

Childbirth Series

Section Two: Labor and Pain Management



Presenter:

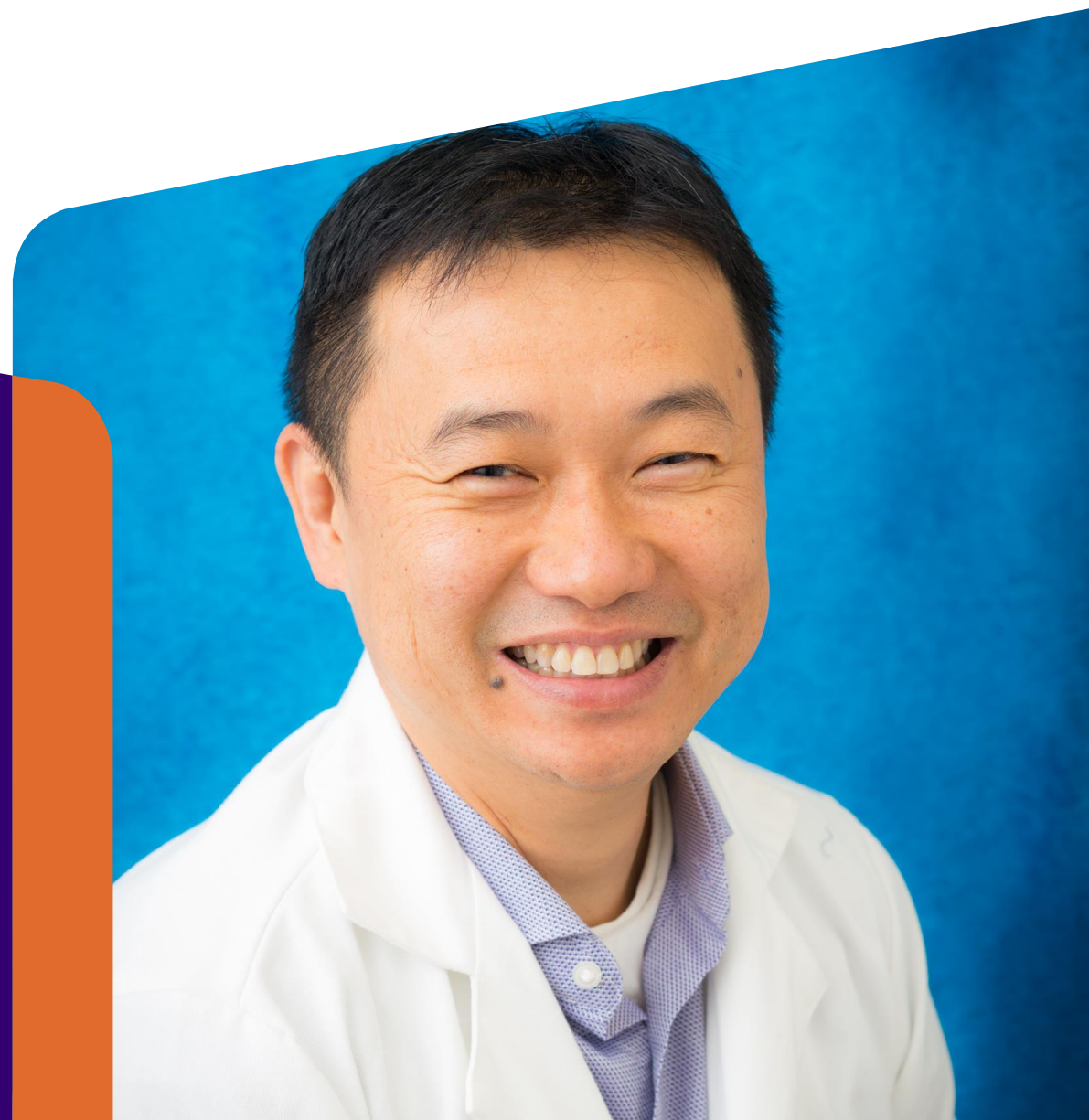
Kevin Khai Tieu, M.D., F.A.C.O.G.

Contact Info:

