen levels. Being skin to skin also stimulates milk making hormones. This closeness especially helps the baby breastfeed. The baby can crawl to the breast unaided and begin nursing.

C for Consume

Continue to eat and drink as you like. Having a baby is a workout for your body so it needs fluids and calories. Keeping well hydrated helps your uterus function well, so continue to drink often even if your appetite decreases. Consider light foods that are easier on your stomach.

C for Counterpressure

- When back discomfort is associated with contractions, a technique called counterpressure often helps. Have a helper press on the area of discomfort during contractions. Staff can also make a moist heat pack for sore areas.

- Sometimes a “hip squeeze” is comforting as well. Have a helper apply pressure inwards on both hips during contractions.

C for Calm

Having a calm environment can really help with relaxation: dim lighting, calming music in the background, familiar objects, and your own pillows and clothing are welcome.

C for Colostrum

You’ve got milk! Colostrum is produced in the breasts from the 5th month of pregnancy. This early milk is in just the right amount to match baby’s stomach size. As the baby’s stomach size grows, so does your milk supply. In fact, the baby’s sucking determines the milk supply. Being close to mom means more than just getting milk to a baby – it is comfort. Most babies are a bit overwhelmed with their new world at first. You may notice this by extra fussiness after baby’s second day or night. Babies need continual contact and very frequent nursing these early days; this is a normal process that helps them adjust and increases milk supply. Their stomach size grows to accommodate the increased milk volumes that typically happen after the third day of life.
D for Doula
A doula is a support person with special training in labor relaxation and positioning techniques. A doula becomes an important part of your labor care team and works with your nurse and midwife or physician. The Birthing Center at Sutter Davis Hospital has volunteer doulas (available at no cost) to help support you and your partner.

D for Delivery
Delivering at Sutter Davis Hospital’s Birthing Center? If so, we ask that you pre-register during your second trimester. This way, we can anticipate your arrival and quickly admit you when you are in active labor. You can do this online at sutterdavis.org.

D for Drugs and Anesthesia in Labor
- There are two options for drugs during labor: narcotics and epidurals. Both of these options come with side effects that may affect labor, birth, baby and breastfeeding.

Narcotics
Narcotics are an option for pain medicine in labor. They are given as a shot or through an IV (a catheter that is placed in a vein in the arm or hand). Options are: fentanyl, nubain, stadol and morphine.

Advantages
- May give you a break from labor’s intensity and help with relaxation.
- Less risk of labor slowing down than epidurals.
- May still use the tub once the medication wears off.

Disadvantages
- Does not take away all the pain.
- May experience side effects of nausea, sleepiness, dizziness, confusion, or hallucinations.
- Most are short-acting. Their effect will wear off after a few hours. Depending on the medication, they may last from 1-6 hours. This may be an advantage for someone who just wants a short rest.

Risks
- Because they go into the mother’s bloodstream, the baby gets them too. This means the medication may affect the baby:
  - May affect baby’s breathing.
  - May affect baby’s ability to breastfeed. Baby may have a delayed, weak, or uncoordinated suck.
  - May affect baby’s alertness and ability to show feeding cues and sustain latch and sucking.
- May slow labor progress.
- May lead to delayed onset of milk supply and lower initial milk volumes.

Epidurals
An epidural is a pain medication that is given through a small flexible catheter (tube) into your back. It does not go into your spinal cord, but into a small space around it. An anesthesiologist inserts the catheter with a needle that is taken out once the catheter is in place. The medication then goes in a little at a time with a pump that ensures a measured dose at all times. Sometimes a woman has a button to give herself a small extra dose if she would like it.

Advantages
- For most women, the epidural takes away all, or almost all, of the labor pain.
- This can make women more relaxed.

Expectations
- It will take at least 30 minutes to get you ready for your epidural. This includes the time it takes to give you at least one large bag of IV fluid. The anesthesiologist will then be called to come for the procedure.
- Requires staying in bed for the rest of your labor.
- Intake will be limited to clear liquids.
- A urinary catheter will be inserted and remain in place to empty your bladder.
- An IV will be inserted and continuously infuse.
- You will be hooked up to the fetal monitor all the time.
Epidurals (continued)

Disadvantages

- The pushing phase of labor may take longer.
- There are common side effects such as itching or low grade fever.

Risks

- It may not work. Women sometimes have pain even after getting the epidural, or they may only get partial relief.
- Your blood pressure may be temporarily lowered which may slow your baby’s heartbeat.
- There is an increased risk of needing to use a vacuum or forceps to help the baby out.
- Permanent damage to the nerves is very rare, but possible.
- Some women experience a severe headache in the days after having an epidural.
- Does an epidural increase the chance of having a Cesarean Section? It has not been proven by research that an epidural directly increases the risk of Cesarean Section.