Submission No 327

INQUIRY INTO BIRTH TRAUMA

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Partially Confidential

Early in my pregnancy I contacted the hospitals midwifery group practice after being told about it by a close friend who is a midwife. At 18 weeks I was contacted by my midwife and booked in my first appointment. At 28 weeks I had an additional scan as a part of a research study I had chosen to be involved in. In this scan I was informed that my baby's head had dropped significantly in percentile and was disproportionately small to her body. I was contacted later that day by the consultant to inform me that the baby looked healthy and the brain structures were normal but an extra growth scan was recommended in a month to monitor growth. I agreed and informed my midwife of the updates in our next visit. I requested an additional appointment in the medical clinic to ask some questions in the meantime. I discussed my questions with the registrar who went out to speak to the consultant at the end to confirm the plan. She then came in and told me that the consultant had said I was not suitable for midwifery care and would be transferred to the medical team. I challenged this asking for a reason and stating that I wasn't comfortable with the decision due to losing the continuity of care of the midwifery team. I was then told "those are the decisions that the consultant makes". In my next few appointments in the doctor's clinic, I asked several times to have my known midwife involved in my care or to have some form of continuity. This was declined every time. I asked what the reason was for transferring me to the medical team and how the management of my pregnancy had changed in any way but no one could answer these questions other than saying that "this is medical". By this time, I had read enough to understand the importance of midwifery continuity of care in management of low risk pregnancies but due to hospital policy, this wasn't an option for me. I requested a student midwife to provide some continuity and also asked my friend who is a midwife to be with me during the birth.

I had previously made the decision not to do the glucose tolerance test with my midwife after several conversations. After being moved to the doctor's clinic I was then repeatedly asked to do the test for the next three appointments where I had to again justify my choice, taking time away from other important issues we could have been talking about.

I do not feel that I was not prepared for birth or educated on options by the medical team at any point. I took initiative to educate myself through classes, books and looking through research as I didn't feel I was being provided enough information by my care providers. I found the registrars in my appointments often unable to answer my questions. The nature of my antenatal care added a lot of stress during my pregnancy and I felt powerless as I was unable to access the care model which I knew was safest for me and my baby.

At 41 weeks I had not gone into labour so was in the hospital for monitoring every second day and then everyday after 41+4. I requested an induction be booked for 42 weeks as that's what I felt comfortable with based on my own research and understanding of the risks. No staff at any point had a conversation with me about the risks and benefits of induction verses waiting for spontaneous labour. After 41 + 4 I was in the hospital everyday with monitoring required for around 30 minutes but I ended up there for hours each day waiting to see the doctors to ask questions. This process was exhausting.

I wrote a birth plan and tried to include all the things which were most important to me in an effort to communicate my decisions for my care and birth to a team who didn't know me or my baby.

The day before my induction, I asked to discuss the possibility of going home with the cervadil tape in as I was concerned about being in hospital all day and not getting good rest before my

labour. I waited for 3 hours for the doctor to come in the room and when she did, she told me that women's uteruses have "ripped open" and their babies die from the cervadil tape. She asked me "what makes you think this is low risk". I attempted to explain my reasoning to her (wanting to being in my home environment to promote a positive mindset, rest and improving my chances of going into labour naturally) however she quickly cut me off and did not take time to listen. She told me that me being 10 minutes down the road at home could be the difference between life and death. I asked her if the Cervadil is so dangerous, why are you giving it to me as surely it would be safer for me to stay pregnant while my baby is healthy. She then told me that everyday my risk of my baby dying is significantly increasing. When I asked for information about the likelihood of having a bad reaction to the cervadil, she couldn't answer saying that she didn't know the exact number. She was unable to even give me an approximate answer about the risks of the cervadil. She told me that unless I agree to being in the hospital they would not give me the cervadil tape. I had no choice so I spent the day in the hospital with the tape.