Thao Ngo, RN IV, BSN, IBCLC, PHN

Phone: (714) 378-7833

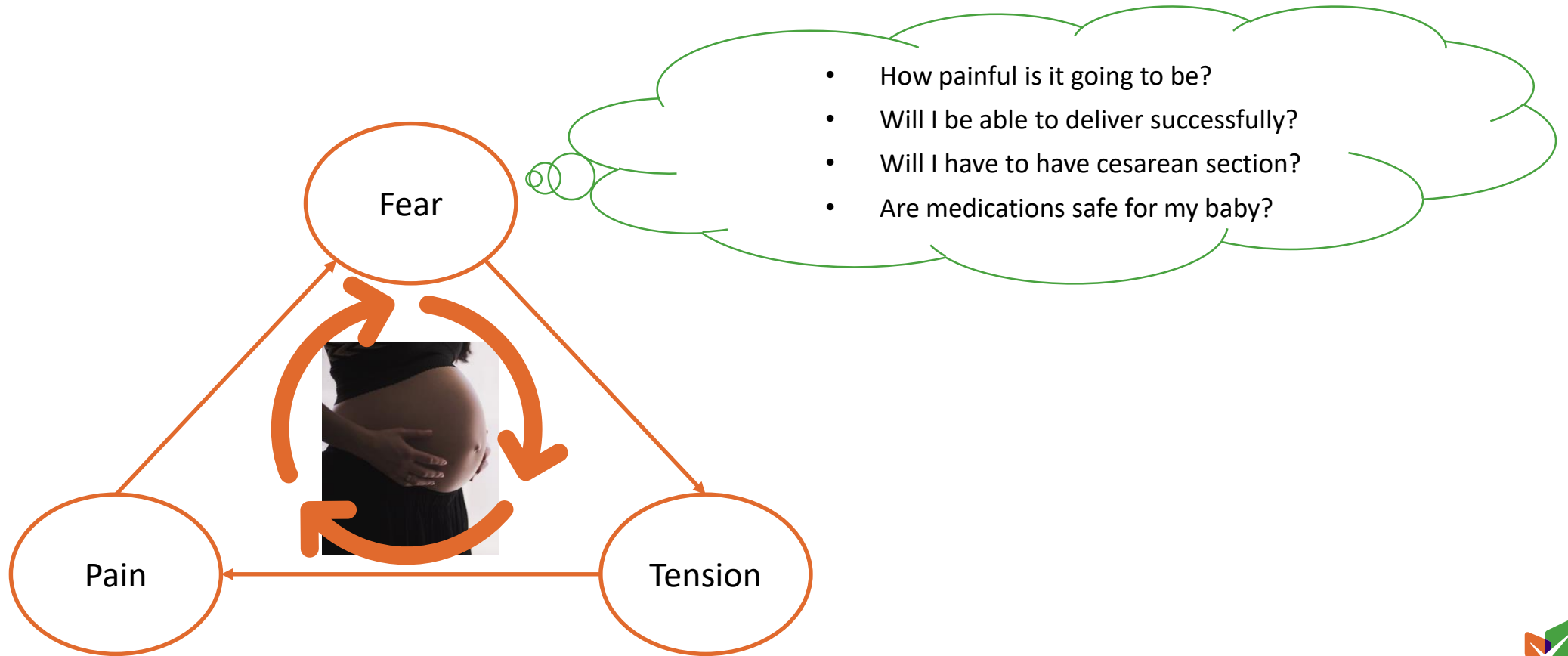
Email: tngo7@memorialcare.org



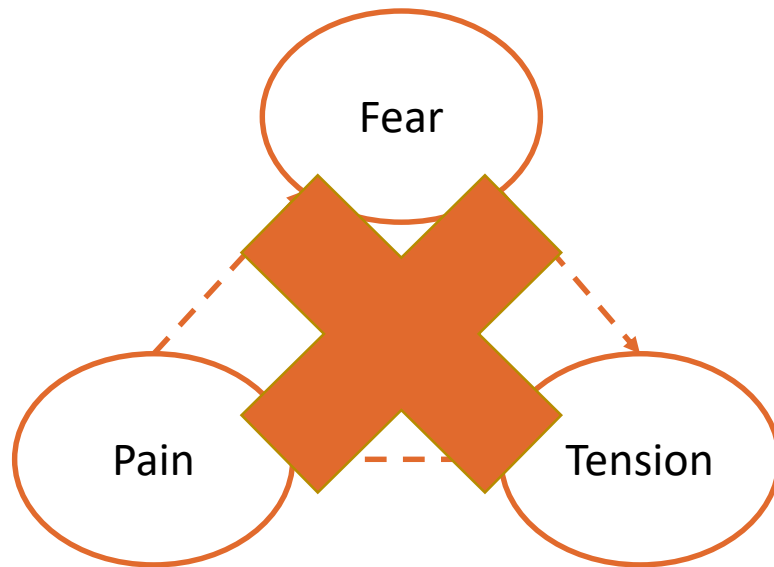
Agenda

1. Fear – Tension – Pain Cycle
2. Signs that labor is near
3. Signs that you are in labor
4. How to time your contractions
5. What triggers the start of labor
6. Stages of labor
7. Labor positions
8. Comfort techniques
9. Patterned breathing during labor
10. Cord blood

Fear – Tension – Pain Cycle




How to Break the Cycle



- Take antenatal classes
- Take a hospital tour

- Understand the labor and delivery process
- Learn about the medications to help labor and pain management

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- Smooth and safe pregnancy and delivery
 - Remarkable birthing experience

Signs that Labor Is Near

Emotional signs

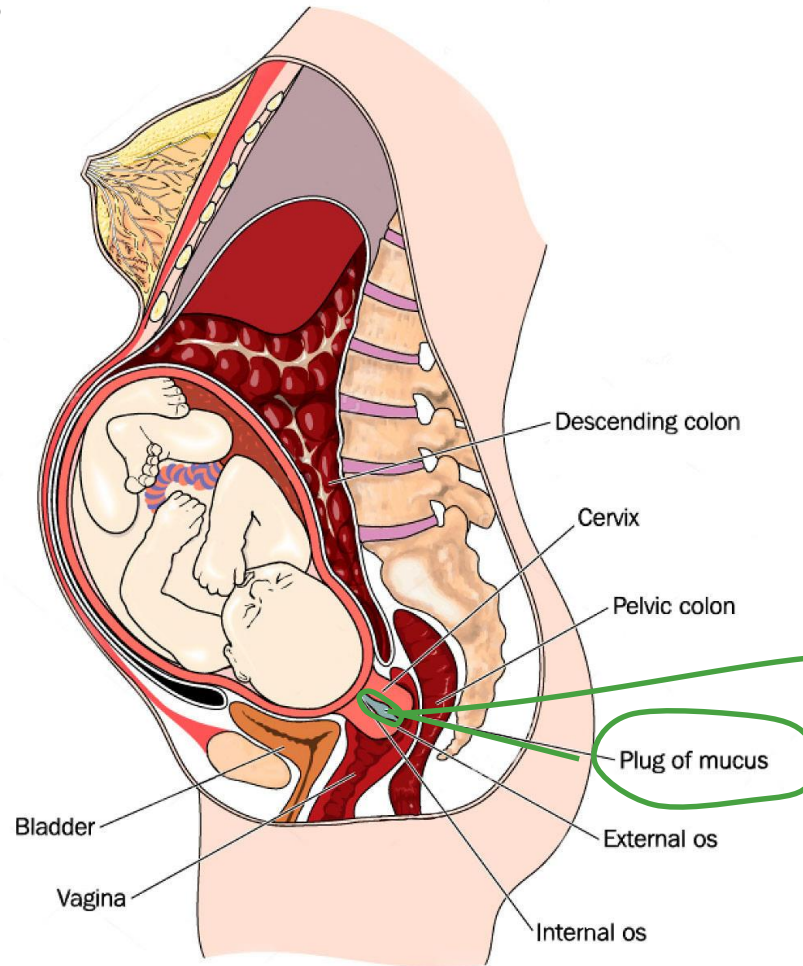
- Nesting: Urge to get home ready, to clean, and to organize

Physical signs

- Release of the mucous plug
- Your baby drops lower into the pelvis.
- Your joints feel looser.
- Having Braxton-Hicks contractions

Physical Signs: Release of Mucus Plug

- Thick collection of mucus that accumulates in your cervix during pregnancy
- Blocks the opening of the cervix
- Contains natural antibacterial chemicals
- Protects your baby
- Clear or pink
- Sticky, gelatinous



Physical Signs: Baby Drops Lower into the Pelvis

- Called “lightening”
- Feel more bladder pressure
- Have a hard time walking
- Breathe better



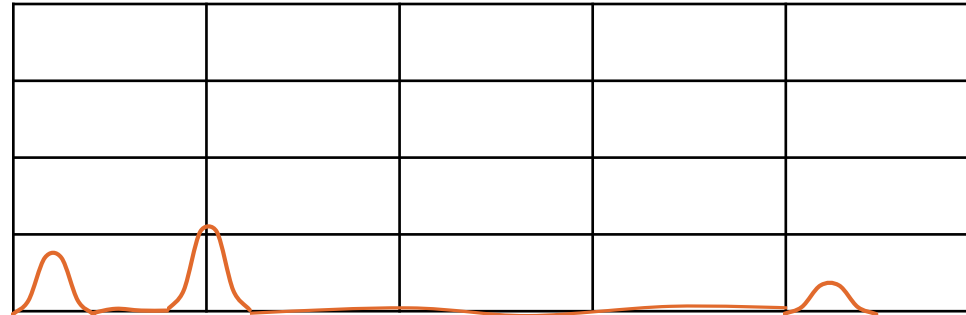
Physical Signs: Joints Feel Looser

- “Relaxin” hormone allows the ligaments of the pelvic bone to relax and stretch.
- Feel a little unsteady or clumsy



Physical Signs: Having Braxton-Hicks Contractions

- Also known as false labor contractions
- Practice contractions
- Not regular, unpredictable
- Feel like menstrual cramps



