Jack Thomas, Our Third Baby, Enters the World!

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ABSTRACT

Without the confidence and support of the medical team, this mother's first birth was difficult and unsatisfying. She was able to give birth naturally, in the care of a midwife, with her second baby. With confidence in her ability to give birth and the wisdom that comes with experience, she is able to give birth naturally with her third baby in spite of being induced.

The Journal of Perinatal Education, 23(2), 62–64, <http://dx.doi.org/10.1891/1058-1243.23.2.62>

Keywords: childbirth, childbirth satisfaction, natural birth, medical interventions

Finding out that I was pregnant for the third time in September 2012 was a bit of a surprise. My husband and I already had a 5-year-old daughter and a 2-year-old son, and we were looking forward to moving past the stage of diapers and up-all-night baby care. Once the shock wore off, we were thrilled to be able to welcome another little one into our family. Although preparing for another baby brings with it a certain amount of anxiety, one thing I was not nervous about the third time around was labor and birth. Although I was not exactly looking forward to the hard work of giving birth, I had a degree of confidence that allowed me to have a relaxed outlook about my childbirth. My two previous childbirths were two very different experiences: Although all of my children were born at the same hospital, my daughter was born in traditional medicated birth with an obstetrician attending, and my son was born under the care of a midwife. Although the first birth was traumatic and difficult, the second one was peaceful and perfect.

When I was pregnant with my daughter in 2007, I thought I was prepared for a “natural” birth. I read books about visualization, my husband and I took Lamaze International classes, and I wrote out a birth plan. In retrospect, writing out the birth plan was a mistake. I had a good relationship with my obstetrician because he had also been my gynecologist for the past 10 years, and a better approach probably would have been to work collaboratively at designing a plan rather than presenting my wishes in black and white. At my 36th-week visit, I presented my doctor with my birth plan, which included instructions such as intermittent fetal monitoring and instructed the staff not to offer an epidural. My doctor raised an eyebrow at the plan and kindly, but somewhat condescendingly, insinuated that I had no idea what I was talking about. When the pain of labor hits, I would *want* that epidural. Intermittent monitoring was out of the question—continuous monitoring was safer. It was clear from his reaction that he trusted machines and medications more than he trusted himself or the staff

of nurses at the hospital. And he clearly had no confidence in me. I left the office that day determined to prove him wrong. However, he was right about one thing: I had no clue what was ahead of me, and I knew it. I thought I could do an unmedicated birth, but I was scared. My husband was supportive, but he didn't know what to expect either. I went into labor at 41 weeks. I arrived at the hospital at 4 cm dilated, and without much discussion, the doctor broke my water. After that, labor was intense and erratic. I had prepared for 60-s contractions with a break in between, but my contractions piggybacked on top of one another. My daughter's heart rate was erratic, and in addition to constant monitoring, I also had an oxygen mask and an internal scalp monitor for the baby. These interventions made it impossible for me to move: I had to labor on my back, with constant interruptions from the nursing staff to read monitors and adjust equipment. After several hours of this, as the doctor predicted, I asked for an epidural. The epidural was so strong that I had no sensation of when it was time to push. The nurse counted off when I should push based on the reading of my

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contractions from the monitor. Happily, my daughter was born healthy, but an episiotomy wound and bruising from pushing took weeks to heal, and I entered the first period of my daughter's life emotionally drained. In spite of all I had read and how much I had prepared for this moment, without confidence and support of the medical professionals, I was lost: Birth became something that was done to me rather than something that I was a part of.

Based on this experience, when I became pregnant again two years later, I consulted with a midwifery group in my area. I later found out that my daughter was birthed in a posterior position (face up), which makes labor erratic and causes drops in the baby's heart rate. In discussing this with one of the midwives, she said that had my water not been broken artificially, the baby would have turned right side up herself and the interventions that followed would not have been necessary.

My son's birth was completely different from my experience with my first birth. No interventions, my water broke on its own. Contractions were painful and intense, but the midwife trusted me to know what to do for my body. The midwife turned down the lights, allowed intermittent monitoring, and left my husband and me alone to concentrate on the work that we had to do. Although labor and birth were difficult without an epidural, I was amazed at what I was able to do and how great I felt afterward. I had a minimal tear and minor swelling, but by being allowed to push when my body needed to rather than when a machine told me to, I was up and around the next day.

I went back to my obstetrician for my third birth with confidence and more realistic expectations than I had the first time around. I knew that I would have constant monitoring, but I knew enough now to not let them break my water. Rather than having a formal list of demands in the form of a birth plan, I had a discussion with my doctor. We agreed that we would take this birth step by step: My doctor understood that I did not need or want artificial interventions for comfort or convenience, and I understood that the doctor would only intervene if medically necessary. I will admit that having already given birth to a 9.5-lb baby with no painkiller gave me significant leverage in this conversation.

Even with a medical induction, having patience and confidence in my body was all that was needed to produce a happy, healthy result.

As my due date approached, I was calm and secure about my second son's imminent arrival. However, as his due date came and went, I began to feel exhausted and overwhelmed. It was another large baby, and this time, I had two other children to tend to. Several days past my due date, my doctor asked if I wanted to discuss being induced. I readily said "yes," and we scheduled the induction for the beginning of the following week.

I was somewhat concerned about being induced: I had read that inductions have a higher rate of medicated births and of cesarean surgeries, but I also had the thought in the back of my mind that the baby would make a move before the following Wednesday when I was set to be induced. I guess he was pretty comfortable right where he was because on the following Wednesday, my husband dropped me off at the hospital at 8 a.m., overnight bag in hand. He gave me a kiss and went to drop off our son at day care—he would be back in an hour. Scheduling a birth was surreal, like checking into a hotel. I gave my name, got my bracelet and gown, and waited.

I had discussed the idea of being induced with my sister, a labor and delivery nurse, and a certified Lamaze educator. She suggested keeping the Pitocin drip low and slow. When I met with my doctor that morning, I reminded her of my plan to keep this birth as natural as possible. We would keep the Pitocin low and see if my body kicked in to produce natural contractions. My husband returned from the day care drop-off just as I was getting my first round of Pitocin. For the first hour, we played cards, read the paper, and did the crossword. Contractions were mild, so I sat comfortably in bed with the fetal monitors on. When contractions became more intense, I used a strategy that worked in my previous

natural birth of leaning on my husband and rocked back and forth while he massaged my lower back. The contractions were painful but manageable. The nurse came in once to check the monitor. She politely did not interrupt my rhythm but said out loud that she was turning off the Pitocin: Contractions were clearly moving along smoothly. Fifteen minutes later, I was calling them to get the doctor into the room quickly. In fact, I was yelling—this baby was on his way!

It took some effort to get back on the bed, but once there, Jack Thomas Stebbins entered the world with three pushes. The entire labor and birth happened in just more than 3 hours, and although I was induced, I still had the natural birth experience that I had planned. And it was worth it—just as with the previous natural birth, I was up and around in a few hours.

I learned through my three birth experiences that this was what my body was designed to do: I only needed to trust it to take care of itself. Even with a medical induction, having patience and confidence in my body was all that was needed to produce a happy, healthy result.

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