

Submission
No 851

INQUIRY INTO BIRTH TRAUMA

Name: Name suppressed

Date Received: 3 August 2023

Partially
Confidential

I have had multiple birth traumas.

First pregnancy

2016 miscarried 1x twin. I was told at first ultrasound there are two and one is “non-viable”, at a later ultrasound I asked the progress of twin 2 and was told “that’s gone now”. I was not referred to any support or bereavement services at any point in this pregnancy.

2017 traumatic vaginal delivery with multiple complications;

Breech baby not possible to be delivered at desired hospital.

Successful ECV with plan to proceed with vaginal delivery.

Premature rupture of membrane with meconium- not allowed to birth in birth suite as planned, had to go to general labour ward. Not allowed to have water birth.

10hour wait in waiting room of hospital with continual “waters” leaking due to bed block in hospital.

Eventually requiring aggressive intravenous induction and threatened that I had 8 hours from commencement of induction to deliver baby or cesarean section would be required due to PROM baby needed to be out by 24 hours of ruptured membrane.

“Explosive” internal vaginal wall tears & second degree perineal tears resulting in postpartum haemorrhage.

Required medical emergency response team for haemorrhaging- this meant my hopefully calm birth space now had 15 strangers staring at me from the foot of the hospital bed with my legs up in stirrups while I was naked, bleeding and holding my newborn for the first time.

The concept of a “calm and serene birth bubble” with my husband and newborn was not possible until after 45 minutes of suturing followed by the cleaning staff attending to mop the “crime scene “ of blood from the floor as described by staff.

The day I was due to leave hospital, baby vomited blood. I was advised I should no longer breastfeed baby but instead exclusively express and bottle feed baby. This was both challenging and exhaustive.

I was not referred to community and family health team. I was given a brochure.

In a moment of desperation once home I searched for the brochure and called to self refer. A community nurse told me baby had lost too much weight on day 10 and was “failing to thrive”. At three weeks old spent a week at [REDACTED] with issues with feeding, failure to thrive and sleep/settling issues.

At 5 weeks postpartum noticed that my vaginal opening had almost closed entirely due to over granulation and keloid scarring from suturing. Obstetrician was unable to insert child sized speculum into vaginal opening.

12 weeks postpartum- hospital admission and surgery to reopen vaginal opening. Medicare declined to cover any medical costs deeming this a cosmetic procedure.

Instead of acknowledging my trauma and referring me to any support my GP laughed this off saying "you're always worried about something"

I eventually 4 years later I had found a new GP and requested a mental health care plan & referral to a psychologist to work through my birth trauma.

I had multiple sessions of EMDR to process these traumatic experiences.

Second pregnancy 2021

Missed miscarriage discovered at 8 week ultrasound.

Blood test every 48 hours to monitor hormones.

Medical management of miscarriage.

Retained products of miscarriage. D& C required.

Occurred during covid lockdown- I was not allowed to have a support person with me at any appointment. This was incredibly isolating.

Third pregnancy

Missed miscarriage discovered again at 8 week scan.

Declined medical management and opted for D&C.

Still in lockdown without a support person at any appointment.

Fourth pregnancy

Gestation hyperthyroidism

20 week ultrasound Grade four placenta previa

34 week ultrasound incorrectly advised that placenta previa resolved entirely and safe to proceed with vaginal delivery.

Breech baby- declined ECV.

Planned cesarean section due to breech presentation- advised placenta previa was severe and both lives were at risk if I had unknowingly chosen to proceed with vaginal delivery.