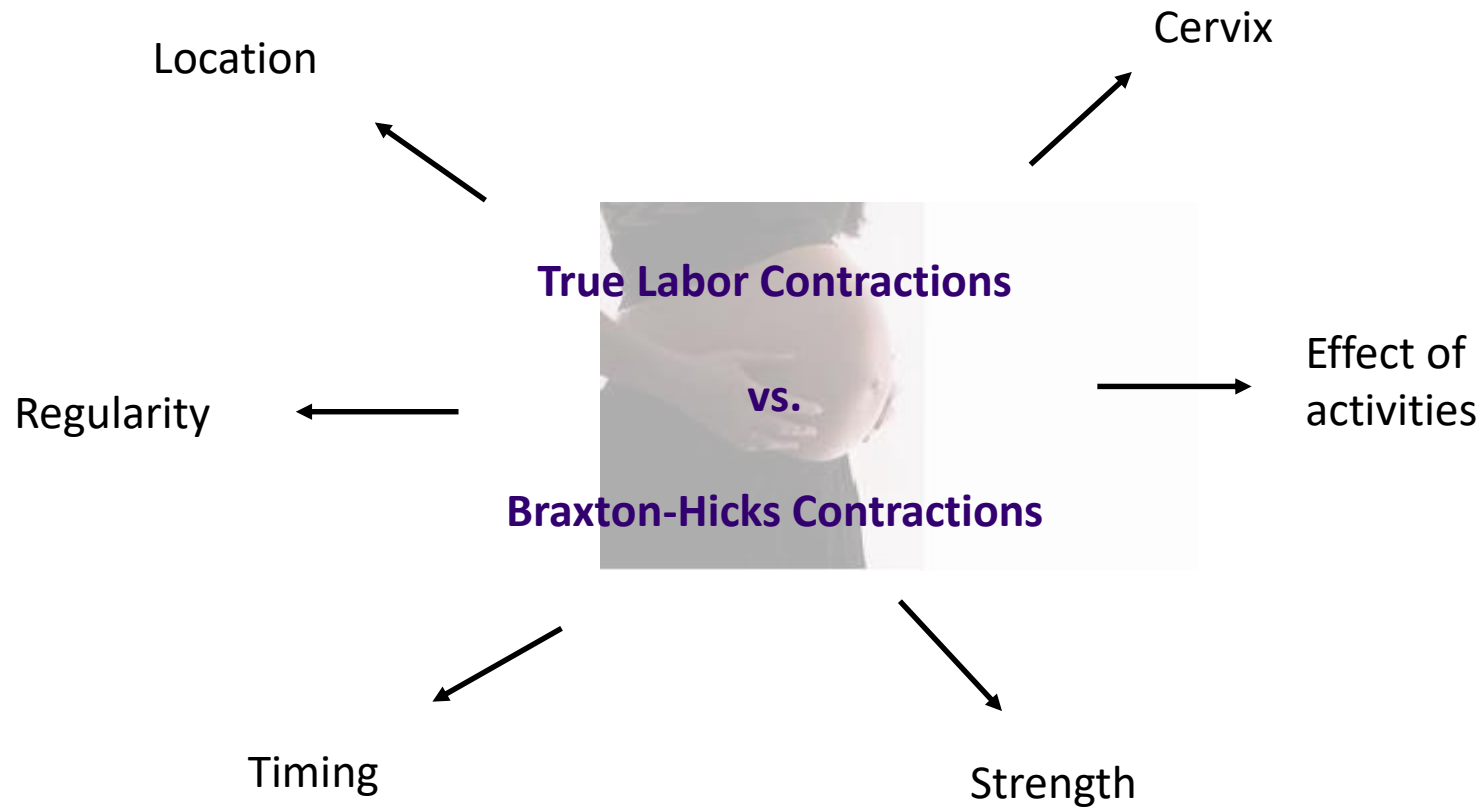
Am I in Labor?

There are three common signs:

- True labor contractions
- Water leaking
- Vaginal bleeding



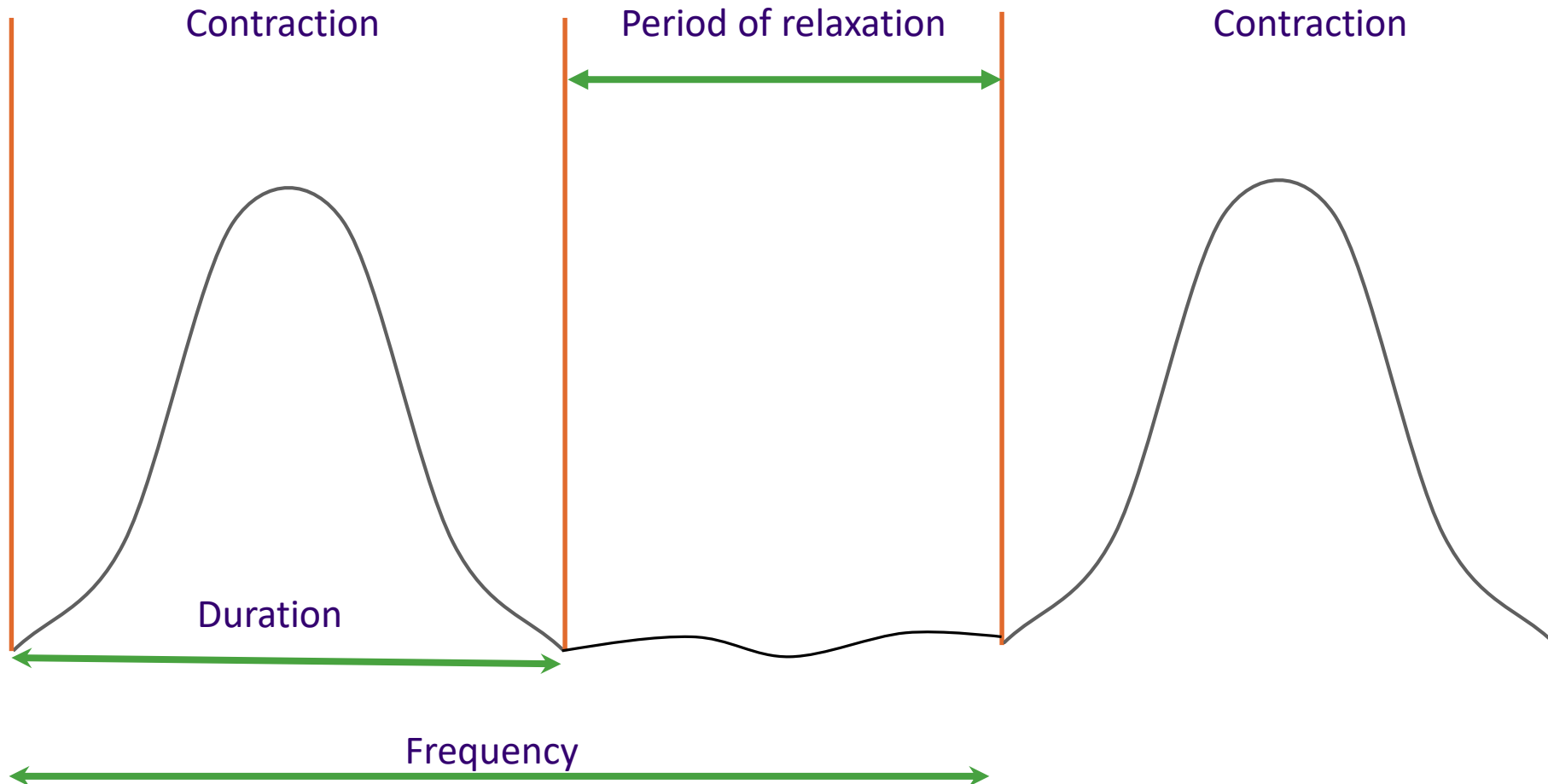
Labor Contractions



The Difference between True Labor Contractions & Braxton-Hicks Contractions

	True Labor Contractions	Braxton-Hicks Contractions
Location	Tighten the entire uterus. Start in the back and move to the front	Tighten portions of the uterus
Regularity	Regular	Irregular
Timing	Every 3-5 minutes Last about 30-70 seconds Become closer over time Last longer over time	Do not get closer together Last a few seconds Do not have a pattern
Strength	Increase over time	Don't get stronger over time, usually weak
Effect of activities	Do not stop	May decrease or stop
Cervix	Cause the cervix to thin and open	Do not cause the cervix to change

Timing Your Contractions



Water Breaking

Color

- Clear, pink tinged
- Green: baby had a bowel movement inside your womb
- Yellow: urine
- White or yellow: vaginal discharge

