

Assisted vaginal birth



One in three women having their first baby, will have an assisted vaginal birth. For subsequent births, approximately one in eight women will have an assisted vaginal birth.

If you need an assisted vaginal birth, you will be asked to give consent. You can decline and your doctor will talk to you about other options.

Having an assisted vaginal delivery does not mean you will need another one during your next birth.

If you do have an assisted birth, you will need to remain in hospital for at least 24 hours following the birth so we can monitor you and your baby during that period. Most babies born by assisted vaginal delivery are healthy and do not have any long term issues.

Why you might need to have an assisted birth

- Concerns about your baby's wellbeing during birth – just like you can become tired during your labour, so too your baby can become tired.
- Your labour is not progressing as expected.
- You request help because you are becoming tired or you have a medical condition where you are not allowed to push for more than a given amount of time.

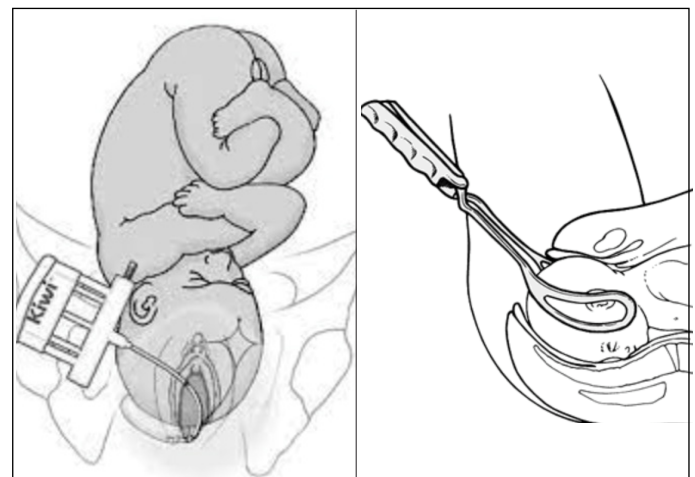
Types of assisted vaginal birth

Ventouse birth

A plastic vacuum cup that attaches to your baby's head using suction. Your doctor will ask you to push while they gently apply pressure and pull baby down to help you give birth.

Forceps birth

Forceps are smooth, curved metal instruments that carefully cup around your baby's head. Your doctor will ask you to push while they pull to help you birth your baby.



Ventouse

Forceps

Bleeding

It is normal to have bleeding after giving birth. Slightly heavier bleeding is common following an assisted vaginal birth. This should gradually become moderate and then light bleeding over the next few days to weeks.

Episiotomy

This is a small cut with scissors to your perineum, performed by your doctor or midwife that may reduce the chance of having a deep tear into your anus called 'obstetric anal sphincter injuries'. These tears are repaired with dissolvable stitches which dissolve over 3-4 weeks.

Third and fourth degree tears (involving the muscle and wall of the anus or rectum) are not common (3% in vaginal birth, 4% in ventouse birth and 8-12% with forceps birth). If this does happen, you will need to stay in hospital for 24 to 48 hours for antibiotics.

We will arrange a follow-up appointment for you when your baby is six week's old to check the healing and function of your muscles around the anus.

For any type of tearing we advise you to:

- Keep the area clean and dry. After opening your bowels wash the area thoroughly with water only and pat dry. Do not use anything else to dry the area.
- Avoid constipation. Keep hydrated, increase fibre intake and take stool softeners. The aim is to have a toothpaste-like consistency for your stool.
- The tenderness over the repair should improve when you go home and after the first week. If you notice an abnormal discharge or increased pain, please see your midwife or doctor.

Pain relief

Most women experience pain and discomfort after giving birth. We will offer you pain relief immediately after birth. After you go home, take paracetamol or ibuprofen.

Bladder care

You may experience some difficulty passing urine especially if you have had an epidural. A catheter may be placed in the first few hours after birth to help you with this.

It is important that you completely empty your bladder after birth to reduce the risk of long term problems. Your midwife will give you a jug to measure the amount of urine you first pass.

If you are having trouble feeling when to pass urine, your health care team may ask the physiotherapists to talk to you about a bladder diary and timed voiding, where you may need to remind yourself to pass urine every hour.

Reducing the risk of blood clots

During your pregnancy and after birth you are at increased risk of having blood clots. To reduce this risk we advise you to be as mobile as possible. Your doctor may also recommend a daily injection for a set period of time to reduce the risk of clotting if you are at higher risk.

Can I talk to someone about my birth?

If you have questions about your labour and birth, your doctor will see you and answer them the day after your baby is born.

If you have further questions, please contact our Postnatal Ward and we will arrange for you to see us in our Postnatal Review Clinic.

Contact information

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Lithgow

(02) 6350 2324

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(02) 4734 2295 or (02) 4734 2294



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