

Submission
No 60

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

Date Received: 19 July 2023

Partially
Confidential

In the lead up to the birth of my first child I was told repeatedly my child was abnormally large and I would have trouble giving birth. It was strongly suggested I should be induced early to reduce the risk (upon birth, my child was exactly 50th percentile across all measures so this turned out to be incorrect).

On _____ I was admitted to _____ Hospital to be induced. My husband was sent home once I was administered the cervical tape to bring on labour. In the morning I was asked by a midwife to call my husband as they would soon break my waters. I did call my husband who was staying with family about 10 minutes away. They did not await his arrival and broke my waters before he arrived, so I was not supported in this.

Around 2 hours later my child began to exhibit an 'unusual' heart rhythm. A midwife noted this and explained she had not seen this heart rhythm before. I watched her leave the room on several occasions over the next few hours to ask other midwives to come and look at it. Each time she did this, the other midwife would come in and look and would dismiss this saying everything was ok. After about 3 hours of this, a doctor came in and looked at the rhythm and immediately began speaking about the possibility I would need an emergency C-section soon if the speed of my labour did not increase. I then passed a large blood clot which caused the doctor to send me for an immediate C-section.

I was taken to theater where they struggled to administer my epidural for the c-section. Once they had administered this they laid me down and prepared me for surgery. My husband came into the theater and sat near my head. I have less clear memory from here, likely due to how traumatic the experience was. The following is assisted by my husband's recollection. The epidural had not taken effect when they cut into me. The first cut caused me to scream immediately. I recall this being extremely painful. The surgeon stopped doing what he was doing for a brief moment until I stopped moving.

The surgeon then cut into me again. I immediately screamed and began trying to crawl backwards up the table away from the surgeon cutting into me. My husband tells me he and another person in the theater had to grab me and hold me still as I was about to fall off the table. My husband tells me at this point they paused my surgery for a short period while the anesthetist drew up a needle and placed the needle into my canula. The anesthetist told me they were about to cut again, but if I feel something I should say something immediately and I would 'go straight to sleep.' My husband who has some understanding of medical practice tells me that the needle would have contained fast acting anesthetic which the anesthetist would have given me immediately had I made any indication of feeling the next cut. Thankfully I did not. The epidural had begun to work and the surgery proceeded from there.

After the birth of my baby they sent my husband and my baby out of the room to recovery. I remained in theater for about an hour while they closed me up. As the surgeon had finished putting in the final stitches, the surgeon and nurses were laughing and I heard a nurse say "that's not your best work" to the surgeon. About a week later when I took my dressing off, I saw my scar was uneven and I had a large lump protruding from the end of the stitches where it was clear the surgeon had not tied off the stitches correctly. That lump was not a 'medical' issue but was a cosmetic issue which caused me distress, particularly given the staff had laughed about it.

Finally, while in hospital I asked numerous times for Movicol to help me poo. They never gave it to me and my first poo after surgery was extremely painful. After we left hospital my husband got me the medication from a pharmacy which helped a lot.

On [redacted] I attended [redacted] Hospital for the planned c-section of my second child. This experience was entirely positive however, two interactions were of note as it relates to my first experience. When speaking with my anesthetist for my second c-section, she asked about prior complications. I told her this story and she said she would look at my clinical notes from last time. Later when speaking with her again, she informed me that the anesthetist during the first surgery had given me a smaller dose of the medication than recommended. She also expressed that they should have 'checked' before cutting me. When I had my surgery this time, she checked me extensively and made sure it worked before the surgeon commenced operating. Further, when this baby was born, I was allowed to nurse immediately and my husband and baby were never separated from me. Finally, before commencing the surgery, the surgeon on this occasion remarked how uneven my C-section scar was from the first time. When the surgeon began the surgery, my baby's hair was protruding before it should have been, indicating a uterus rupture. No one has talked to me about this as they seem eager to avoid the topic, but it has caused me significant distress wondering if my first c-section was not sown up correctly, leading to this rupture. They did tell me this could easily have caused the death of my baby.

I acknowledge the circumstances for these births was different, with the first being an emergency and this perhaps impacting the way I was treated, however this does not relieve their responsibility to check my anesthetic is working before cutting me, nor their responsibility to take the unusual heart rhythm seriously. They also should not be joking about poor suturing. I also wonder whether I would have needed a C-section for my first baby had they not induced me based on incorrect sizing of my baby on scans. Perhaps had I delivered wholly naturally I would not have had a c-section. The flow on effect of the first c-section was that my second c-section was mandatory. I am told I will likely never be able to experience natural birth. This causes me significant distress and the fact is, I will likely never know what could have happened, but nor will any medical person engage in this conversation with me.