Odor

- Odorless or slightly sweet smell
- Fishy odor: infection
- Ammonia: urine

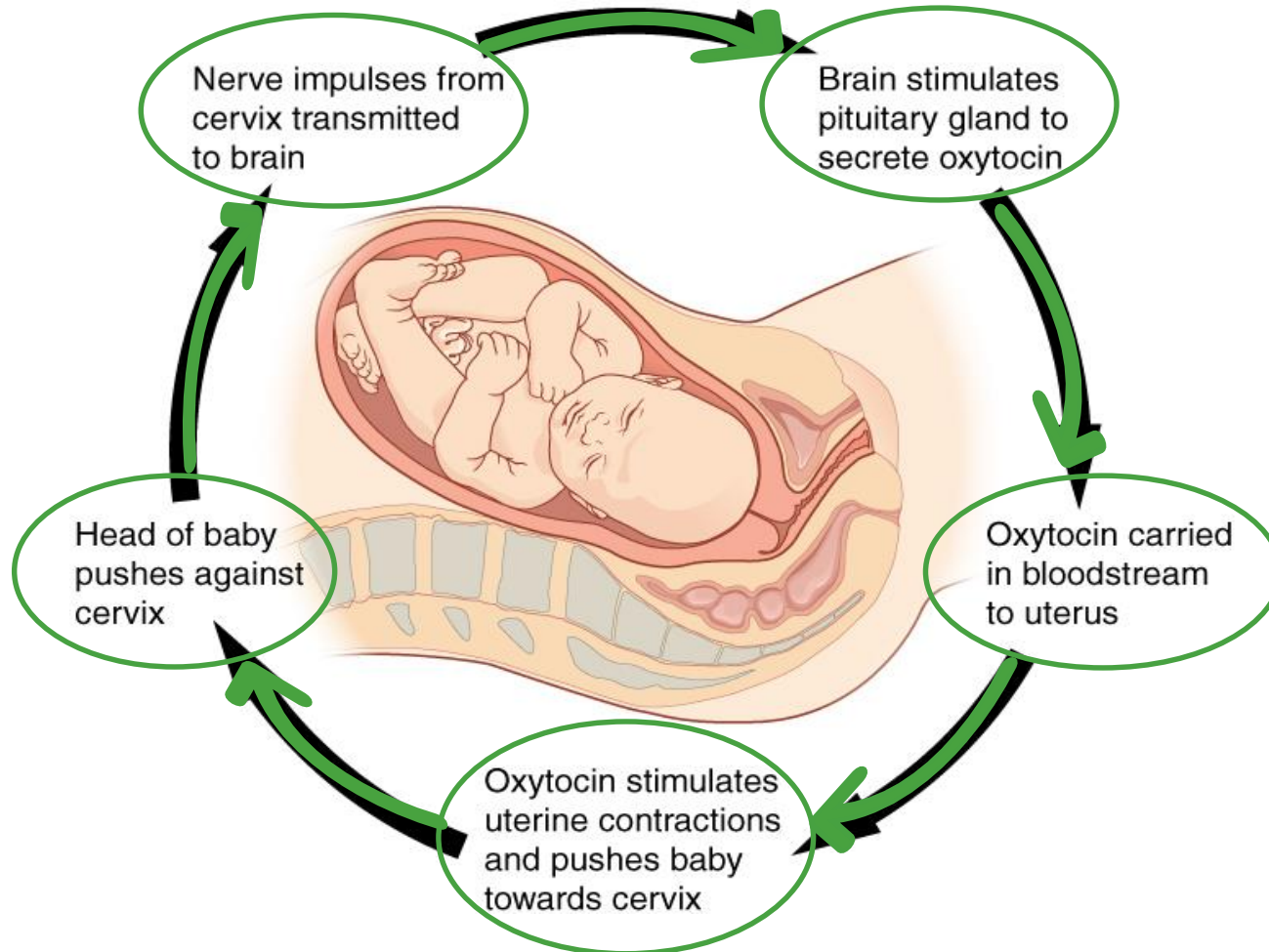
Amount

- A gush
- Slow leak

Time Interval

- Stand-up test
- Water continues to leak

What Triggers the Start of Labor?



Dilation and Effacement

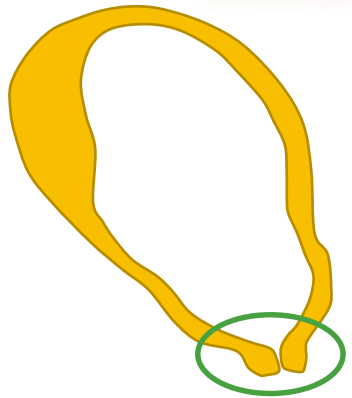
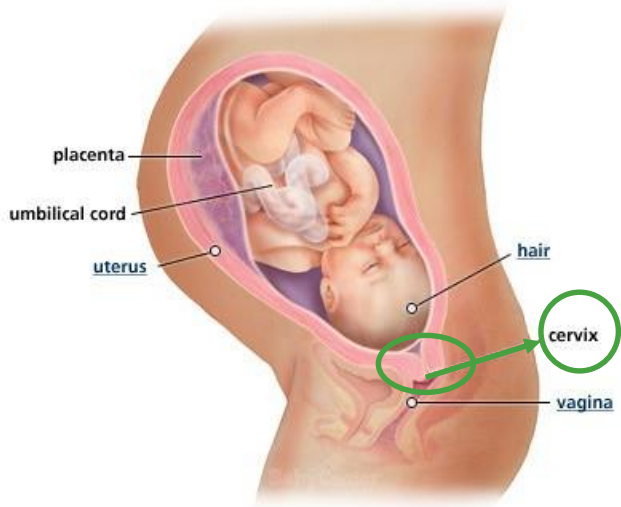


Figure A
Cervix is closed, 0% effaced, 0 dilated

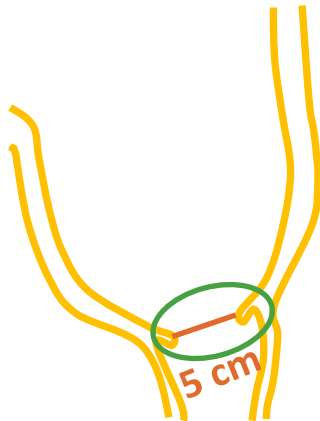


Figure B
Cervix is completely effaced, 5 cm dilated

Effacement

- The process of thinning of the cervix
- Expressed as a percentage from 0 to 100%

Dilation

- The process of opening of the cervical canal
- Measured in centimeters from 0 to 10 cm

Contractions

- Cause your cervix to efface and dilate
- Help baby descend into the pelvis

Stages of Labor

1st Stage

Cervix is dilating from 0 to 10 centimeters.

