

Your Pregnancy

**SO MANY CHOICES, SO LITTLE TIME,
PREPARATION IS THE KEY:**

By: Dr. Luigi DiRubba

Many women are disappointed with their birth experience and feel “robbed” of what should have been a beautiful moment, because they haven’t properly planned. Most pregnant women are not aware of the rights they have, or of the choices they have to make. Over the last few decades, artificial practices have increased changing the birth process from a natural physiological event to a very complicated medical procedure. Today, many different drugs are utilized and invasive procedures carried out. These procedures are performed, sometimes unnecessarily, and many are potentially harmful or damaging to the mother and unborn child alike.

Parents are becoming increasingly aware that well-intentioned health professionals do not always have scientific data to support common obstetrical practices. The American Medical Association estimates that 40-60% of the 2.1 billion prescriptions written by doctors last year were provided “off label.” This means that drugs are being used to treat conditions, which they are not approved and in many cases not even tested. In fact, the American Academy of Pediatrics’ Committee on Drugs has stated that there is no drug, prescription or over the counter, that has been proven healthy for the unborn child.

These statistics are not limited to a certain segment of the population or lower socioeconomic groups, but are prevalent in all sections of American society. As a pregnant woman, you not only have the right but the responsibility to question the decisions and procedures being done to you and your unborn child. The concern

for the well being of yourself and your child should be your first concern, and you must take an active role in the decision making process.

Compiling your birth team is one of the first steps that should be taken. A birth team can include some or all of the following: a chiropractor, a prenatal counselor (independent counselor, Bradley or Lamaze instructor), and obstetrician, a midwife (certified nurse midwife or a direct entry/lay midwife), a doula (labor support coach). A lactation consultant (breast feeding counselor), and a post partum counselor. All of these people can be important resources during your pregnancy and birth. The members of the team you compile will be different depending on the location of your birth (home, hospital, or birthing center).

One of the most significant ways you can plan for your birth experience is to prepare a birth plan. There are many choices you have to consider to better communicate your hopes and plans to your birth team. This includes procedures and practices during

- 1. The onset of labor*
- 2. Early labor*
- 3. During labor*
- 4. During birth*
- 5. After birth*
- 6. Preparing for the unexpected*

The most significant procedures, alternatives, and choices under each stage are described below in further detail.

- 1. **The Onset Of Labor:** Spontaneous vs. self- induced at home vs. medical or surgical induction.*
- 2. **Early Labor:** How soon would you like to go the hospital? Go directly to the hospital vs. staying home until active labor vs. go to hospital to be checked then return home until active labor.*
- 3. **During Labor:***

- *Positions? On bed, walking during active labor should be encouraged.*
- *Presence of others? Who do you want around and whom will the facility allow in the room?*
- *Hydration/Fluids? Water, fruit juice vs. ice chips vs. IV fluids (under what circumstances)*
- *Vaginal Exams? Who will be performing and when.*
- *Fetal heart monitor? When performed, internal vs. external, doptone vs. fetoscope?*
- *Pain relief? Relaxation, breathing, change positions vs. medications or regional anesthesia (epidermal, spinal, etc.)*
- *Augmentation of labor? Walking, changing positions, nipple stimulation vs. pitocin.*

4. **During Birth:**

- *Labor positions? Mother's choice on side, birthing chair/stool, squatting with "squat bar", lithotomy/stirrups, etc.*
- *Speeding up the birth? Gravity enhanced positions vs. prolonged pushing on command vs. episiotomy (if necessary) vs. the use of forceps or a vacuum extractor.*
- *Perineal care? Episiotomy (avoid though massage, hot compresses), anesthesia, episiotomy, stitches, ice packs after birth, etc.*
- *Ambiance? Lighting, noise level, music, etc.*

5. **After Birth:**

- *Chiropractic care: if you would like the baby checked after birth, this should be stated and discussed with the doctor or midwife.*
- *Cord cutting: Clamp and cut after stops pulsating vs. clamp and cut immediately.*
- *Airway: No suctioning unless necessary vs. suctioned vs. meconium present; respiratory therapy to evaluate.*

- *Warmth: Baby skin to skin with mother and nursed as desired (rooming in) vs. taken to nursery and kept for newborn care.*
 - *Eye Care: None (signed waiver required) vs. non-irritating ointment within one hour.*
 - *Feedings: Breast-fed on demand (no sugar water, pacifiers) vs. formula feedings on demand.*
 - *Circumcision: None vs. with parents present vs. anesthesia (with or without) vs. out of hospital circumcision.*
 - *Discharge from facility: When desired early release (6-12 hours birth) vs. 1 or more days after birth.*
6. **The Unexpected:**
- *Cesarean birth: Include things such as: timing (planned or emergency), partners presence, anesthesia, participation of parents (screen lowered at time of delivery, obstetrician explains things as they occur, you have immediate contact with the infant), contact with the baby, hospital stay, and discharge.*
 - *Premature or such infant: Consider the following; contact with baby, feeding, support groups.*
 - *Death of Baby: Contact with baby (while in critical condition, hold baby while dying, unlimited contact after death, photographs, etc.), support.*

There are remaining issues that can be incorporated as well. As new parents, you should use your discretion in choosing which topics to include, but you should be as complete as possible. It is better to err on the side of caution. After the birth plan has been completed, copies should be made and dispersed to your entire birth team. If there are multiple doctors in the facility where you are associated, a copy should be given to each.

During your pregnancy, you should become as actively involved in your pregnancy and delivery as possible. By assembling your

birth team, and developing a birth plan early on, you will be able to more fully enjoy your pregnancy. After these action steps, stress will be alleviated and you will more fully enjoy your pregnancy and have the birth experience of your choice.

The chiropractor plays a pivotal role in the care of the pregnant woman. With chiropractic care, you can more fully express health and vitality. Many women report their pregnancies are more enjoyable, and they have less need for drugs and birth intervention while under chiropractic care than during their previous pregnancies. Studies show that chiropractic care is safe and effective.

*For more information regarding the importance, safety and validity, of chiropractic care during pregnancy; visit our office for more information. Schedule a consultation with **Dr. Luigi DiRubba** at **Central Connecticut Chiropractic**, 391 Highland Avenue Cheshire, CT. 06410. Call (203) 272-3239.*