

Conscious Choices, Blissful Birth - Module 3

Anatomy of Birth

So, you took high school anatomy and now as you get closer to the birth of your baby you're realizing that you have absolutely no clue how a baby actually comes out of there. I mean, it just stretches out a lot right?! Well, kind of. The process of birthing a baby is both incredibly simple and yet intricate all at the same time.

The simplicity lies in that all birthing moms go through labor, and then delivery. We don't want to over complicate this process by acting like there are a lot of things for you to remember, because your amazing body already knows what to do! Even if you had absolutely no idea about how a baby is born, you could still make it happen.

If we can be so gross as to use pooping as an analogy, let's imagine that you just woke up with amnesia and can't remember anything about how life works. Now, let's say you've just eaten your first meal. Are you panicking about when and how it will come out the other end? Probably not because you're aware of the fact that the body will do what it needs to do make the digestive process work. So be at ease, the process does work. That being said, there are good things to know about pooping, like drinking plenty of water, eating plenty of fiber, using aids such as a squatty potty etc. that can make things way easier and more comfortable.

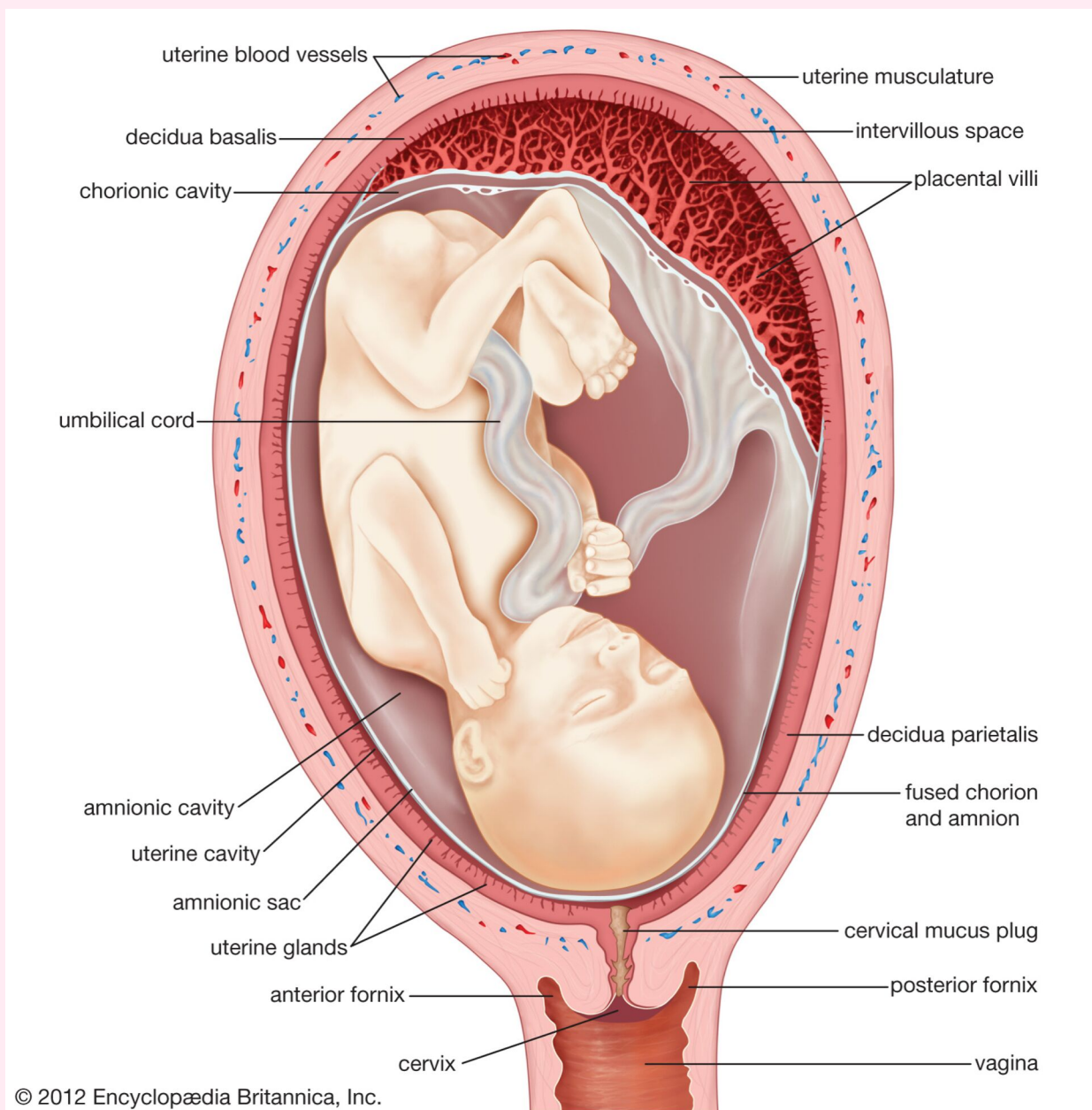
Now that we're on the topic, birthing has even more in common with pooping than just the above analogy. Let's consider this for a minute. In a typical hospital birth, where the nursing staff/OB are running the show, you will most likely be in a brightly lit room, with all sorts of monitors and people coming in to "check your progress" every hour or so and telling you how you're doing. Let's translate that to having a bowel movement. How well would you do in a large fluorescent lit room where people could just come in and out as they please? If they sat you down 2 hours after you ate and told you it should be getting time to poop and they would be back in 20 minutes to check your progress how would you feel? Maybe after an hour of being monitored you "aren't progressing fast enough" (i.e. your body schedule isn't matching up with their time table) so they "augment" the process with a little bit of laxative. Twenty minutes later things still aren't moving along and you can sense that they are getting frustrated with your "lack of progress."

