

Your birth: How do you deal with pain?



ow that you are pregnant you may wonder about things. For instance the pain involved in giving birth. How bad will it be? What if you cannot handle it? Do they give you something for the pain? Giving birth hurts. This is a simple fact. But every birth is different. And one woman can handle pain better than the other. So no one can predict how much pain you will experience. But do not worry too much: there are many ways to relieve the pain. With or without medication. At home and in the hospital. That is the subject of this leaflet. In this leaflet we list everything that may help you.

A few facts about contractions and pain

• Your body produces painkillers

'The pain of giving birth' (The pain caused by the contractions) is special: you only feel this pain when you are giving birth. The pain tells you that labour is about to start. This is how you know that you have to look for a safe and quiet place. And help. Did you know that your own body immediately responds by making its own painkillers? These are the so-called endorphins. The endorphins ensure that you feel less pain.

• The pain comes in waves

The pain of labour is caused by contractions. A contraction is a uterine muscle contraction. You can compare such a contraction with a wave washing ashore. In the beginning, you feel the wave of pain coming. Just before the wave breaks, the pain is at its worst. Then the wave retreats and you feel the pain becoming less. Between the contractions your abdomen relaxes.

• The pain is not always as bad

In the beginning of your birth there is more time between the contractions. In the beginning they are not so painful. After a while, the time between contractions becomes shorter. The contractions are more powerful and they hurt more. Finally, you have pushing contractions which can be very painful right before the birth. When your baby is born, the contractions stop and you feel no more pain. You only have some light cramps that loosen the placenta.



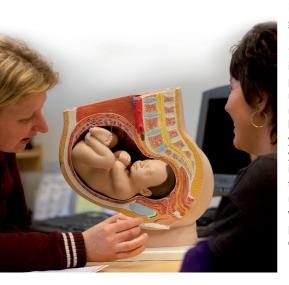
There are abdominal contractions and back contractions

Some women find the pain bearable others find the pain unbearable. We do not know yet why this is felt so differently. This may partly be caused by the location of the pain. Most women mainly experience pain in their abdomen during the contractions. But some women feel the pain mainly in their back or their legs. Sometimes the location of the pain shifts. Back contractions hurt more than abdominal contractions according to some women.

This you can do yourself before the birth

Arrange for someone to be with you to support you

Did you know that women with good support feel less pain during the birth? They also have less need of pain treatment with medicines. That is why it is very important to consider very carefully who you want with you when you give birth. Discuss this in advance with your midwife. Only your partner or also your sister, a friend, your mother: it is all possible You can decide what you want most. Choose someone you do not have to keep up appearances for. Someone you feel comfortable with. And tell the person who will support you in advance about your wishes. Then later you can focus all your energy on handling the contractions. Of course your midwife will support you as well during the birth. Sometimes you receive extra support from an maternity assistant.



Prepare yourself well

Read leaflets, magazines and books about giving birth. Find information on the Internet. Please see kiesbeter.nl for the decision aid 'Pain during labour'. Ask your midwife for information. Take a prenatal course and start practising breathing techniques. Later this will make it easier for you to relax and that way relieve the pain. Then you know what will happen and what you can do about it. It gives you more control and more confidence that you can handle the birth. almost every woman is scared and anxious when labour starts. But try not to give in to that fear because it will make you feel stressed. This makes the pain worse and the contractions cannot progress properly. Your body also produces less endorphins when you are scared.

Rest well

Ensure that you are sufficiently rested before labour starts. Get enough sleep. Rest well in the last weeks of your pregnancy and take time for yourself. Because when you feel rested it is easier to handle the pain.

Tips to deal with pain

• Find distractions

Do not pay too much attention to the pain in the beginning. The contractions are usually very bearable at first. Continue doing what you are doing for as long as possible. Find distractions. For instance reading, watching television or listening to music.

Try out various positions

When the contractions become stronger and start to hurt more it can be more difficult to relax. Then go to a place where you feel comfortable and try to find the best position to relax in. For instance, you may stand to handle a contraction while you move your hips a little or lean on a table or a chair. With back contractions it may feel good to go on your hands and knees. You can also sit on a stool and lean forward on the table. Or do you prefer to lie down? Then try lying on your side and maybe put a pillow between your legs. Or put

a pillow under your abdomen and your back. Walking around can be pleasant too. Just try and find out what you like best! Take care not to tense up or hold your breath when the pain comes. This makes it difficult to relax. Let everything hang as loose as possible and keep on breathing calmly. You will feel less pain if you do.





