

Submission  
No 800

## INQUIRY INTO BIRTH TRAUMA

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Partially  
Confidential

My first birth was traumatic.

I was to give birth with my MGP midwife, at a low risk birth unit                      When I was 39 weeks my waters broke spontaneously, and after three days of stop and start contractions, I decided to book in for an induction at

When I arrived for my induction, the anaesthetic doctor failed 3 times to put in my cannula. The third one, that he wriggled around in my wrist for over a minute, was painful. When I asked why he didn't flush it, he said he didn't need to (this is not correct). When my midwife flushed it 15 minutes later to start the syntocinon, my whole hand swelled up painfully. The doctor did not do this procedure as per policy and throughout the rest of my labour I had pain in my arm.

Throughout my labour, the obstetric team would walk through the door, chatting about other patients, not introducing themselves, and not respecting my birth space.

I was labouring well in the shower with the gas, the warm water a huge help for the painful contractions caused by the induction drugs. I was made to move from the shower onto the bed as the CTG did not have a good trace to monitor the baby. This was never presented to me as a choice or recommendation, more of what I was told to do. I asked to go into the birth pool and was told I would not be able to due to only being 4cm dilated. With no alternate pain relief or distraction, I asked for an epidural.

The first epidural did not work. The second worked, but was not secured properly by the doctor who put it in, and it fell out. The third epidural worked, but only in one part of my body. I had a catheter inserted, and was put into bed. After my 3rd vaginal examination (that at least by my midwife were presented to me as a choice) it was found I was 10cm dilated. I had no urge to push, but was coached to push anyway. I became very exhausted, and after two hours the consultant came to see me. She did a vigorous vaginal examination that left my mum in tears, then told me I was only 9.5cm dilated and I needed to wait 1 hour to push because she was in theatre, and she "rammed up" the syntocinon. After 15-20 minutes I was in severe pain, I could no longer cope with the contractions, and my body was involuntarily pushing. I pushed for another hour. I was reviewed again by the consultant who told me the next option was to go to theatre for a forceps delivery or caesarean. I did not consent for forceps. When we went into theatre, my husband came with me. Our daughter was born and taken away (her APGAR was almost perfect) and then put on my chest. I asked the anaesthetist to give me some more medication and take her away because I was going to vomit. He said there was no chance of me vomiting as he had given me every possible drug for vomiting- nevertheless, i projectile vomited at his feet. I fell asleep and by the time I woke up, my family had met my baby, and I missed all of it. We were supported to breastfeed, and went to the maternity ward. They refused to give me anything to eat "in case I threw up" I adamantly requested some food, they gave me a packet of dry biscuits.

When I returned to the ward, I asked if my placenta had been saved (my one request before my operation, my midwife was aware, and it was in my birth plan). I was told by the midwife in charge that unfortunately it had been thrown in the clinical waste bin and there was no

way of determining which placenta was mine. This was devastating, and meant I could not continue my family tradition of planting my placenta under a tree.

Throughout my whole experience, which was in no way as traumatic as other stories I have heard, information was presented to me as if I had no choice. Informed consent was almost non-existent. I was told “you need to...” “you have to...” “you can’t...”

I was denied access to water for pain relief, for interventions that were not presented as a choice. I was gaslit by the doctor who put in my cannula, and in my opinion, by the obstetrician who told me to wait and not to push when I felt the urge.

The way women and their support team are spoken to in labour is of the utmost importance. Interventions and choices that can have far-reaching consequences need to be presented as choices, and not as “you have to do this because it’s our policy”. Birth is not the time for women to be fighting battles against the hospital system in order to be respected, heard, consulted with, and listened to. I am frightened for anyone going in to give birth in the hospital system.