

Submission  
No 970

## INQUIRY INTO BIRTH TRAUMA

**Name:** Name suppressed

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Partially  
Confidential

In May 2021, I gave birth to my daughter at Hospital as a public patient. I was 25 at the time of my birth.

When I began attending Hospital Antenatal Clinic I was accepted into a midwives program where I was to name midwife for continuity of care. This did not occur. Due to COVID 19 my nurse was regularly not available and was I was seen by other staff. Throughout the whole course of my pregnancy I had made it clear that I wanted to have a natural vaginal birth. I had continued having regular acupuncture/acupressure appointments with my partner to learn how to cope with the pain naturally throughout birth.

Towards the end of my pregnancy the hospital doctors also got involved in my care due to suffering from an auto immune disease (mixed connective tissue disease). This condition was stable and my private rheumatologist had no concerns about my ability to carry or deliver a baby.

Close to my due date, at an antenatal clinic appointment, a doctor sat me down and strongly suggested that I have a c-section due to my auto immune disease. He could not provide any medical evidence as to why this would need to occur. I declined and due to this decision I was told I needed to be induced no later than 40 weeks and 2 days due to my health - however no evidence as to why this needed to occur.

On the 7th of May, the day I was due to be induced my waters broke spontaneously, hours before I the procedure was booked. I was thrilled.

I attended Hospital the same morning at about 5am. My contractions had come on fast and I was 6cm dilated. I opted to have some gas to assist me with the pain.

At approximately just after 11:30am that same day I was at 10cm dilated and ready to push. I pushed for almost 2 hours with little to no success. During this time I was not encouraged to move around to assist the baby down the birth canal. After 2 hours of pushing the doctors notified me I was allowed to push two more times or they were going to intervene medically. This resulted in me having an episiotomy and vacuum used to deliver my daughter.

While I thought the worst was over, the nurses and doctors began stitching me up and massaging my belly to help the placenta deliver. Through the birth and placenta I lost over 1.5 litres of blood. When my placenta came out, I asked to look at it, there was a significant hole in it. I specifically remember the nurse saying to the doctor "I think its all there", before throwing it into medical waste. The doctor then told me, rather than ask that she was shoving a voltaran up my bum to assist in inflammation and pain.

I couldn't get out of my hospital bed for the first day due to the blood loss. My partner and a nurse had to sponge bath me. I wasn't offered anything else to help with my blood loss.

In the weeks after birth I didn't feel right, I had stomach cramps and felt weak and lethargic. I told the community nurses who visited me at home but I was told this was completely normal.

On the 1st of June 2021, while breast feeding my almost 4 week old I felt a rush of blood come out of me. I directly contacted Maternity Ward. I was told that I was "probably fine" and to speak to my doctor in the . The following day I spoke with my doctor who sent me for an ultrasound which confirmed that I had retained placenta. He contacted Emergency Department to advise them I was on my way in and that this was a serious medical event. When I arrived at Emergency Room I waited hours with my partner and newborn who I was still trying to breastfeed, to be told to go home and hopefully it would pass itself. I returned that same night with picture of the orange sized blood clot I had passed for them to finally start taking my concerns seriously. I felt sick and lethargic. I still had to wait over 24 hours for any medical treatment or to be taken for a D&C. Prior to my D&C a hospital ultrasound worker scanned me again and in concern told me there was a significant portion of my placenta left.

After my D&C I immediately felt better. My energy returned, my pain stopped and I felt how I should have as a new mum.

In my follow up appointment with GP's and specialists I was informed on a number of occasions I was very lucky to be alive.

In my follow up appointment with an explanation or apology as to how Hospital I was extremely disappointed. I didn't get eaten or why my initial concerns were dismissed.

I am not due with my 2nd child in January 2024, I have refused to return to Hospital for this pregnancy due to the significant emotional trauma that hospital now has

In my journey as a mum, I have come into contact with a lot of other new mums through online support groups and face to face mum groups. It appears that what happened to me is not uncommon.

My trauma is not from a single event, it is before, during and after birth. Pregnancy should be an exciting journey not traumatic, and if it is, why are we not offered any support after?

I would be happy and privileged to provide evidence if needed in order to try and make positive changes for the future of pregnant women.

My proposal is:

- All women should have access to medicare subsidised women's physiotherapy to assist with pregnancy pain, pelvic floor assessments and post birth assessments. This will help women be aware of their pregnant bodies and what positions will help them in active labour, but also how to keep their pelvic floor strong.
- Free birthing and pregnancy classes in public hospitals or community spaces.
- If a woman does not birth a complete placenta or there is concern about it it should be standard protocol to provide them an ultrasound before they go home.
- A foundation / service should be established for supporting those who are victims of traumatic birth experiences - this should be full of experienced doctors, nurses, counsellors, health professionals and volunteers. When a woman experiences a traumatic birth experience they should be referred from their hospital or be able to self refer themselves.
- If a woman has a traumatic birth experience, they should be offered subsidised counselling services.