Submission No 179

INQUIRY INTO BIRTH TRAUMA

Name:Name suppressedDate Received:2 August 2023

Partially Confidential

To the committee,

I gave birth in October 2022 via an unplanned caesarean section. I say unplanned rather than emergency for because I feel I should have been scheduled for the surgery in advance, but wasn't.

Around 20 weeks, I presented to Hospital for the first time after previously being handled by my GP. This ended up being one of several very stressful appointments for me - I did not feel my care pathway was explained to me, and I ended up in tears during the appointment because I was so confused. The doctor I saw at this first appointment wrote me a referral for 3rd trimester ultrasounds without explaining why. Though ultimately I'm glad they did.

It was only via one of these optional ultrasounds that I was diagnosed with polyhydramnios. My stomach was never measured at prenatal appointments. Had I not gone to those optional ultrasounds I never would have known I had this condition that posed a risk at birth.

At the birth plan discussion I was asked how I felt about an induction at 39 weeks. I was always flexible for my birth, happy to go with whatever was the safest option for me and the baby. I said I was happy for the induction but asked about the likelihood of me needing a c section. I asked if a scheduled c section would be the better option. The doctor asked me what made me think that. I said I'd read that a lot of people with polyhydramnios end up getting c sections, possibly because of the baby's size, but obviously not being a doctor I didn't really know and trusted her judgement. The doctor said there was no reason to think I'd need one so we went ahead with the induction plan.

On the date of my induction I arrived at the birthing unit and was examined. I was told that they wouldn't be able to go ahead with the induction because my son's lie was unstable, that I was too high risk of a cord prolapse and that they recommended a c section. It's not that my polyhydramnios had worsened - my examination was on par with previous checks. Up until this point I'd been told there was no reason to think I'd need a c section, and now it had been sprung on me despite my symptoms being consistent for weeks. I had no objection to possibly needing a c section, but considering my symptoms I feel scheduling an induction at all was reckless and a waste of time, I'm astounded no one foresaw this.

It was too late to schedule a c section so I was put on the 'emergency' list. But because I wasn't in labour, I was an extremely low grade 'emergency'. I was told I needed to fast and they couldn't give me any indication of how long the wait for surgery would be. I was only given ice chips to suck on occasionally. No fluids as again, they didn't know how long the wait would be. I ended up going without any food or liquids for 20 hours. As a heavily pregnant person, this was extremely taxing.

When the time for surgery finally came I was already dehydrated and tired. Getting cannulated and the epidural hurt a lot more than they should have because of how hungry/thirsty I was. I had planned for my mother and partner to be with me for the birth, but now could only have my partner. Who they didn't let into the room until relatively late in the piece. When my son came out they didn't put him on my chest - the surgeon had pulled his cord out first, which made my baby breath in amniotic fluid so he had to be rushed to be put on oxygen. The surgeon then told me he was surprised that they scheduled me for an induction, and that with my AFI, a c section was always going to be the right choice. I then spent a longer than usual amount of time in recovery (likely due to dehydration) and so I missed out on skin to skin almost entirely. By the time we got back to the ward visiting hours were over and they made my mum and partner leave.

Because I was recovering from the surgery I needed a lot of help with the baby, but was often just offered more pain killers instead. I was told they expected me to be able to tend to him alone. Doctors also expected me to get out of bed and follow them to exam rooms, despite walking being extremely painful and difficult. My son had day/night reversal during the hospital stay, over the course of 4 nights I only got 10 hours sleep.

Fast forward 3 weeks, my surgical site is still in tremendous pain and the wound is re-opening. Long story short I ended up back in hospital with an infection. All signs pointed to the origin of the infection coming from inside my uterus. Hospital was very coy with the details but it seemed 'somehow' skin flora has ended up on the inside of my body and caused the infection. I wholeheartedly believe it happened during surgery, though I felt the hospital was careful to not allude to any fault in that regard.

I am not someone who had a 'vision' or high expectations for birth, I just wanted to feel supported and safe and I don't feel I got that. My son's first days of life were some of the worst I've experienced and I believe the traumatic birth and recovery triggered my PPD.

Here are some things that I believe would have made a dramatic difference:

- more thorough and consistent prenatal exams that would have diagnosed my polyhydramnios outside of a chance ultrasound.

- being recommended a scheduled c section in light of my polyhydramnios symptoms.

- being given IV fluids while I waited for surgery.

- a shorter limit on how far out they could push out the time of the surgery considering I'd been asked to fast.

- allowed my husband to stay with me in hospital. Allowing partners to stay would also alleviate pressure on staff.

- more support tending to the baby over night / accommodations to ensure I got sleep post surgery.

- better pay, support and ratios for nurses and midwives so that they are able to put the time into helping new mothers who are undergoing major surgery.

Thank you for your consideration.