2nd Stage

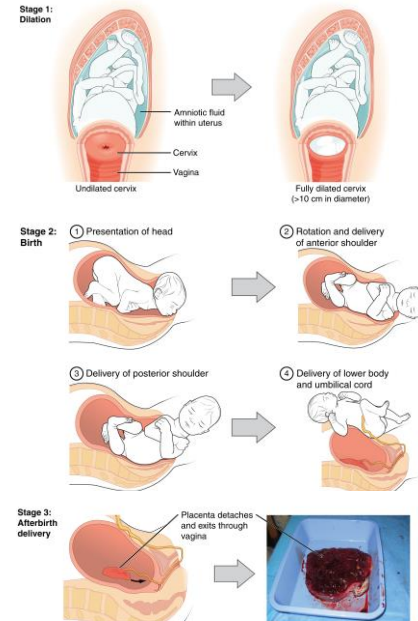
Birth

3rd Stage

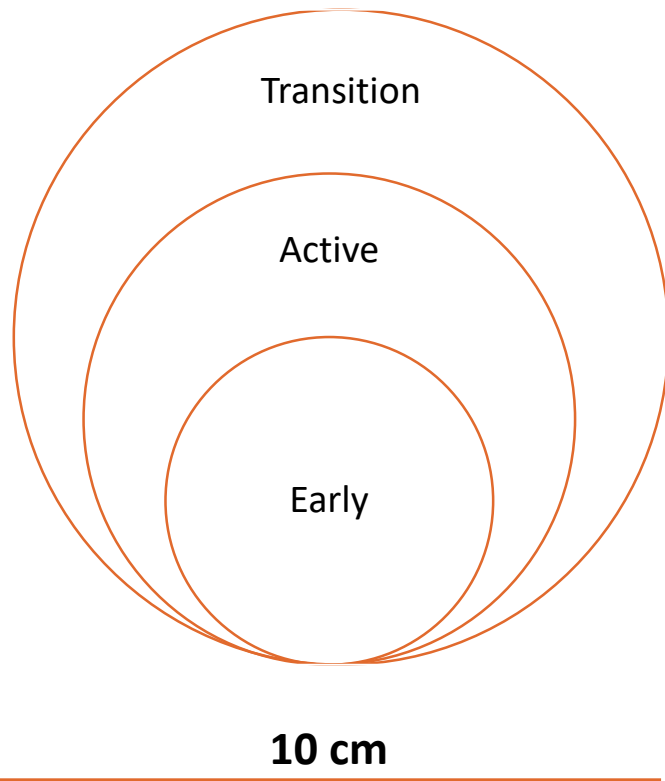
Placenta delivery

4th Stage

Recovery



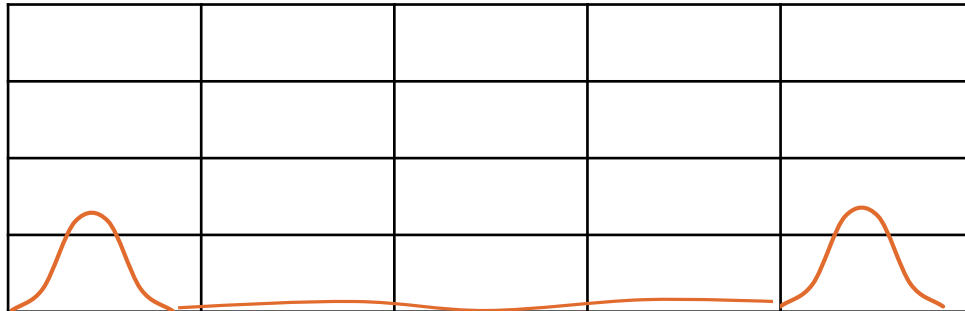
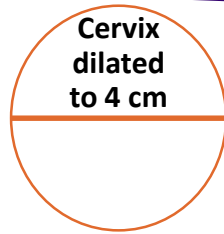
1st Stage of Labor



- Divided into phases that are dependent on dilation
- There are different levels of pain and interventions in each phase.
- Your cervix dilates to 10 cm at the end of this stage.
- Time to dilate can vary
 - First-time mom: 12-18 hours
 - Experienced mom: 6-8 hours
- Baby starts to turn and descend.

1st Stage of Labor: Early Labor

Mild contractions



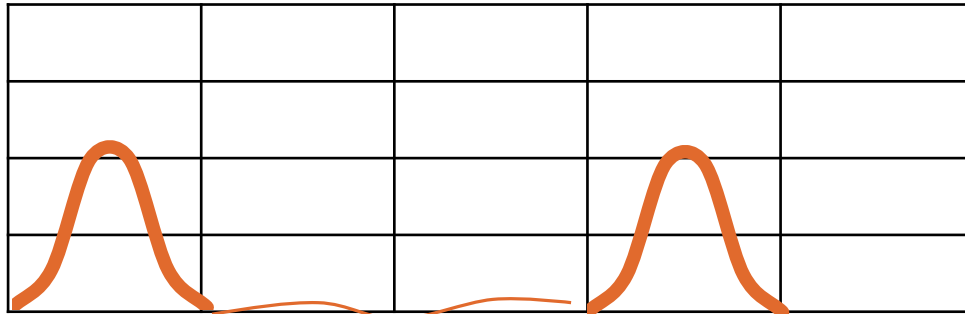
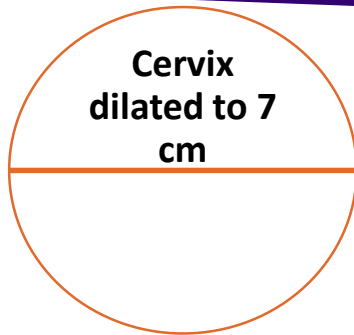
30-45 seconds

5-30 minutes

- Contractions become progressively stronger, last longer, and become closer together over time.
- Time can vary from hours to days.
- Able to function normally
- Try to relax
- Drink a lot of water, eat light meals or snacks
- Your support coach can help time your contractions, keep you company and create a calm environment.

1st Stage of Labor: Active Labor

More
uncomfortable
contractions



45-60 seconds

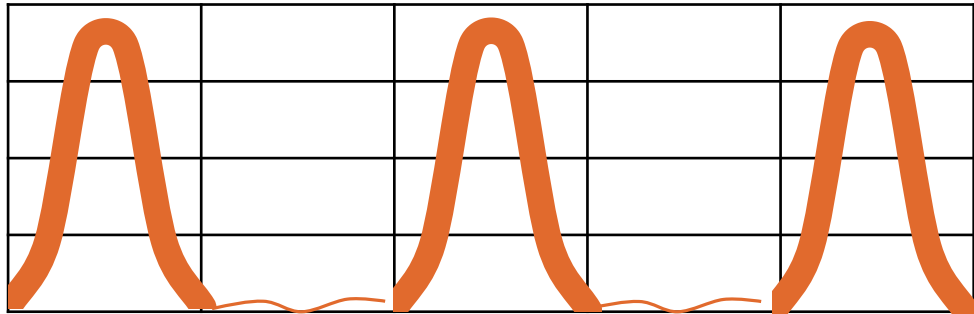
3-4 minutes

- Last 4-8 hours
- Leg cramping, nausea, pressure in the pelvis & rectum
- Water bag may break.
- Sit upright, walk if possible
- Liquid diet, ice chips as needed, NO solid foods
- Your support coach can assist with positioning, breathing techniques, and comfort measures.

1st Stage of Labor: Transition

Most
uncomfortable
contractions

Cervix dilated
to 10 cm



45-60 seconds

1-3 minutes

- Shortest phase
- Shaking, nausea, chills, more pressure in the pelvis & rectum
- Ice chips only
- Your support coach can assist with positioning, breathing techniques, and comfort measures.

Positions for the 1st Stage of Labor

Being active during the first stage of labor helps:

- Labor progress.
- Baby move into the optimal position.

Positions for the 1st Stage of Labor (Cont.)



Positions for the 1st Stage of Labor (Cont.)



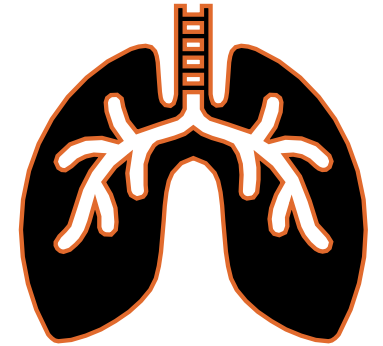
Positions for the 1st Stage of Labor (Cont.)



