The Shrewsbury and Telford Hospital

Water labour and birth

The use of water during labour and birth has been found by research to be safe and effective, encouraging relaxation which can help you manage pain, and enhancing the experience of giving birth.

NICE recommends that women should have the choice of the use of water for pain relief in labour (Intrapartum care guideline).

At home or in a Midwife Led Unit

Any woman who is 'low risk' for their labour and birth can plan to labour and/or give birth in water at home or in a Midwife Led Unit. We have water pools at Wrekin MLU, Shrewsbury MLU and Oswestry MLU. You can have your baby at one of these units even if it is not your nearest MLU.

On the Consultant Led Unit

The water pool on the Consultant Led Unit is for the use of women who are higher risk and need to give birth under the care of a Consultant, but still meet the criteria for labouring and/or giving birth in the pool:

Women who are eligible for the pool on the Consultant Led Unit

- Between 37 and 42 weeks pregnant with one baby that is head down.
- Induction of labour with prostaglandin only (not rupture of membranes or hormone drip).
- BMI of 39.9 or less.
- Baby's growth in the normal range on the customised growth chart.
- Previous 3rd degree tear.
- Previous birth with forceps or ventouse.
- Vaginal birth after caesarean section (VBAC), with intravenous (IV) access.
- Group B Streptococcus (GBS) positive, with IV access.
- Previous retained placenta (with IV access).
- Previous post birth haemorrhage of less than 1000 ml, with IV access.

You would not be eligible if:

- · You do not fit the above criteria.
- Your waters have broken more than 24 hours before labour establishes.
- You have meconium in your amniotic fluid.
- You have any other infection than GBS.
- Any abnormalities are observed on electronic fetal monitoring (CTG).
- You have any condition that might result in temporary loss of consciousness.
- You have had significant bleeding before the birth.
- You have a previous history of shoulder dystocia (baby's shoulders getting stuck during the birth).

Please note that if you want to give birth in water against medical advice, your midwife will ask a Supervisor of Midwives to review your case and make the safest possible plan of care for your birth.

Benefits

- Enhances relaxation and therefore helps reduce pain
- Increases comfort due to warmth and buoyancy
- Increases feeling of control due to reduced intervention.
- May shorten the first stage of labour and reduce the use of epidural and spinal anaesthesia in the first stage.

Risks

- Uterine contractions may decrease if you are in the water for a long time. This
 is thought to result from an increase in blood volume which eventually reduces
 output of the oxytocin hormone.
- The evidence for immersion in water in the second stage of labour is not clear cut. There are rare reports of poor outcomes for babies, including infection and respiratory distress. Other reports have not found any increase in infection for mothers or babies.

When would you need to get out of the pool?

- If there are any concerns about the baby's heart rate.
- If there is meconium in the amniotic fluid (baby has bowels open which can indicate stress or distress)
- If there is delay in the progress of your labour.
- If the water becomes heavily soiled.
- If you need pethidine or an epidural for pain relief.
- If you have excessive blood loss.
- To deliver the placenta after the baby is born.

Practicalities

- If you hire a pool to use at home, fill it with water from your domestic water supply when you go into labour. <u>Public Health England have advised against</u> <u>the use of heaters and pumps to keep the pool warm because of the risk of</u> <u>infection with Legionella bacteria.</u>
- You need to be in established labour (4 cm with regular contractions) before you get into the pool.
- Sometimes the pool may be in use by someone else. You could consider going to another unit with a pool if this is appropriate at the time.
- Two midwives are required to be with you in the second stage of labour. If the Unit is very busy, this may not be possible so using the pool would not be considered safe.
- Only one birth partner please. We ask that your birth partner remove any debris from the pool (faeces and small blood clots) with a sieve provided.
- To avoid dehydration, drink plenty of water.
- You can wear a top or exercise bra if you wish, but some women prefer to wear nothing in the pool.
- You can bring a bath pillow for comfort in the pool.
- You can get out of the pool to go to the toilet. In later labour you may pass
 urine or faeces in the pool, although your bowels often empty naturally when
 you go into labour.
- Your baby will be monitored regularly. This will either be at regular intervals with a waterproof 'sonicaid', or (where required) continuously with wireless telemetry CTG.

- The temperature of the water is monitored regularly to ensure it remains at around 37 degrees centigrade.
- Your temperature, pulse and blood pressure will be monitored as with any other labour.
- You may need to leave the pool for vaginal examinations as it is not always
 possible to do this in the pool. This is routinely done every 4 hours unless
 there is a need to so at another time.
- You can get out of the pool at any time. The room is warm and there are warm towels nearby. There is also a bed near the water pool.
- In an emergency help will be summoned with an emergency buzzer and staff will use a net under your body to get you out of the pool.

The birth

Some women prefer to leave the pool in the second stage of labour to give birth to their baby.

If you wish to give birth in the pool, it is important that you remain in the water until your baby is completely born. The baby will then be gently raised out of the water so that he or she can take her first breath.

After the birth

- You need to get out of the pool to deliver the placenta. You can choose to wait
 to deliver the placenta naturally or have an injection which tends to speed up
 the process and helps to prevent excessive blood loss.
- If you need stitches it is best to wait for about an hour after you leave the pool as your perineum may be soft from being in the water.

Other sources of information

NHS Choices

The UKs biggest health website, certified as a reliable source of health information: www.nhs.uk

Patient UK

Evidence based information on a wide range of medical and health topics. www.patient.co.uk

National Institute of Health and Care Excellence

 $\frac{http://www.nice.org.uk/guidance/cg55/resources/information-for-the-public-care-of-women-and-their-babies-during-labour-pdf}{}$

Patient Advise and Liaison Service (PALS)

PALS will act on your behalf when handling patient and family concerns, they can also help you get support from other local or national agencies. PALS, is a confidential service.

Princess Royal Hospital, Tel: 01952 282888

Royal Shrewsbury Hospital, Tel: 0800 783 0057 or 01743 261691

Website: www.sath.nhs.uk

Disclaimer

This leaflet is provided for your information only. It must not be used as a substitute for professional medical care by a qualified doctor or other health care professional. Always check with your doctor if you have any concerns about your condition or treatment. This leaflet aims to direct you to quality websites: these are correct and active at the time of production. The Shrewsbury and Telford Hospital NHS Trust is not responsible or liable, directly or indirectly, for ANY form of damages whatsoever resulting from the use (or misuse) of information contained in this leaflet or found on web pages linked to by this leaflet.

Your information

Information about you and your healthcare is held by the NHS. You can find out more about how we hold your information and how it is used on our website in your Pregnancy Information Book.

Information produced by: Women and Children's Care Group

Version 6

Date of Publication: October 2014 Due for Review on: October 2017

© SaTH NHS Trust