Does this all sound a little bit ridiculous? It should, but unfortunately moms who go into the hospital to labor with no knowledge of what naturally unfolds during labor are often pushed through the process. It's a process, unique to everyone, that should be able to just happen naturally if they were just left to let the body do what it knows how to do when it wants to do it.

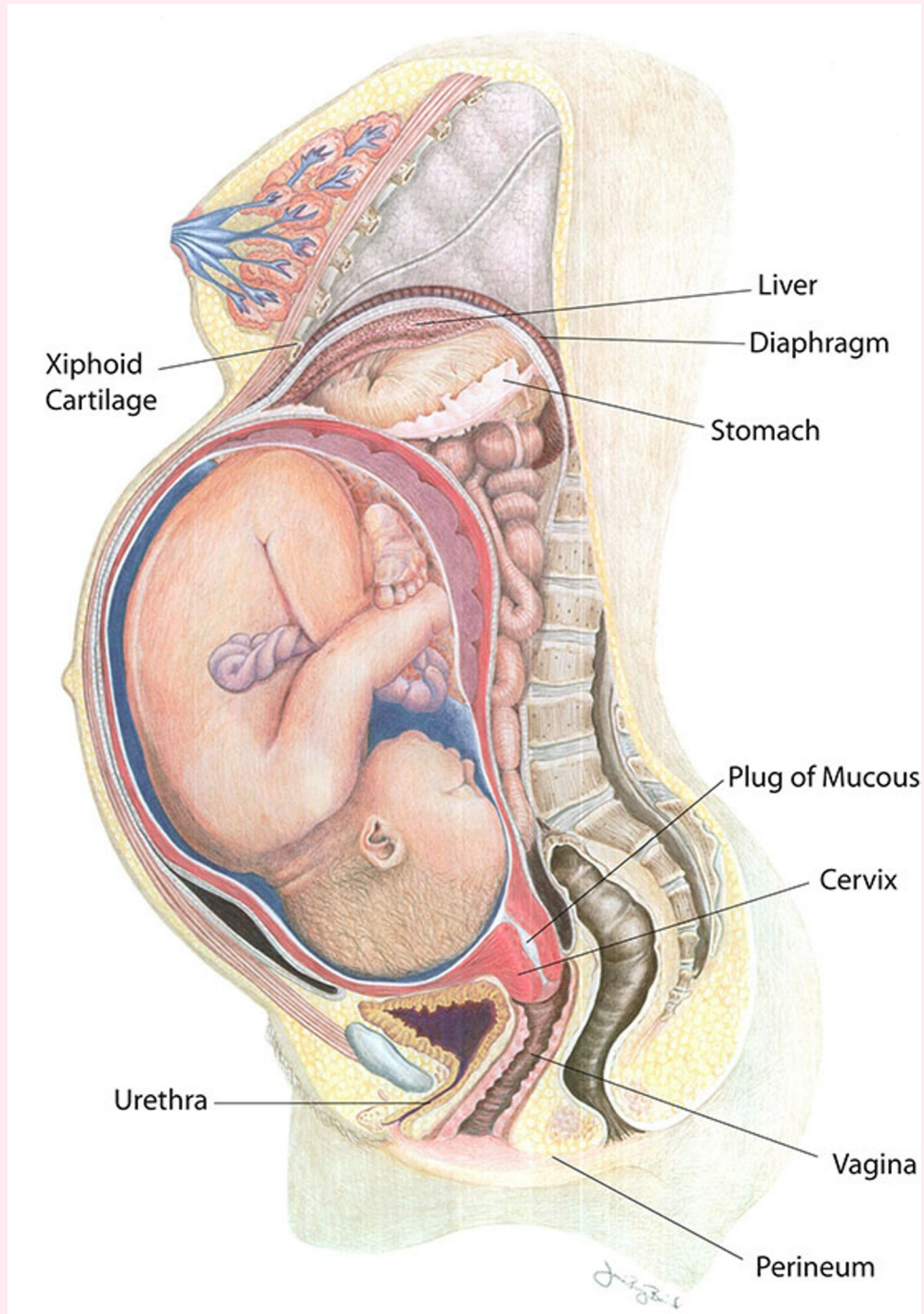
Enter The Anatomy of Birth. The purpose here is not for you to have to memorize some process, but for you to at least understand how things generally occur so that you can be prepared for any choices you might have to make along the way to ensure it is allowed to unfold naturally.