In the afternoon I was moved to birth suite and told that a doctor would be in to insert the cervical ripening balloon around 5-6pm. I waited all evening and finally at 10pm they told me a doctor was not available so a midwife would insert the balloon. A couple of staff had taken the time to explain the logistics of the induction process to me however no one had informed me of the risks involved with syntocinon or what I was likely to experience in terms of pain with the balloon. The balloon gave me painful contractions for hours so then I did not get to sleep until around 3 in the morning.

In the evening in birth suite, I had asked if I would be able to have a room with a bath to use as pain relief during my labour. I was assured several times that this had been written in my notes and they would make sure that it was communicated to the team. In the morning I was taken to a room without a bath. When I questioned this, the midwife told me that it wasn't safe for me to have a bath as there's not enough research for people at 42 weeks for using a bath during labour. I questioned this asking her to explain what their concerns were and she couldn't answer me so went to ask the doctors. A consultant then came in to tell me that it was due to me needing to be monitored. I then asked about the CTG as I was concerned about it restricting my movement during labour. I asked for options to have some period of intermittent monitoring if I felt restricted by the monitor saying that I was happy to have the monitor on for a few hours at the start and have it on for most of the labour. She did not address my concerns about pain management or about movement during labour but told me that unless I agree to the CTG, they would not give me the syntocinon.

On the morning of my induction I was already exhausted from the induction process and having had very little sleep the previous two nights however I tried my best to have a positive mindset and had my husband, friend and student midwife there to support me. My waters were broken at 8am. I requested some time to wait and see if breaking my waters would start my labour. I was told that nothing will probably happen but was allowed to wait for 3 hours. I found this comment unnecessary – although most people don't go into labour from having their waters broken, some do and there is no risk with waiting a few hours. The syntocinon drip was started at 11:30am. The midwife who cared for me throughout the majority of my labour was young and seemed unsure. She did not communicate much with me throughout the process. I asked her specifically to tell me when she was going to turn the drip up as I wanted to know what was happening and why, but she never did. She spent a lot of time feeling my contractions. She often left the room to talk to the doctors I assume about my

progress but did not communicate any plan with me. The contractions built in time and intensity and there were several periods where I was having contractions back to back with no break. My labour was being controlled by doctors who were not in the room to observe and I felt helpless and uninvolved in my own labour. After 7 hours, the midwife performed a cervical exam and told me I was 9cm dilated. I was surprised by this but happy. Another two hours went by and then a doctor came into the room and told me I wasn't progressing the way they would expect. She then examined me and told me that sometimes there can be variation with how people conduct cervical exams and I was actually 5cm and the baby was in transverse position. She told me she knew I wanted a natural delivery but we would have to see how things progressed. I then started to have a contraction and she left the room. From her statement I was fearful that they wanted me to have a caesarean but I didn't understand the reasoning for it. This statement and being told that I was not as far progressed as we thought were big mental hurdles to overcome but I continued on doing what I needed to do to manage the contractions.

Awhile after this point I had a moment of a crisis of confidence feeling overwhelmed and that I could not continue. I felt that nothing was happening and I couldn't continue forever. The midwife suggestion that I lay on the bed so that I could rest in between contractions. I laid on my side and by this point I was so exhausted that I ended up staying in this position for the rest of my labour. There was a shift change around this time and an experienced midwife came on shift. I think she communicated well with me but I was starting to dissociate due to pain and exhaustion by this point so I wasn't able to take in much of what she was saying.

