

Keep Your Water

A Natural Aid to a Natural Birth

If a mother is determined to have a med-free birth experience, I want her to also be determined to keep her water. As doula, if we've helped her to adopt the expectation that "I can do this", we must also help her understand how an early rupture of membranes can sabotage her aspirations. I want her to read about it and decide for herself about early rupture before she goes into labor. Hence Goer in "The Thinking Woman's Guide to a Better Birth" addresses this well in Chapter 6 (subtitled: "If It Ain't Broke, Don't Break It").

In visiting childbirth education classes, I talk about what I see as the five critical factors in having a natural birth. Keeping the amniotic fluid is one of the five. The water serves as a highly effective buffer for pain and can be kept as long as possible for the sake of coping with the intensity of contractions.

When the doctor says, "I'd like to break your water to speed things up a little bit," the laboring mother can say, "No thank you. I'm not in a hurry." At a prenatal couple meeting I advise a couple to respond this way to the proposed AROM to preserve this all important pain cushion to avoid pain medications (all of which cross the placenta). Note that whatever has entered the baby's blood stream is trapped there the moment the cord is cut and has to be detoxified by the newborn.

We have all heard a mother say, "I can't do this" ten to fifteen minutes after the early rupture and request the epidural. "I plan to keep my water and let it break on its own" is an important statement in the birth plan.

While I see this issue often trivialized by doctors and nurses alike, I feel strongly that a mother retaining her water through full dilation is ideal, and it is a key component in achieving a natural birth.

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