So let's take a look.

Below is a picture of the female uterus complete with baby inside. Please don't feel like you need to memorize everything here. What is best is to get an idea of where the important things are that you might hear about during your appointments and labor. This might include: amniotic sac, umbilical cord, mucus plug, cervix, and vagina. Just a simple knowledge of where these things are and how they are connected can make things make a lot more sense.



Now that we know some details about your uterus, let's take a look at how baby actually sits inside the body.



Baby positioning

You may hear terms such as transverse, cephalic, head down, and breech (and variation of breech). The baby may be in all of these positions throughout a normal pregnancy. The important thing is that by the third trimester the baby is head down also known as presenting cephalic. Within this you may also hear OA (occiput anterior), or OP (occiput posterior). This refers to the baby facing your front or your spine. OA is the ideal position, but don't worry if the baby is OP, it's still all good. The baby in the picture above is in the ideal position (head down).

If baby is not head down by the third trimester, you will want to talk with your provider about your options. While babies can turn at any time, it is far less likely that a babe will get itself in the correct position the larger that it gets as there is less space for movement. We first recommend seeing a Webster Certified chiropractor. The Webster technique is a specialized technique that uses advanced pelvic alignment strategies to get the body in better balance which will allow baby to reposition appropriately. We also recommend doing this as soon as possible so that baby does not have to sit cramped in a poor position that can effect its development. In fact, if you can see a qualified chiropractor throughout pregnancy you can generally avoid this issue altogether. If this is unsuccessful you may ask your provider about what is called an ECV. If none of this is effective you will have to look for a vaginal breech delivery provider if you intend to still have a vaginal birth.

Conscious Choices Checklist

- Do you feel like you have a good idea of where and how your baby fits into you?
- Have you considered a prenatal chiropractor to ensure best baby positioning?

The Lady Parts

The cervix and dilation/effacement - myths and truths

We've all seen movies or heard birth stories and "being 10cm dilated" is always a huge deal. Right? Well, yes and no. While it is important for the cervix, or opening of the uterus, to dilate to 10 centimeters before the pushing phase of labor can begin, it doesn't have to happen in a long, slow, march along process like everyone makes it sound. It can be very disheartening if you have been laboring nicely for five hours and a nurse comes in and says with a sigh "only 4 centimeters, you're moving pretty slowly." Slowly for who? Slowly for the doctor, the nurses on shift, the hospital who needs their bed back.

A women progressing "slowly" is like a table at a restaurant taking their time to enjoy their meal and relax. Great for the diner, bad for the restaurant. Only this is YOUR birth, not a meal and you are not simply a customer for profit. Take all the time that your body needs individually, which varies a ton from woman to woman. That being said, another reason to ignore your nurses comments about progress is that it doesn't have to march along one centimeter at a time. A close friend of mine was at 3 centimeters for hours, got into the water bath to relax and within MINUTES she went from 3 to 10! When the body and uterus are relaxed and ready to deliver, the cervix will open. It's the same for effacement, which really is just another way your cervix gets out of the way of the baby passing through.

The uterus and its contractions

What exactly are contractions for? Logically, if contractions are to “push the baby out” then why would it take hours for a contracting uterus to go through labor? And wouldn’t Braxton hicks contractions make the baby come out? Contractions are your uterus’s way of prepping itself for ejection. Like the term “priming the pump” or as my hubby likes “tapping the keg” you have to build up a pressure before the beer can be “ejected” out of the keg. In a somewhat similar fashion, the uterus has to build up a wall of strong muscle before it is actually ready to push the baby out. There is a real reflex, called ejection mechanism, that happens once both the uterus and the cervix are ready. Pushing before the real urge to push comes on can be sometimes arduous and pointless as the body is not ready for the mechanism. This is one reason why it can be better to avoid an epidural if at all possible, as you will decrease or lose your ability to feel if you are ready. Back to poop again, imagine how it would be to poop if you couldn’t feel what was happening down there?!