I could feel my baby coming and my body was starting to push naturally. My midwife checked my cervix and told me not to push and to breathe through the urges. She then checked me again and told me to go with it. She began to instruct me when to push and to not make any noise and put all of that energy into pushing. I remember thinking that this was not how I wanted to birth my baby but I didn't have the capacity to argue and I just did what I was told. Once the head was out, the midwife realised her shoulders were stuck. She called for help and a team of people came into the room. She then asked for Mcroberts manoeuvre – pushing my knees back to allow more room for the baby to be born. This was ineffective and so the next manoeuvre used was suprapubic pressure. The baby was still stuck and so internal manoeuvres were then used and she was released by delivering her arm. The pain of this was unbearable and I was not expecting it. During this process I was terrified. I knew about shoulder dystocia and knew the danger my baby was in. She was taken quickly to the resus table and the cord was cut. She was stunned from the birth and it took a minute for her to cry. Once she was breathing well, they brought her to me and put her on my chest. We only had a few minutes together and then she was taken away. I remember being told that they thought her arm might be broken from the birth and she needed an X-ray. All the doctors left the room with someone telling me they would be back to stich me up later and I was left without my baby on the bed where everything had happened. I was in shock, exhausted and scared. I remember the room feeling so empty and quiet after the chaos of the birth and I just wanted to be out of there. I remember the doctor talking to other people in the room about how much I was bleeding and what degree of tearing I had but not to me directly until I asked them. From start to finish I feel like my labour was controlled by other people. I don't feel like I gave birth, I feel like it was done to me and any time I tried to have a say in what was being done, I was bullied or ignored.

I was taken up to see my baby in NICU but by this point I was so exhausted that I had trouble keeping my eyes open to even look at her. I didn't feel happy and I didn't even want to see her. I was in shock and exhausted and just needed to sleep. I struggle with this now looking back as I feel that she needed me and I wasn't there for her.

When my baby was taken to NICU, I was asked for consent to give formula. I said it was ok if needed but that I had a lot of colostrum I had expressed in pregnancy which I wanted to be used first. When I went to see her in the morning, all the colostrum was gone and she was being given large amounts of formula. From what I understand, I think she was given all of the colostrum in one feed – over 30mls, far too much for a baby who was just born. The amount was calculated based on her weight with no consideration that she was only just born. She was vomiting everywhere and had little interest in breastfeeding as she was so full. The NICU nurse allowed me to try feeding her but gave her a bottle when she didn't latch after about 10 minutes. I sat there as I watched the nurse change my baby, hand me the bottle to feed her and told me to put a gown on so I didn't get her clothes dirty as she had vomited on me earlier. This contributed to me feeling like she wasn't my baby. She was off breathing support by this point and thankfully later that day was transferred down to the ward with me. My baby was only on breathing support for 5 hours and there was no medical reason for her to be given formula. I wish I had done more to stop this but I was vulnerable after a difficult birth and did not have the capacity to advocate for her.

At some point we had been told that our baby's arm wasn't broken but I could see that it was limp and the midwife on the ward commented that she must have nerve damage. We were not given an update by the NICU doctors and were relying on reports from nurses who came down to take her obvs. Three times we went up to NICU when we were told the doctors would be rounding so that we could get an update but they were not there. It wasn't until day 5 we were given a quick summary by a doctor who stopped by our room. He told us our baby's head was small, that it is unusual and they are concerned about it so doing some tests. The next day, our baby was taken for a brain MRI. After days of not knowing what was happening with my baby and why I asked again to speak to a NICU doctor. Finally on day 6 we were able to have a detailed conversation with someone about what was happening. This was the first time I had been told about my baby's condition at birth including her apgars, her measurements and percentiles and what their concerns were.

Overall from the moment my pregnancy was medicalised after my 28 week scan, I feel that there was very little choice and little respect for me and my decisions. The lack of continuity led to me receiving a lower standard of care which caused me a lot of stress and left me feeling unsupported and unable to trust the team of people caring for me and my baby. My baby is almost 4 months old and I still think about my birth everyday. I am having trouble moving forward from this experience and it has had a huge impact on me. I have lost a lot of sleep thinking over all the different things that happened and how it all went so wrong. I did everything in my power to prepare myself mentally and physically for my birth and to advocate for my choices, but in the end it didn't make any difference. I love my baby and I am thankful that she is doing well but I still have to live with the trauma of these experiences. In the eyes of the hospital, my birth will be seen as a good outcome because me and my baby are alive and healthy but it doesn't feel like a good outcome to me.