



Waterbirth – Myths vs. Realities

Myth: Waterbirth takes away all the pain of childbirth and labor but can cause longer labors.

Reality: While waterbirth has been referred to as the “aquadural” of natural childbirth, it does not entirely take away the pain of contractions. However, many women report a huge reduction in pain and once they are in the water, immersed in its warmth and buoyancy, it is hard to get them out of this comforting environment. Studies have also shown that waterbirthing mothers actually have a shorter first stage of labor and lower blood pressure than their landbirthing counterparts.

Myth: Once your water has broken, you should not try a waterbirth because of the risk of infection since you are immersed in “non-sterile” water and the possibility that the mother may pass fecal matter into the tub when pushing.

Reality: First of all, Birth in and of itself is not a “sterile” affair. The mother’s vaginal secretions, blood passed, amniotic fluid, and yes, mother’s feces when the baby has descended into the birth canal, all make birth a messy occasion that is not sterile. Birth attendants should not strive to keep the mom sterile, only their instruments, the birthing tub before it is filled, and gloved hands. All of the mother’s germs are her own and she has built up immunities to them. It is actually beneficial for the baby to be exposed to these germs! Studies have shown that a baby’s intestinal tract benefits from this exposure to the mother’s fluids, secretions, and her feces.

Secondly, let us ask the question, “Does water go up the birth canal once a mother’s water has broken?” The answer, if the mother is in active labor, is “NO!” A study was done on women in labor, who agreed to get in a tub of dyed water with a tampon in their vaginas. After a period of time the tampons were removed and showed no penetration of the dyed water. While water may enter the vagina, it does not get propelled further up in the vagina, nor approach the cervix and uterus. Also, certain infectious diseases, like HIV, will die almost instantly upon contact with water.

Myth: A baby may drown in a waterbirth, be born with its cord around its neck, or won’t cry when born!

Reality: A baby will not take its first breath until it comes into contact with the air. It is going from a watery environment, to another watery environment, and it is the abrupt change in temperature and exposure to the air that causes a baby’s lungs to inflate and it to take its first breath. A baby should be brought to the surface of the water as soon as its body has been born for it to take its first breath.

As for the cord around the neck, as long as the baby is not having heart decelerations (heart slowing down indicating distress) as a result of a tight nuchal cord being compressed, this is not a problem. Remember, your baby will not be

strangled by its cord as it is not breathing air yet, it is receiving oxygen through the cord and as long as it is not being compressed (pinched) its being around the baby's neck or body is not a problem in a waterbirth. One-fifth of all babies are born with a cord around their necks. The midwife or doctor attending can simply allow the baby's body to be born into the water and "somersault" the baby out of its cord or unloop the cord from around the baby's neck after the baby has been born into the water. In the book "*Waterbirth*" by obstetrician Yehudi Gordon and exercise instructor Janice Balaskas, Dr. Gordon tells practitioners **not to even feel for the cord** and to just let the baby come out in the water tub and then unwrap it. Many midwives who attend waterbirths regularly follow this protocol and do not check for a cord around the neck.

For the crying "problem", do not be surprised if your waterbaby does not give out a hearty cry when it is born. Waterbirth babies are generally quieter than landborn babes. They are simply mellower, not having been manhandled too much during the birth process, brought up immediately to mom's soothing breast, and having made the transition from womb to air through the warmth of the water. Not that your waterbaby won't cry, but your waterbaby may not cry heartily immediately, instead it may calmly take in the sights around it, looking in mom's face and getting to know his/her new world. This is a good thing, not a bad thing, as long as baby's color is good and the baby is breathing. There is actually a separate APGAR scoring technique for baby's born in the water, as they do not usually have the lusty cry and flailing arms of their more startled landborn counterparts.

Myth: Mom's who give birth in a waterbirth tub are more likely to tear and their attendants are less able to perform an episiotomy if necessary.

Reality: Women who give birth in a tub of warm water are actually less likely to tear, since the water's warmth increases blood flow and softens the tissues surrounding the mother's bottom. The mother is more likely to give birth with no tearing or very little tearing in a warm birthing tub.

When it comes to an episiotomy, or a provider being able to reach in to the mother's perineal area to do massage or other procedures, there is some truth to the above statement. This is not necessarily a bad thing. Most episiotomies are not necessary, and if your provider believes that there is an emergency, she/he will get you out of the tub for your safety and your baby's.

Resources:

http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?cmd=Retrieve&db=pubmed&dopt=Abstract&list_uids=15940082&query_hl=2&itool=pubmed_docsum, http://www.epregnancy.com/plus_one.html, <http://www.sheilakitzinger.com/WaterBirth.htm>, pp. 14-18. Hanson, Lars. Immunobiology of Human Milk. Amarillo TX: Pharmasoft Publishing, 2004, <http://www.gentlebirth.org/archives/watrbrth.html>, <http://www.drspock.com/article/0,1510,5332,00.html>, <http://www.gentlebirth.org/archives/nuchlcrd.html>, <http://www.geocities.com/HotSprings/2840/faq.htm>, <http://www.birthmarket.com/enews/enews0107.asp>, <http://www.waterbirthfacts.com/waterbirthfacts.html>, <http://www.waterbirth.org/spa/content/view/5/30/>, <http://www.cochrane.org/cochrane/revabstr/AB000111.htm>, http://bmj.bmjournals.com/cgi/reprint/bmj.37963.606412.EEv1?maxtoshow=&HITS=10&hits=10&RESULTFORMAT=1&author1=cluett&andorexacttitle=and&andorexactitleabs=and&andorexactfulltext=and&searchid=1075591904263_8959&stored_search=&FIRSTINDEX=0&sortspec=relevance&resourcetype=1,2,3,4, *Waterbirth*, Napierela, <http://www.waterbirthinfo.com/>, *Gentle Birth Choices*, Barbara Harper, R.N.