Take care to be nice and warm

The warmth helps to relax. So, ensure that the temperature in the room is pleasant. Put on warm clothes you feel comfortable in. When you are lying down you can put hot water bottles under your abdomen and your back. A hot bath is also a good idea. Many women like to sit under the shower with the flow of warm water from the shower head aimed at their abdomen or back. The warm water helps you to relax which makes you feel the pain less.

Count down: each contraction is a contraction less

Think positive. Believe that you can handle it. Always try to think: this contraction has passed and will never return. And do not be angry with yourself if it is not going well for a bit. There are moments when the pain overwhelms you and you break down a little bit. Let the midwife (or whoever is with you) encourage you. Then pick up where you left off. With every contraction remember that you are one step closer to the end. Count down instead of up. Think of the moment after birth when you can hold your baby.





Concentrate on your breathing

When you follow the rhythm of you breathing you are less focused on the pain. This helps you to relax and to handle the contractions. So, keep on breathing calmly. Breathe in and slowly out counting to four.

Get a massage (or not)

A massage of your lower back or legs can be pleasant when the contractions grow stronger. It distracts you from the pain and prevents your lower back from stiffening up. Some women like someone to push their two fists constantly against their lower back. Try it out and tell the people around you what you like and what you do not like. Maybe you do not want anyone to touch you and you prefer to be left alone. Tell the people around you how you feel!

What else can you do at home to manage the pain?

'Alternative' treatments

At home, you can only receive treatments without involving medicines. For instance, acupuncture, hypnosis, aroma therapy (scents), water injections and acupressure. But these treatments are not very often used for births. They are not available in all regions. Are you interested? Ask your midwife which treatments are available in your neighbourhood and which treatments are not and ask her in time.

Birth TENS

Birth TENS (Transcutaneus Electrical Nerve Stimulation) is in general available. This works as follows. You give yourself mild electric impulses through a machine. You operate the machine yourself - this gives you a feeling of control. And you control how strong the impulses are. The electric impulses enter your body via electrodes (wires taped on your back). This is a prickly or tingling feeling, comparable to cold hands that tingle when they become warm again. Birth TENS does not take away all the pain but it does reduce the pain for some women. It has no harmful effects on you or your baby.

What can you get in the hospital to alleviate the pain?

You can also get medicines against the pain. For medicated pain control you always have to go to the hospital. This is because when you receive medication your heart beat, blood pressure and breathing have to be monitored constantly. The condition of your baby also has to be monitored (registration of the heart beat by means of a cardiotocogram or CTG). The equipment required for CTG is only available in the hospital. Ask your midwife in advance about the possibilities in your area and how you have to arrange this type of pain control. Here you can read about the most important methods and the advantages and the disadvantages of these methods. This can help you to choose if required. You have to realise that it applies to any medication, that side effects for your baby in the long term have not been examined thoroughly.

The following treatments are most applied in the Netherlands:

- spinal puncture (epidural analgesia)
- Injections with pethidine
- Pump with remifentinal

• Spinal puncture ('epidural')

A spinal puncture is an injection in you lower back with a combination of analgesic medicines (the medicines vary from one hospital to another). With this pain treatment you no longer have any pain in the lower part of your body. The anaesthesiologist inserts a needle in your lower back under regional anaesthesia. You have to arch your back and lie or sit still (also during the contractions). Through the needle a thin and flexible catheter is inserted in your back. The needle goes out again and the catheter remains. Through this catheter analgesic medicines are administered during the entire birth. Within 15 minutes you no longer feel any pain.

Advantages of an epidural:

- Most women (95%) feel no pain during the contractions.
- As far as is known, an epidural has no harmful effects on the baby or nursing babies.
- You do not become sleepy or drowsy from an epidural and you are fully aware of the birth.
- Sometimes you can give yourself analgesic medicines through a pump (this is called 'patient-controlled epidural analgesia').

