

Preparing for Childbirth

A woman can minimize the need for intervention in labor by being well prepared. Being well prepared includes: being educated about the birth process, knowing what her particular options are, practicing whatever type of birthing method to use. If she chooses to have a natural childbirth or on medicated childbirth, really practicing well the techniques she's going to use for relaxation during the birth process with her and her partner.

Cesareans (C-sections)

A c-section is the delivery of the fetus by surgical incision of the abdomen. Generally speaking, the fewer interventions, the fewer C-sections are performed. The most common reason for a C-section includes a previous C-section, malpresentation or breach, cephalopelvic disproportion (which is a fancy way to say that the baby's head is larger than the pelvis), failure to progress, failed induction, abnormalities in fetal heart tracing. Less common occurrences are placenta previa, cord prolapses, or the presence of an STD that can be transmitted in birth.

If you have previously had a C-section, a VBAC (vaginal birth after cesarean) might be an option.

Considerations When Choosing Your Doctor

A mother's major decision is who will deliver her baby. Not all obstetric conditions follow the same practices. It's a good idea to conduct obstetrical provider interview to ask them questions.

Things to consider

- The provider's statistics are on induction or the practice of artificially or prematurely stimulating childbirth
- Their philosophy on episiotomies
- The surgical incision of the perineum
- Their C-section statistics

First Stage Labor

Early first stage labor can be an ongoing process during the entire last month of pregnancy.

In true labor or active labor, the body shifts gears or progresses to unfamiliar territory. The magnitude of active labor contractions is much more significant than Braxton Hicks contractions. When you are completely incapable of coping with your regular routine, i.e. grocery shopping, cleaning bathrooms, or carrying on a conversation during the contraction, it is necessary to begin timing your contractions.

Accurately timing your arrival at your chosen birth facility is an important part of creating a pleasant birth experience. If you arrive too early, you risk being sent home.

There are some great advantages to staying home as long as possible

- You can eat when and what you want. According to evidence, it is safe and natural to eat during the earlier stages of labor
- Freedom to come and go at will
- You can walk around the block, climb in your own tub, and then rest in your own bed

Knowing When to Go

If you labor at home too long, you may create an unnecessarily painful transport. It can be very difficult for a woman in active labor to relax when forces of momentum change with acceleration and then braking. Bumps in the road, potholes, and directional changes can also detract from a laboring woman's control over her relaxation. To know when to go, use the 4-1-1 rule. When your contractions are four minutes apart, from the beginning of one contraction to the beginning of the next, lasting a minimum of one minute and consistent for one hour, it's time to call your obstetrical provider and prepare to go to the hospital.

When You Arrive

When you arrive at the hospital, the nurse is going to perform a cervical exam where she measures your progress in three ways: *cervical effacement*, *cervical dilation*, and *the baby's station*.

Cervical Effacement: The cervix is much like a bottleneck doorway in shape and thickness prior to labor. As labor progresses, it softens and effaces until it's completely ready. The hospital staff may refer to it as ripe, at which point it's very soft like butter and paper-thin.

Cervical Dilation: In the beginning of labor, the cervix will contract and as labor progresses and the woman begins to dilate there will be a separation where the muscle moves away from the baby's head. With each contraction the baby descends. As the baby moves lower, the muscle will eventually push away at the top of the baby's head. Cervical dilation is measured in centimeters. One centimeter is approximately one finger. When the cervix has completely dilated to 10 centimeters, the woman is considered "complete".

Station: Stations refers to the baby's position in the pelvis. A few weeks before labor the baby's head may not yet be engaged very low. When the baby's head is above the ischial spines, the baby is measured as a negative station. Once the baby's head is even with the ischial spines, nice and low in the pelvis, it is considered a zero station. As labor continues, the baby's station will move into the lower or positive ranges. By the time dilation is complete, the baby's head is usually at a positive two station. At crowning the baby's head is usually in positive four station.

Labor is defined as regular painful contractions that are leading to dilation of the cervix. Generally the contractions will occur anywhere from two to five minutes apart when a person is in active labor and is actually making cervical change. Those contractions will continue every two to six minutes throughout until the baby is actually delivered.

THE AVERAGE FIRST TIME MOM LABORS ACTIVELY FOR 12 TO 18 HOURS.

THIS MAY VARY DEPENDING ON HOW SOON SHE BEGINS TRACKING CONTRACTIONS AS TRUE LABOR.

First Stage Labor Phases

The three phases of first stage labor are **Early first stage, Active, and Transition**. During early first stage labor most women are still excited and smiling. But as they move into active labor, even if they're coping well, they may be a little less giddy and a little more sober. Once she reaches transition, she's struggling emotionally and physically. **The end of the cervical dilation is the end of the first stage of labor.**

Labor is a very natural experience for both mom and baby. There are several things that a baby can gain from labor. One of which is stimulation of lung maturity, lung development. In fact babies that don't go through natural labor, a larger portion of them can have respiratory problems after delivery.