Labor Breathing Patterns

Benefits

- Focused on labor
- Helps cope with the pain
- Give you a sense of control
- Increased oxygen provides more strength and energy for both mother and baby.

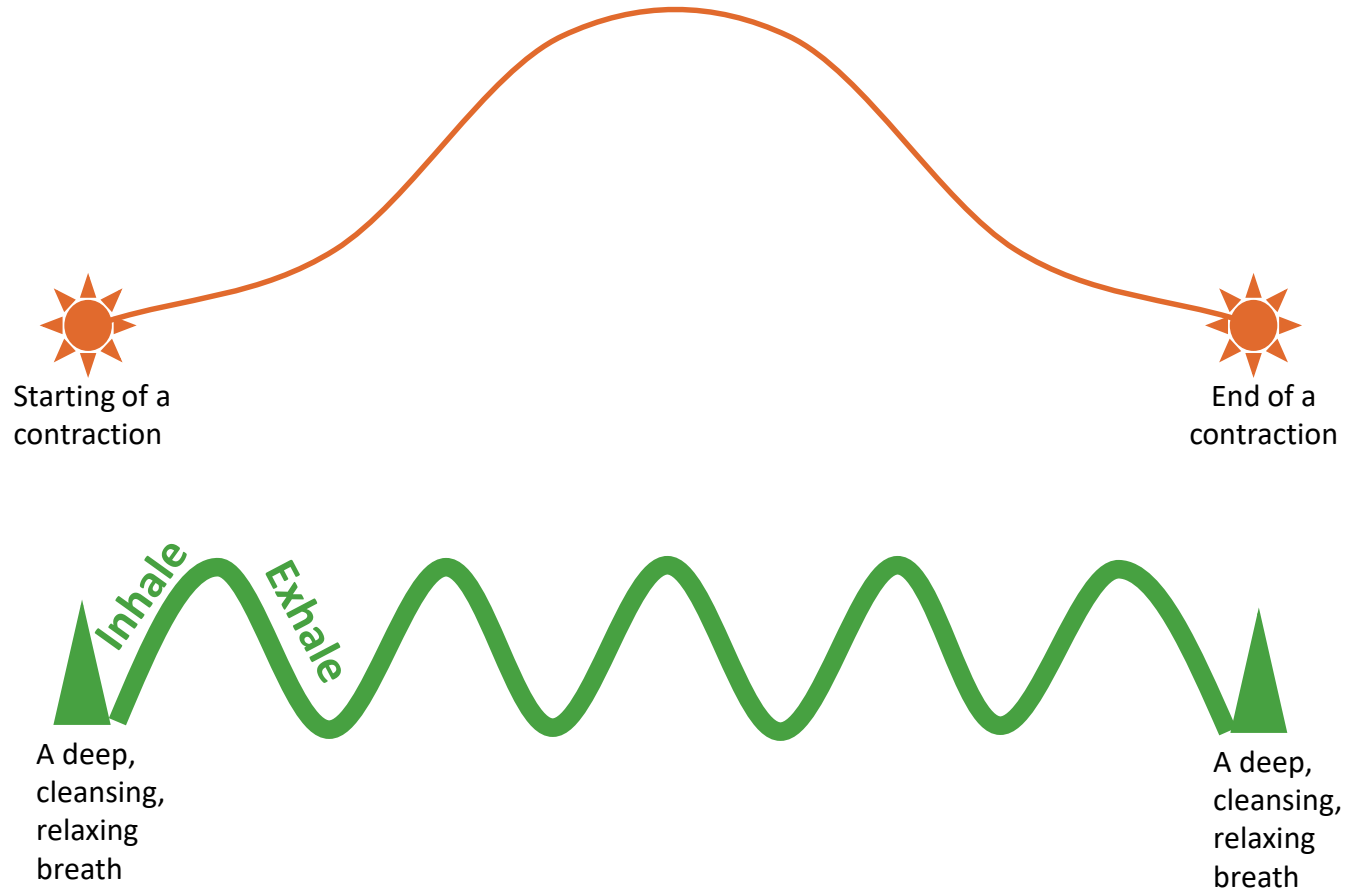


Patterns

- Slow breathing
- Light accelerated breathing
- Variable breathing

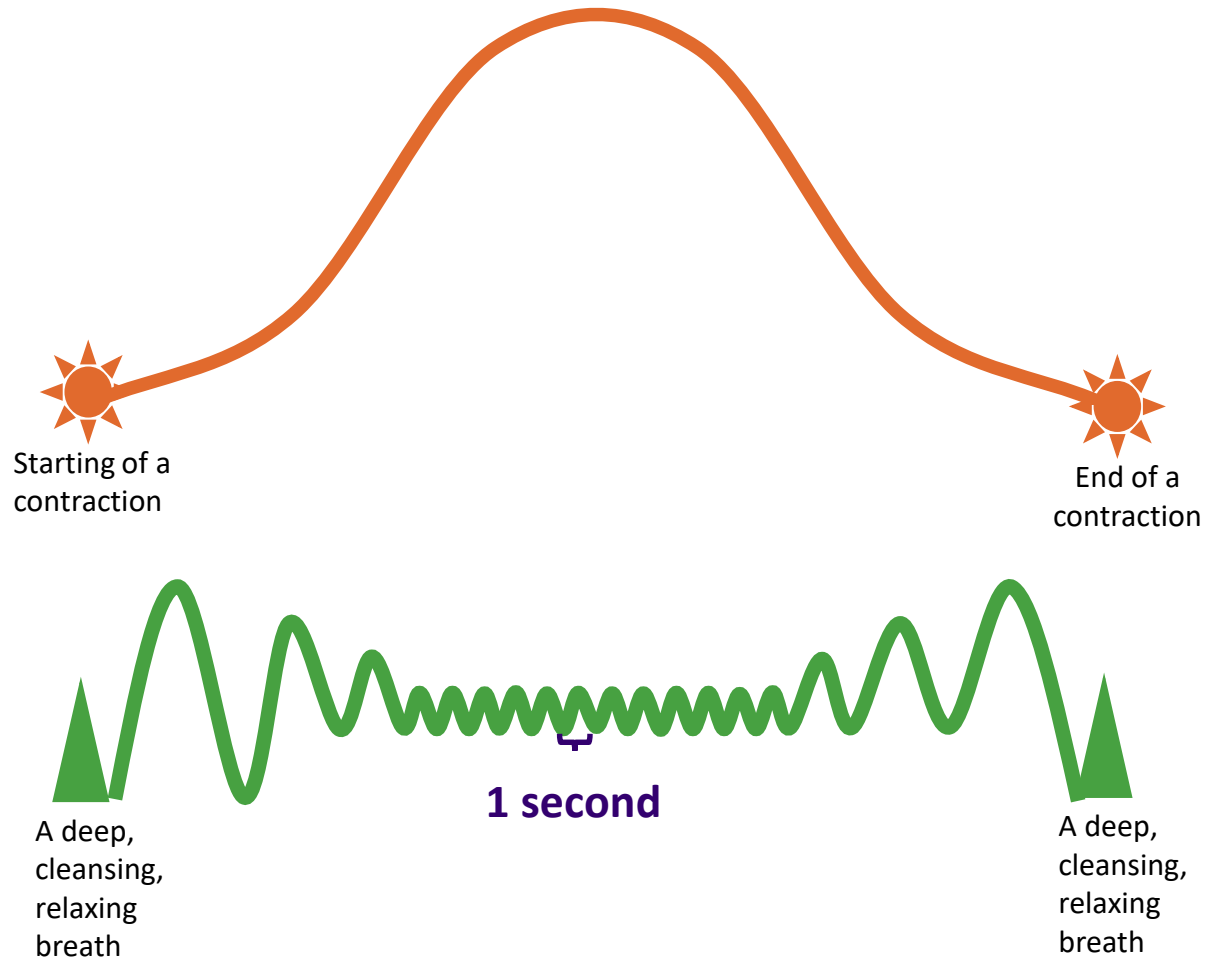
You should practice patterned breathing before going to labor.

