

WHAT IS AN ASSISTED VAGINAL BIRTH?



Merrion Fetal Health

This feature explains all you need to know about having an assisted vaginal birth.

1. For what reasons could I need help with my baby's birth?

There are a number of reasons why you could need help, some of the main reasons are:

- Your medical team are concerned about the well-being of your baby during the birth process
- Unfortunately it appears that your baby is not moving as expected out of the birth canal
- For some reason, medically you have been advised against pushing during birth

Essentially the process of an assisted vaginal childbirth is to carry out a procedure that mimics a spontaneous birth, yet at the same time poses minimum risk to both mother and baby.

An assisted vaginal birth is carried out either by an obstetrician or midwife, using specific instruments (forceps or ventouse), to assist the birth of your baby.

2. On average how often is an assisted vaginal birth necessary?

In the United Kingdom, on average approximately one in eight of every women will need an assisted vaginal birth. This amounts to 12% of babies born. However it is far less common in those women who have previously had one.

3. Is there any way I can avoid the procedure?

The first step is to try and have the best support during labour. We know that women who have the support of not only a midwife, but also someone they know and trust, during labour are less likely to require an assisted vaginal birth.

Other tips, when possible, are to avoid an epidural, and either lie on your side or be in an upright position.

What is an assisted vaginal birth?



In the case of it being a first baby and an epidural has been necessary, the requirement for an assisted vaginal birth can be minimised by waiting it out until the time has come where the urge to push is very strong, or you can even delay the time you begin to push.

Of course the amount of time that you may be able to delay pushing is directly related to your own situation, as well as your own wishes. However on average this time period is generally between 1 to 2 hours after the neck of your womb has opened up fully. Rest assured that your midwife will be there to guide you at this time.

Additionally a hormone drip could be used in order to reduce the need for this procedure. All of these issues should be discussed with you during your pregnancy.

4. Ventouse birth definition

A ventouse birth is when a particular type of instrument needs to be used in order for the birth to take place. The ventouse is a type of vacuum extractor which utilises. The ventouse will attach a cup to the head of your baby. Then your midwife or obstetrician will wait until your next contraction, at which stage she or he will ask you to push as she or he pulls gently in order to deliver your baby. Frequently it is necessary to pull more than once. Forceps birth definition

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In appearance forceps look quite similar to either tongs or large spoons. These metal instruments are crafted to curve to fit neatly around baby's head. Once the forceps have been precisely positioned, your obstetrician will ask you to push during your next contraction, as she he gently pulls. During delivery it is often the case that more than one pull is necessary.

6. Will the medical team ask for my consent?

Both of these methods are only used when they are considered to be the safest option for delivery, both for you and your baby.

Your midwife or obstetrician will explain whatever the reasons are for recommending an assisted birth, along with going through the procedure with you and their choice of instruments.

They will also explain any risks that are involved for either your baby or you during the process of an assisted birth. If the delivery of your baby is taking place in an operating theatre, then the medical team will obtain your written consent. Otherwise they will ask for your verbal consent.



7. What should I expect before an assisted vaginal birth?

In order to confirm that this procedure is the best choice for you, your midwife or obstetrician will carry out an examination on your tummy as well as performing an internal examination. Additionally a catheter will be used to empty your bladder.

A local anaesthetic or regional anaesthetic will be administered for pain relief during the delivery. However if your baby's head is positioned in such a way that it may need to be turned, the team will advise you to have either a spinal or epidural for pain relief.

In some cases an episiotomy may be required. This is a cut in order to enlarge your vagina opening, allowing the birth to take place.

8. Which is best – a forceps or ventouse delivery?

Both procedures are effective and safe. The decision will often be based on baby's position, and how she or he may need to be turned around. Your obstetrician will definitely choose the most suitable instrument for your baby, you and the entire situation.

However if you are under 34 weeks pregnant the ventouse cannot be used as baby's head is too soft. In general the forceps are considered to be more successful for deliveries, however a ventouse carries a smaller risk of vaginal tearing.

9. Are there any conditions or circumstances which will make these procedures less successful?

Yes, as follows:

- You have a body mass index of more than 30
- Your baby is big
- Your baby's head is not positioned low down in the birth canal
- Baby is lying with her or his back to your back

When any of the above situations apply, your obstetrician will assess whether it is possible for baby to be born safely or not. If she or he cannot be confident of a safe delivery, a Caesarean section may be necessary.

10. What happens after the birth?

A nurse or doctor whose speciality is the care of newborn babies may be present during the birth. This means that after your baby is born he or she can answer any questions you may have about your baby's well-being.

11. How will I feel after an assisted vaginal birth?

After this procedure it is common to have bleeding, just as you would after the birth of your baby normally. However the bleeding will be heavier. That said it doesn't take very long for the bleeding to calm down and be quite similar after a few days to that of a normal birth.

1% of women experience vaginal tearing after a normal birth. On average this percentage rises to 4% when a one woman has had an assisted birth. Vaginal tears are repaired using dissolvable stitches.

Pain relief is administered to many women after they have given birth. This is because most women undergo some degree of discomfort. Regular pain relief will most likely be offered to you, or should be offered to you, such as the likes of paracetamol.

Straight after birth it is common to experience issues with passing urine or bowel movements. However this generally occurs just immediately after giving birth, and passes quite soon after.

The risk of blood clots increases for women who have had assisted births. Therefore it is recommended to be as mobile as possible once you have given birth. The medical team will advise that you wear special stockings, along with having daily injections to reduce the risk of clotting.

12. How can an assisted birth affect my baby?

The suction cup that is used during a ventouse delivery frequently can leave a mark on your baby's head, but this mostly goes away within 48 hours. Approximately one out of every 12 in every 100 babies, will have a cephalohaematoma, which is a bruise on their head caused by the suction cup. It very rarely causes any issues, with the exception of an increase in the risk of jaundice during those first few days after birth. This bruise also disappears after time.

Marks left by the forceps commonly occur on a baby's face, and are mostly small, disappearing within 1 to 2 days. Additionally there may be small cuts on the baby's scalp or face, which occur in approximately 10% of assisted births, and also heal quickly.

13. Can I talk about the birth before it is time for me to go home?

Yes of course, someone from the medical team will discuss this with you. Ideally you will be able to have a discussion with your midwife or obstetrician about the assisted birth.

14. How will I feel when I go home?

Even after a normal birth women often feel a little sore and bruised, but of course after an assisted birth this is more likely to be the case. Swelling and stitches will make going to the toilet painful. Of course stitches heal within a couple of weeks. Take pain relief when necessary to help.

The decision to begin having sex again can be made when both you feel the time is right, and of course your partner.

It can be helpful for some women to discuss the emotional impact of having an assisted vagina birth. Be sure to do so if you feel the need, and you can ask your midwife or obstetrician to help you.

15. When I am next pregnant will I need to have another assisted vagina birth?

The majority of women who have undergone assisted vaginal births most often deliver spontaneously in their next pregnancy. The statistics say that for those women who had the procedure in theatre, 80% will give birth naturally the next time around.

Disclaimer

The information in this PDF is not intended to be medical advice.

Please do not regard it to be a substitute for direct medical advice.

Always seek the professional opinion of your doctor, obstetrician or midwife.