

Submission
No 630

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

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Partially
Confidential

I had advised the antenatal team that I had had a history of sexual assault and wanted to avoid unnecessary intervention as much as possible.

From week 39, I was pressured to have an induction. I had made it explicitly clear from the beginning of my antenatal care that I did not want to have an induction. I was advised to have an ultrasound, where it was indicated that the amniotic fluid was low (but not past the threshold) and the baby was estimated to be a large baby. Following the scan, the obstetrician informed us of the potential risks and advised us that we should consider a c-section that day or the next day. I refused and agreed to come in for ctg monitoring every second day and have an ultrasound three days later. The ultrasound three days later indicated that the amniotic fluid had gone up and was no longer near the threshold. The obstetrician and a resident doctor met up with us afterwards and relayed again the risks of having a large baby. I said that I wanted to think about it and would it be possible to make a decision in a few days. This was Monday. The obstetrician then went on to say I cant just decide on any day as the schedule was getting booked up. He then proceeded to show us the schedule of births for the next two weeks and how they were filling up. My partner got upset at this and said that he shouldnt be showing us the calendar to pressure us into making a decision. Given that if I was to go into spontaneous labour that week, they would still have to 'fit me in' despite the purported busy schedule. Due to the pressure and against my wishes, I agreed to get an induction three days later and signed the paperwork.

The afternoon before the proposed induction, I got a phone call from the hospital asking where I was and when I would be coming in. The midwife said that I was supposed to have come in around midday, however no one had informed me of this. The midwife asked me to come in as soon as I could so that she could do an internal assessment. If I was not dilated enough, they would give me the gel and keep me overnight. This was quite distressing as I hadn't expected to come in that day and had not mentally prepared for it.

On the morning of my induction (27th April), the midwife had 2 attempts to break my waters, and then had to get the obstetrician to do it. This was painful and with my trauma history, quite distressing - I really wish I could have avoided this by waiting to go into spontaneous labour. I was put on syntocinon from 10am and only dilated to 4cm by late afternoon (In the end, I only managed to reach 5cm, then went back to 4cm due to the prolonged labour).

At 6pm, I requested an epidural, however the anaesthetist had siting issues, and it took him three attempts. The epidural didnt work, and the midwife had to ask another anaesthetist to come administer it again. Unfortunately, the epidural still didnt work so I was in immense pain, especially after being on syntocinon for nearly 12 hours. I had also begun continuously vomiting from 5pm, and began having blood in my vomit. This was very distressing for my partner who informed the midwives but felt that no one was taking him/it seriously. He collected one litre of blood in my vomit.

I was also having very bad reflux. I had had bad reflux towards the end of my pregnancy for which I was prescribed omeprazole. I told the midwife [REDACTED] (the two attending midwives were great, but I was extremely disappointed with [REDACTED] the last midwife) about my reflux and she gave me some chewable gaviscon tablets. I told her that I needed something stronger and that I was on omeprazole. She went and got the prescription for it but never got the actual medicine. I believe because she never did this, my reflux and vomiting escalated which could have been avoided. Because of the prolonged labour, I had to have a c-section - I ended up vomiting (due to the reflux not being addressed earlier) the entire time on my back throughout the c-section - the anaesthetist had to have a vacuum in my mouth to clear the vomit so I wouldn't choke on it.. You can imagine how uncomfortable and distressing that was.. The anaesthetist in the operating room was very upset with [REDACTED] the midwife for not getting the omeprazole and said herself that it was simple to do and it could have prevented the situation from escalating.

It was at midnight that I decided to go ahead with the c-section, and we were told that we would have to wait up to 2 hours. This meant that [REDACTED] had ample time to inform us what would happen with the c-section and afterwards, however she did not. So at 2:00am, when they were preparing to wheel me to the operating room, only then did [REDACTED] say to my partner that he would have to pack up the room as we would not be returning to it. The timing was terrible, and it could have been avoided had she explained this earlier on when we were just waiting to go to the OR.

When I was on my back in the OR, I started to feel vomit come up and was worried I would choke, and informed the anaesthetist who had to sit by my side and vacuum all the contents from my mouth so I wouldn't choke. This happened throughout the WHOLE c-section.

While I was in the OR, I heard the phone ringing and the staff answered the phone and I could hear that they needed to attend to a critical head injury patient right after me, and I heard one of the staff say 'Guess what I don't feel like doing - a craniotomy'. This was understandably very disconcerting to hear while I was lying there in the OR..

During the c-section, I lost 1300 ml of blood. After they presented my daughter to me, I vaguely remember that [REDACTED] asked whether I would like [REDACTED] to stay with me, or to stay with [REDACTED]. I was so out of it when she asked me that it was not informed consent. Looking back, I am so angry that she had not explained this before entering the OR, or even before I was so drowsy from the blood loss and the medication they were administering. I later woke up in recovery shaking uncontrollably and distressed. I asked for water, and she said 'I'm worried you'll start vomiting again. You've lost a lot of blood and have been pumped with a lot of drugs'. She did give me ice chips - but to be informed of the blood loss in this blunt way created a lot of anxiety and panic. I discovered that I was immobile from the waist down which was very distressing and I began having somewhat of a panic attack. I don't know who the older staff member was (whether she was a nurse or a doctor), but she played a pivotal role in my birth trauma. I was in the recovery ward alone, shaking and started feeling a tightening in my chest. I said to the lady in a panic, I can't feel my legs to which she replied, Did [REDACTED] (the

anaesthetist) tell you that you would be able to move your legs? Which was very patronising. When I said 'no', she continued 'No - you wont be able to feel your legs. If you could feel them, the pain would be terrible'. I said 'I think im having a panic attack, could you hold my hand?' And she replied 'no I cant hold your hand, I have another patient in the ward'. Her response was shockingly cold. Moreover, the ward may have had one other patient but it was dark and empty. Being without my partner and baby, especially after a prolonged and traumatic birth, I cannot believe the coldness of this woman. Even if she was not trained in trauma informed care, I cannot believe the extent to which this woman lacked empathy. She then asked whether I am on medication for anxiety - to which I replied 'no'. It felt that she was dismissive of my situation and could not see how this birth and recovery alone could induce such distress and panic. Later when she transferred me to the maternity ward, she told the midwife that I had had a panic attack and again mentioned that I was not on any medication for anxiety. The only thing i could do was take deep breaths to help calm myself, my chest felt so tight and I had never experienced a panic attack or anything like this prior in my life. The lady then tried putting a hospital gown on me, and i said that I was feeling hot, and tried to remove the clothing from around my neck and I was feeling so overwhelmed and distressed - she then said, 'you cant just have your breasts out, this is a public domain'. I dont wish this woman to lose her job, but she needs to be trained in trauma informed care or at least in empathy. If her actions reflect burnout, then this speaks to a bigger issue.

I was extremely reluctant to write this submission given how triggering it is every time I recount my birthing experience. I still cry every time I think/talk about it. The only reason why I wanted to write this is so that no woman would ever have to experience what I had to go through. And staff like that woman in the recovery need to be flagged for burnout or given training on empathy/trauma informed care.

It was more than an hour before I was reunited with my partner and baby. I was a mess when they came into the ward. This is how I will remember my birth and the first few hours with my first child.