Slow Breathing



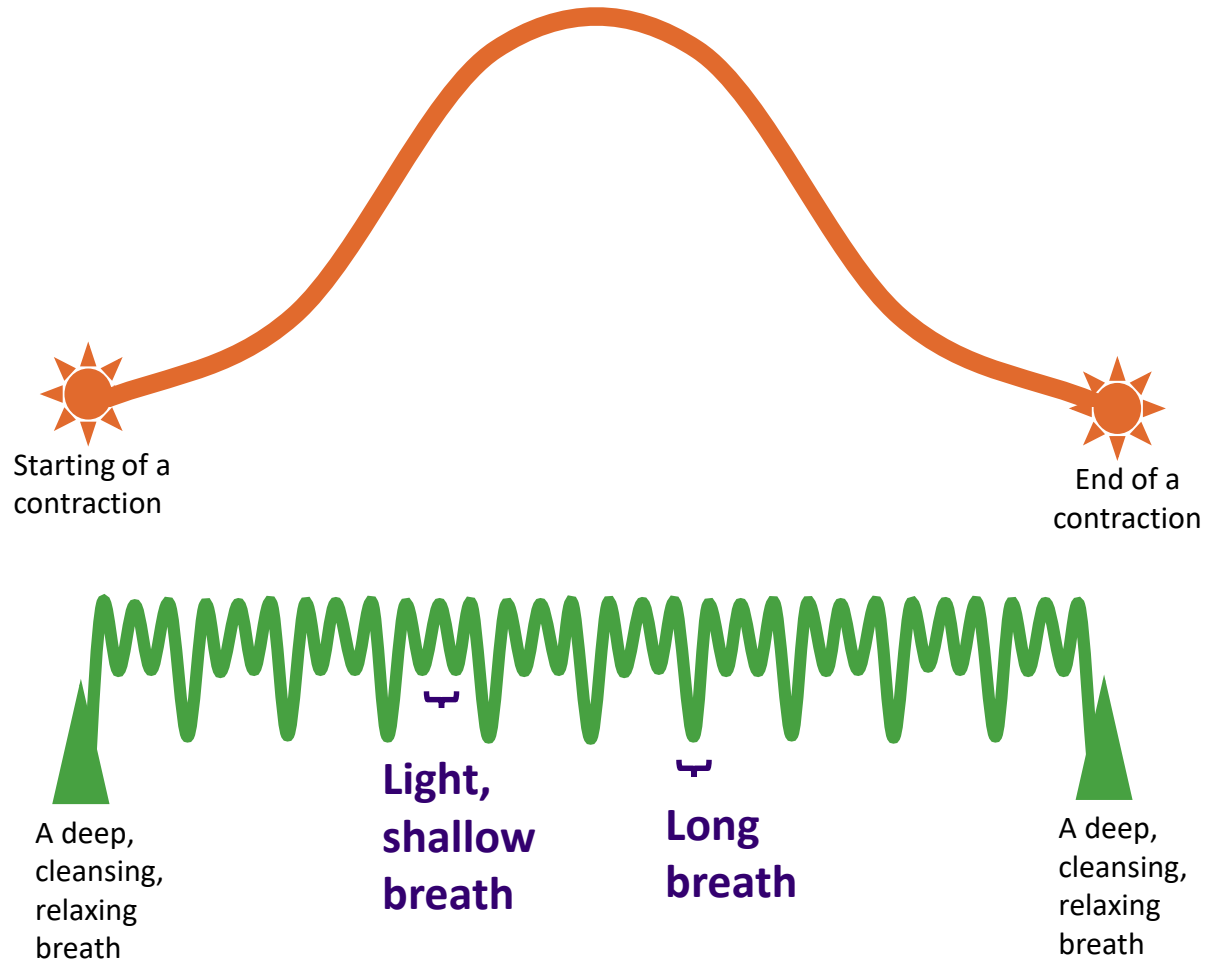
- When contraction starts, take a deep, cleansing, and relaxing breath.
- Slowly inhale through your nose.
- Slowly exhale through your mouth.
- When the contraction ends, take a deep, cleansing, and relaxing breath.

Light Accelerated Breathing



- When contraction starts, take a deep, cleansing, and relaxing breath.
- Slowly inhale through your nose.
- Slowly exhale through your mouth.
- Accelerate and lighten your breathing as the contraction intensifies.
- Toward the peak of your contraction, increase your breathing rate. Keep it shallow and light at a rate of one breath per second.
- As the contraction decreases in intensity, slow your breathing rate gradually.
- When the contraction ends, take a deep, cleansing, relaxing breath.

Variable Breathing



- When contraction starts, take a deep, cleansing, and relaxing breath.
- Breathe through your mouth in light shallow breath at a rate of 1 breath per half to 2 seconds.
- Blow out a long breath after every second, third, fourth, or fifth breath.
- When the contraction ends, take a deep, cleansing, and relaxing breath.

Prolonged Labor

Definition

- Prolonged labor: When labor stalls, or when the cervix does not change over a certain period of time.

Causes

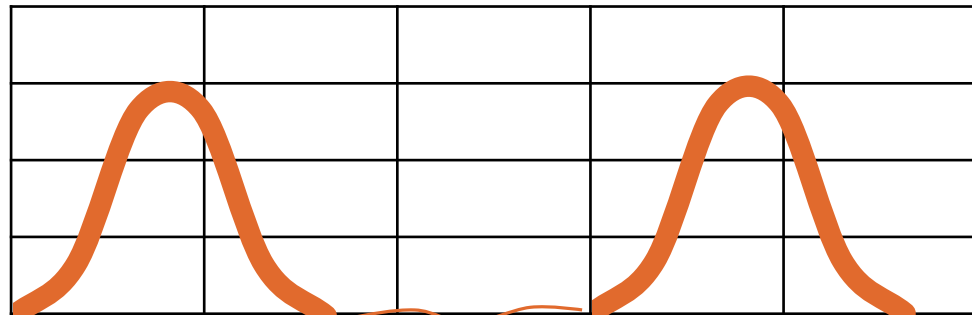
- Contractions are not strong enough.
- Baby's position is not optimal.

Augmentation techniques

- Walking
- Changing positions
- Emptying your bladder
- Massaging

2nd Stage of Labor: Birth

Less intense
contractions



45-90 seconds

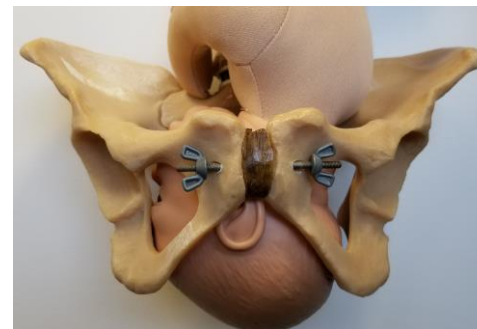


3-5 minutes

- Last from 20 minutes to 2 hours
- Strong pressure in the pelvis & rectum
- Ice chips only
- Your support coach can help with back support, holding the legs, breathing techniques, and comfort measures.

