

Water birth

K Radhika

Vice Principal, Columbia College of Nursing, Bangalore, Karnataka, India.

Abstract

A water birth means at least part of your labour, delivery, or both happen while you're in a birth pool filled with warm water. It can take place in a hospital, a birthing centre, or at home. A doctor, nurse-midwife, or midwife helps you through it. A warm bath might help you relax and help you feel more in control. Floating in water helps you move around more easily than in bed, too. The use of a birthing pool during the first stage of labour might: Help ease pain, Keep you from needing anaesthesia, Speed up your labour. Things change during the second part of labour. That's when your cervix is completely dilated and open and you start pushing until the baby is born. If you're thinking about a water birth, talk to your health care professional early in your pregnancy to find out if it's a service the hospital provides.

Keywords: Water birth, nurse-midwife, warm bath, anaesthesia

Introduction

A **water birth** means at least part of your labour, delivery, or both happen while you're in a birth pool filled with warm water. It can take place in a hospital, a birthing centre, or at home. A doctor, nurse-midwife, or midwife helps you through it. In the U.S., some birthing centres and hospitals offer water births. Birthing centres are medical facilities that offer a more homelike setting than a hospital and more natural options for women having babies.

The use of a birthing pool during the first stage of labour might

- Help ease pain
- Keep you from needing anaesthesia
- Speed up your labour

The American College of Obstetricians and Gynaecologists (ACOG), which sets guidelines for pregnancy and childbirth care in the U.S., says a water birth during the first stage of labour may have some benefits but delivering your baby underwater should be considered an experimental procedure with risks. The first stage is from when contractions start until your cervix is fully dilated.

Studies show water birth during stage one doesn't improve your or your baby's medical outcome.

A warm bath might help you relax and help you feel more in control. Floating in water helps you move around more easily than in bed, too.

Some science suggests that the water may lower chances of severe vaginal tearing. And it may improve blood flow to the uterus. But study results about these points aren't clear.

Stage Two of Labour: Time to Exit the Tub

Things change during the second part of labour. That's when your cervix is completely dilated and open and you start pushing until the baby is born.

Many doctors say there isn't enough information to decide how safe or useful water birth is during this period.

Being out of the water for the second part of your labour makes it easier to move fast in case something goes wrong, ACOG spokesman Aaron Caughey, MD, says.

"If you have to do an emergency C-section, it would be foolhardy to risk an extra 4 or 5 minutes to move you out of the water," says Caughey, chairman of the obstetrics and gynaecology department at Oregon Health and Science University.

Water Birth Risks

Here are some of the rare problems that could happen while water birthing:

- You or your baby could get an infection.
- The umbilical cord could snap before your baby comes out of the water.
- Your baby's body temperature could be too high or too low.
- Your baby could breathe in bath water.
- Your baby could have seizures or not be able to breathe.

"It's important to emphasize the 'rare' part. But these are the sorts of outcomes that are severe, like drowning," says Jeffrey Ecker, MD, who co-wrote the ACOG committee's opinion on water births.

Are You a Good Water Birth Candidate?

Some factors may keep you out of the running for a water birth. You shouldn't try it if:

- You're younger than 17 or older than 35.
- You have complications like preeclampsia or diabetes.
- You're having twins or multiples.
- The baby is in the breech position.
- The baby is premature.
- You're having a really big baby.
- You need to be constantly monitored and it can't be done in the tub.
- You have an infection.

Water Birth Precautions to Take

If you're thinking about a water birth, talk to your health care professional early in your pregnancy to find out if it's a service the hospital provides. If so, who will manage your labour and delivery? You may need to find a midwife instead of an OB-GYN.

If it's not done in a hospital near you, you may have to go to a birthing centre or do it at home.

Regardless of where you decide to deliver, having a water birth means you should ask questions about how the labour and delivery are done. Things to look for:

- You have an experienced health care professional to help you through the labor and delivery.
- High standards are kept to ensure the tub is clean and well-maintained.
- Proper infection control measures are in place.
- You and your baby are being properly monitored while in the tub as required.
- There's a plan to get you out of the tub as soon your doctor, nurse, or midwife says it's time.
- The water temperature is well-regulated, usually between 97 to 100 F.
- You drink water during the birth to avoid dehydration.

Getting into a warm bath too early might slow your labour.

Water Birth Costs

If your water birth is done in a hospital, it usually costs same as a vaginal birth if it's covered by insurance. You may be required to rent the tub, which may be an extra cost. If you buy your own tub or pool for a home birth, it can range between depending on how fancy you go.

If you're having your water birth at a hospital or birthing centre, the midwife's fee is usually part of what you pay the facility. Birthing centres charge an average of about \$2,300 per birth in U.S.

References

1. American Academy of Paediatrics, 2014.
2. American Association of Birth Centres.
3. American College of Nurse-Midwives.
4. American College of Nurse-Midwives: "Position Statement: Hydrotherapy during Labour and Birth."
5. American College of Obstetricians and Gynaecologists: "Immersion in Water during Labour and Delivery."
6. News release, American College of Obstetricians and Gynaecologists.
7. Aaron Caughey, MD, spokesperson, American College of Obstetricians and Gynaecologists; professor and chairman, department of obstetrics and gynaecology, Oregon Health and Science University; associate dean for women's health research and policy, Oregon Health and Science University School of Medicine.