INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

Date Received: 14 August 2023

Partially Confidential

I had my baby in 2022 in a large teaching hospital in NSW. I had been diagnosed with gestational diabetes (GD) which I had been able to manage with diet, and was able to wait to be induced until I was 40 + 3 days. I was able to stay with the MGP care model. My husband and I attended birth classes, and were educated about birth processes and choices.

I was able to have a beautiful water birth and my baby was born.

A few hours into being on the postnatal ward, my baby started vomiting. It was dark green in colour. We alerted the midwives with the call bell, and they reassured us that vomiting can be normal after a quick birth because they need to clear mucous.

She continued to have small vomits and when the midwife return later for my BGL checks due to my GD, advised that she would need to have a review by the after hours paediatrician.

When the paediatrician came she did not introduce herself, did her assessment on my baby then stated she would need to discuss the case with her senior, but that my baby would need to be transferred to the ICU and require surgery. We were not told that this would need to happen at a different hospital.

Once my baby was transferred to the NICU around 2am, we were told to wait in the waiting room while they did tests. We waited there for 2 hours without any communication from the team. My husband went out to the nursing desk to ask for an update, but they did not come and talk to us.

Eventually we got told she would be transferred in an NICU ambulance to the paediatric hospital. With 5 minutes notice my husband had to sprint back to our postnatal ward to collect his personal belongings in order to be able to take the ambulance with our baby who required urgent surgery.

I received no mental health support while my baby was in the NICU or surgical ward. No member of staff followed up on my mental wellbeing support during this time. Since we were not at the hospital she was born at, I was no longer a patient and therefore was not able to be cared for by the staff. I developed an infection in my peri stitches, I was unable to receive medical treatment at the hospital she was at because I was not a patient there. I had to leave my baby who was sedated in the NICU and go to my own GP which was over an hour away in order to receive treatment for this infection, Despite being in a hospital full of doctors they would not treat me.

I received no breastfeeding or pumping support, and was required to do my own research to ensure I kept my supply post partum. Once my baby was cleared to start oral intake, I requested a referral to a lactation consultant multiple times over multiple days which was not provided to me.

The nurses on the paediatric surgical ward wanted me to give formula to my baby and did not encourage me to make my own feeding choices or support me in my choice to pump and use breastmilk. Without the support of my husband and sister (not medical professionals) I would not have been able to breastfeed or even have developed my supply.

Despite feeling educated and prepared prior to her birth, I quickly began to feel overwhelming feelings of helplessness and guilt, that I had wanted a baby, and that because of that my baby would have to suffer and be required to have surgery living her first days sedated in an ICU.

It has led to ongoing mental health issues of PND, PNA and panic disorder which I am still receiving ongoing treatment for. I was not prompted to access mental health support by any staff member who looked after me or my baby.