Submission No 1465

INQUIRY INTO BIRTH TRAUMA

Name:Name suppressedDate Received:15 August 2023

Partially Confidential

I feel the system failed me from the beginning. As a first time pregnancy I didn't know what was standard. My GP didn't refer me to the hospital until I was 20 weeks pregnant, at which stage was too late to be considered for midwifery group practice. Throughout my pregnancy I saw a different midwife at each appointment, and while they were good the continuity of care was definitely lacking.

My labour started spontaneously at 41 weeks. My contractions started at 3.30pm. Called the hospital at 5 and they said they had no free rooms so to stay home as long as possible otherwise I'd just be labouring in the corridor. My contractions got intense by 7pm so called hospital again and they had a room so I was able to go in. When I got there the midwife told me I was probably in early labour and that I'd likely be sent home but when she checked I was already 7cm, and she was surprised saying that I'm a quiet achiever. They said because I was 7cm I could only have the gas. I used it which mainly just helped me to focus on my breathing. Then things stalled for a while and part of my cervix was still in the way. By that point they checked me and said I was 9cm but I couldn't push until it had cleared completely so we were waiting for that. Then a different doctor came in and told me I was only 7cm and then I broke down in tears because I thought I was so close and was being conflicting information. He offered an epidural at that point (again conflicting earlier advice) and I said yes so he was going to organise one, but then they put on the CTG monitoring and said my son's heart rate was starting to drop so that I'd need an emergency c section. I signed the papers for one but then got too strong of an urge to push, so they got another doctor and heaps of other people in the room. There ended up being about 10 staff in the room and at that point my husband said he thought both my son and I were going to die because of how serious it all seemed, & no one explained anything to us. The doctor told me I was pushing wrong and was speaking bluntly to me which made me feel awful. The midwife later told my husband that she'd never met that doctor before and didn't like how he had spoken to me. He did an episiotomy, tried the vacuum twice but it came off both times, then did the forceps which got our son out at 12.40am. He was put on my chest and I delivered the placenta. I had a 3rd degree tear and the two doctors were in a disagreement about whether or not I should go for surgery for repair. One of them highly recommended it to me, so I think about 30 mins later I was taken for surgery and put to sleep. Then I was back with my son by about 4.30am so separated for a few hours which makes me feel really sad. I was never explained to why things went the way they did, had no debrief and still can't understand why the information given was so conflicting. If I got to 7cm at home by myself I'm unsure why so much intervention was needed. After my birth I was referred to a physio at the hospital for my damage, however she didn't specialise in women's health and checked me off as being fine. When I continued having problems I sought my own women's health physic and she found that I have some nerve damage, likely from the forceps.

I am currently 33 weeks pregnant with my second baby and this time have been determined to have a better experience. I asked my doctor at 8 weeks to refer me to the hospital, had my first hospital visit at 12 weeks where they then booked me in to midwifery group practice. The continuity of care and experience so far has already been so different to last time, and feels so much more personalised. I've also paid to hire a doula to support me as I feel the support and education she provides is going to help me to have the best possible experience and prevent further damage. I wish it was standard care to have access to the same midwife throughout the experience. I also hope for as little intervention as possible, only if medically necessary. I wish it were part of standard birth education to speak about the cascade of intervention and for pregnant women to have access to evidence based research and information.