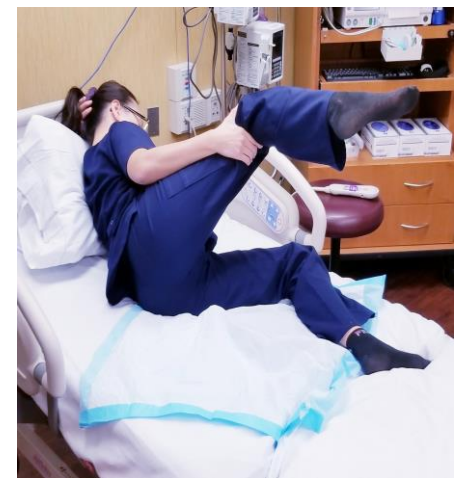
2nd Stage of Labor: Laboring Down

- Laboring down is the process of allowing the uterus to contract and bring the baby down the birth canal.
- Allowed for 1 to 2 hours
- Each laboring patient is unique.
- Fetal heart rate status, maternal health, and length of labor determine the optimal timing to start pushing.



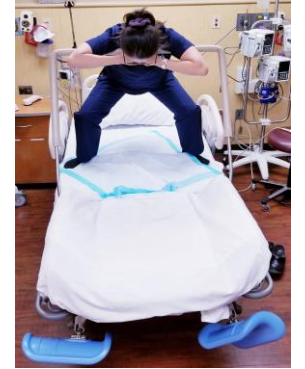
2nd Stage of Labor: Pushing Position

With an epidural



2nd Stage of Labor: Pushing Position

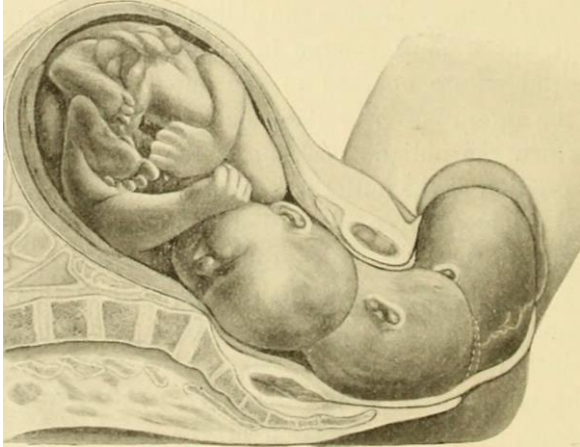
Without an epidural



2nd Stage of Labor: Breathing during Pushing

- **Don't practice this at home.**
- Use this technique only at the time instructed by your labor and delivery nurse.
- Breathe comfortably until the urge to push or your contractions starts.
- Take a deep breath and hold it while bearing down for 7-10 seconds.
- Your goal is to push 3 times with each contraction.
- After bearing down, exhale any remaining air and breathe comfortably until you feel the next strong urge or contraction.

2nd Stage of Labor: Birth



The birth of your baby

- Your baby's head will engage with the pelvic floor.
- Head will descend and flex.
- Your baby will rotate to find the most optimal position.
- Baby's head can extend and deliver out of the birth canal.
- Birth time is when the entire baby is delivered.



Benefits of Skin-to-Skin Contact

For your baby

- Stable heartbeat and breathing
- Better body temperature maintenance
- Improved brain development
- Stable blood sugar
- Cry less often
- More successful breastfeeding
- Better able to absorb and digest nutrients
- Improved weight gain



Benefits of Skin-to-Skin Contact (Cont.)

For mom

- Bonding with your baby
- More positive breastfeeding
- Improved breast milk production
- Less postpartum bleeding
- Lower risk of postpartum depression



Benefits of Skin-to-Skin Contact (Cont.)

For dad

- Bonding with your baby
- Feeling more confident as a father
- Feeling of protectiveness towards the baby
- Help regulate the baby's temperature and heartbeat

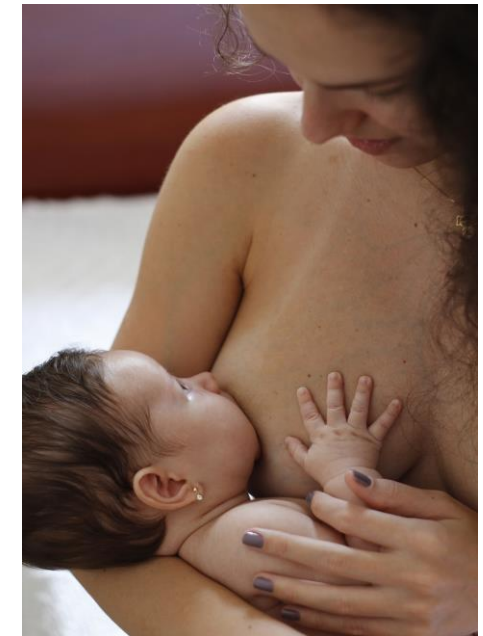


3rd Stage of Labor: Placenta Delivery

- Shortest stage
- Lasting from a few minutes to 20 minutes
- Shaking and shivering are common.
- Skin-to-skin contact with your baby is highly recommended.
- Try to relax and enjoy the result of all your hard work.

4th Stage of Labor: Recovery and Breastfeeding

- Shaking and shivering are common.
- Use a warm blanket, if needed.
- Relieved, but exhausted
- May feel pain from the contractions or from the repair
- Place an ice pack in the perineum.
- OK to slowly eat or drink at this time.
- Skin-to-skin contact and breastfeeding are important during this stage.



Benefits of Breastfeeding

Breastfeeding

- Start within the first hour after delivery
- Ensure your baby receive the first milk which is rich in protective antibodies and nutrients

Benefits of breastfeeding for mom

- Provides more confidence
- Closeness with your baby
- Lower risks of breast and ovarian cancer
- Help lose pregnancy weight
- Help your uterus shrink back to normal faster and your body heal faster



Benefits of Breastfeeding (Cont.)

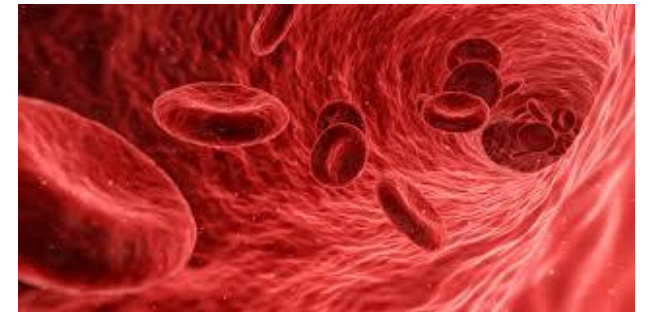
Benefits of breastfeeding for baby

- Reduce risk of infection
- Reduce diarrhea, upset stomach and constipation
- Protect against allergies and eczema
- Lower risk of SIDs
- Higher IQ score
- Help prevent obesity
- Increase survival rates



Cord Blood

- Blood remaining in the umbilical cord after delivery
- Rich in newborn stem cells called Hematopoietic stem cells
- Hematopoietic stem cells can be used to treat more than 70 types of diseases.
- A child's stem cells CANNOT be used to treat genetic diseases in that child.
- Have an option to collect and store the cord blood and umbilical cord tissue
- Cord blood banking can be public or private.
 - Public cord banks: Used by anyone who matches
 - Private cord banks: For a family member



Cord Blood (Cont.)

Steps must be done prior to collection of the cord blood

- Choose a cord banking company and register.
- You must bring a collection kit to the hospital.
- A consent needs to be signed.
- The cord blood and cord tissue are collected after delivery of the baby.
- It's a painless process.
- **Issue:** Not enough blood may be collected in preterm or emergency deliveries.

Thank you.

References Page

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