Many doulas and midwives will recommend breathing through and using your contractions. If you imagine that each contraction is priming your uterus and serving a purpose, versus senseless never ending pain you can integrate them much more easily. It’s like jogging. If you have mile markers along the way to a destination it’s a lot easier to breathe and work through it than if someone just said “run until I tell you to stop.”

Perineum, Tears and Episiotomies

The perineum is the space between your vaginal opening and your anus. As the baby’s head emerges this area can be prone to tearing if not managed properly and some doctors will recommend what is called an episiotomy (cutting into this flesh to create a more “clean” opening rather than having a tear). Episiotomies don’t have a lot of data to back up the supposed outcome and most women can avoid tearing when properly prepared. Doing pelvic floor relaxation exercises, seeing a chiropractor for perineal release, massaging the area with oils and using proper breathing and restraint during pushing will all help prevent tearing. This is another reason to avoid an epidural as you will be able to measure the force of your pushes better and be more able to sense when to push and when to hold back and allow nature.

Conscious Choices Checklist

- Now that you understand the purpose of contractions, are you searching out a course or support person who will help you work through your labor and contractions so you can maximize their efficiency and make a easier, shorter labor?
- Have you talked with your provider about their use of episiotomy, researched your preferences and decided what you would most prefer?

Labor and it's stages...and phases

While no one really needs to be paying attention to anything other than what's happening at the moment during their labor, it's certainly a good idea to at least have to clue as to what is coming just so that you know what to expect.

There are three commonly referenced stages of labor and a fourth less commonly spoken of.

Stage 1 - Contractions up to full cervical dilation

This stage is actually divided into three phases:

- Phase 1 - the latent phase.

In this phase you will be having contractions (as your uterus prepares) and thinning/opening of the cervix. This is generally the longest phase of labor. Being present to your uterus' main goal and focusing on that as well as having a good method for breathing can help greatly to speed this process. Regular chiropractic adjustments for a balanced pelvis and exercise throughout pregnancy will also ease this phase as the body will have better "tone".

- Phase 2 - active phase.

During this phase your body will be changing more rapidly, contractions will likely be stronger and it is generally shorter than the first phase. The same principles that speed phase 1 will also help speed this phase. You will need to be prepared to focus even more here to stay on top of the contractions. Be sure to keep hydrated, and eat if you feel like eating.

- Phase 3 - transition.

This phase is often overlooked but it is one of the most important phases to be aware of. At this time you will be reaching close to full dilation and baby will be dropping rapidly into the canal. Some women experience vomiting, the urge to poop, shaking, or will describe the feeling "as if they are going to fall apart". This is the time when many women who say they wanted an unmedicated labor cave in a get an epidural, mostly due to the fact that they are unaware that this is transition and expect their labor to continue to worsen and last good while longer. The fact is that transition is exactly what it sounds like, and if you have a good support person to help you breathe through it and collect yourself you can easily make it through and you will be about to meet your little one!

Stage 2 - The delivery

Sounds like the title of a movie starring Denzel Washington. This is it! During delivery you will be actively pushing to get the baby from the birth canal to the outside world! This can last minutes to a couple of hours, but with a good birth team it should be as short as possible. Listen to the coaching during this phase and use your intuition. Yet another reason not to be medicated. Your intuition on when to push to get maximum result for your effort will be heightened in this stage as long as you have no meds in the system to dull it. Be sure that you advocate to push in WHATEVER position feels right for you in this stage. The obstetric position of lying on your back with your feet up goes completely against gravity and was created for convenience to the doctor, not the birthing mom, so if you don't like it, don't do it! You may choose to move positions quite a bit during this phase. That is because the baby must spin a bit as it moves through the canal sort of like a key in a lock. Sometimes things get a bit stuck and you have to "jiggle" the key to get it to turn. In that way your baby may be guiding you to twist, shift or move a certain way so that they can navigate through the canal as easily as possible.

Stage 3 - Placenta

After the baby is born, you will relax for a short period and then the uterus will begin contracting again to birth the placenta. Many women don't really notice this phase much because it is so much less intense than the childbirth.

Stage 4 - Recovery

Many women are not acknowledged in this fourth lesser known phase of labor. It is important to realize that there should be allotted time for mom to recover from what is essentially equivalent to running a marathon with little to no training. Re-hydration is key, as well as having undisturbed time with the baby, especially if you plan to nurse. With home birth and birth center births you will have a much higher likelihood of getting to recover the way you want with your baby nearby than having them whisked away. Be sure to eat easy to digest, nutrient dense foods and rest as much as you need.

Conscious Choices Checklist

- Have you gotten a good handle on how the birth process works?
- Is there anything you'd like to research further to make your birth process exactly what you hope for?
- Consider your options for a longer labor if that is what your body needs and be sure you are set up to have support for this now that you know that body knows best.
- Do you have the right support people in place for all stages of labor?

Happy Birthing!