Disadvantages of an epidural:

- Very seldom an epidural only works on one side. And for about 5% of the women the pain is not less or barely less. This may be caused by the location where the needle is inserted and the dose of the medicines. The epidural is then sometimes performed again.
- The birth, in particular pushing, takes longer. This gives more chance of a birth with a suction cup or vacuum pump (a 'vaginal assisted birth').
- The contractions have to be supported by medicines more often.
- You are not allowed to leave your bed because you have less feeling in your legs. The feeling will slowly return after the administration of the medication has been stopped. With a lower dosage you have more feeling in your legs and sometimes you are able to stand, walk and also push.
- A drip is inserted to prevent you from developing low blood pressure.
- Usually you will get a bladder catheter because of the epidural it is more difficult to feel when you have to urinate. After the delivery the catheter is removed again, together with the catheter in your back.
- Your body temperature may rise because of an epidural. Then it may be difficult to determine whether this is caused by the epidural or if it is a fever caused by an infection. Sometimes you are given antibiotics just to be sure. There is a chance that your baby after examination is admitted to the paediatric ward by the paediatrician and will also be treated with antibiotics.



- Sometimes it is not possible to get an epidural immediately and at any time (so 24 hours a day). Ask your midwife how this is arranged in hospitals in your area.
- You may experience an itch. This can be treated by adjusting your medicines.

Injections with pethidine

Pethidine is administered by means of an injection in your buttock or your thigh. Pethidine is like morphine. It works within half an hour. Other than an epidural pethidine does not take away all of the pain. According to many women it does numb most of the pain. Pethidine works for 2 to 4 hours. Because of the side effects for your baby pethidine is not administered at the end of the dilation stage.



Advantages of pethidine:

- Pethidine can be administered in every hospital at any given time.
- About 50% of the women are satisfied with the painkilling effect achieved.
- Pethidine can make you feel sleepy or even fall asleep. This can be pleasant if you are tired from the contractions: you can rest for a while.
- Pethidine may give you some relief when you are waiting for an epidural.

Disadvantages of pethidine:

- Pethidine does not work very quickly. It takes half an hour for the pain to subside.
- About 25-50% of the women feel a reduction in the pain.
- You may become nauseated, drowsy and sleepy. It is possible that you are less aware of the birth.

- You are not allowed to walk around because the chance of you falling is increased when you are sleepy.
- Your child may become drowsy from the pethidine. This may cause difficulty breathing in particular if the pethidine has been administered shortly before the birth. Sometimes babied need an injection to be able to breath freely again.

Pump with remifentinal

The new drug remifentanil is a morphine-like substance administered by means of a catheter inserted into an arm vein (drip), which is attached to a pump. You can control the amount of remifentanil yourself with a push button. The pump is designed so that you cannot give yourself too much.

Advantages of remifentanil:

- Remifentanil works in 1 minute.
- Remifentanil relieves pain better than pethidine (but not as well as an epidural).

Disadvantages of remifentanil:

- Remifentanil may influence your breathing and the amount of oxygen in your blood.
- With remifentanil there is a small chance of apnoea of the mother. That is why you and your baby continuously have to be monitored carefully when using this medicine.
- Remifentanil is not yet available in every hospital. First, they need more information about the medicine and possible side effects.

What can your midwife do for you?

Prepare you for the birth

Your midwife will do everything possible to prepare you for the birth and to let the birth go as smoothly as possible. Be sure to inform her of your wishes and worries. Your partner may of course be present. Your midwife will tell you which pain treatments there are, where they are and the advantages and disadvantages of the various treatments. Good preparation may reduce your fear and insecurity. You feel more like you have everything under control. So you begin the birth process full of confidence.

• Steering you safely through the birth

Your midwife is medically schooled and will constantly keep an eye on you and your baby. So you are in good hands.

During the birth, she will guide and support you as good as possible, taking your wishes into account. Since she has carried out many births she knows exactly what to do to alleviate the pain. She regularly asks you how it goes, encourages you and gives instructions on how to handle the contractions to you and your partner. She tells you how far along you are and what will happen next. You can ask her anything and tell her all your concerns and wishes.

Arrange pain relief if you want

When do you have to tell her that you want pain relief? If you know you want it for instance because you find it difficult to handle pain, then discuss this with your midwife. She can determine with you what is the best moment to go to the hospital. But often you do not know beforehand. When you give birth at home, it may become clear during birth that you do want medicine against the pain or that the midwife feels it is advisable. Of course she will discuss this with you. For a medicated pain treatment you always have to go to hospital. Usually, your midwife will accompany you to transfer the care to the gynaecologist or the hospital midwife.

Anymore questions?

Do you have any more questions after reading this leaflet? Then be sure to ask your midwife. Because your midwife can tell you everything about easing the pain, pain treatments with or without medication, the advantages and disadvantages of pain treatments and the possibilities in your area. She is there for you.

Do you want to read more about how to prepare

for your delivery? Then please read our leaflet

Your birth: how to prepare for birth?

Or please see www.knov.nl.





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