



# Bath birth

H1



## 01 Content

Bath birth/ Underwater birth	4
Advantages and disadvantages	5
Contraindications	7
When is a bath birth stopped?	8
Sources	9

## 02 Welcome

This brochure will give you more information about the potential advantages and disadvantages of a bath birth, as well as possible reasons why an intended bath birth sometimes has to take place out of the water anyway. If you still have questions after reading this brochure, you can always contact our gynaecology department.

We hope that after this you can make an informed choice between classic birth or bath birth.

Gynaecology department

## 03

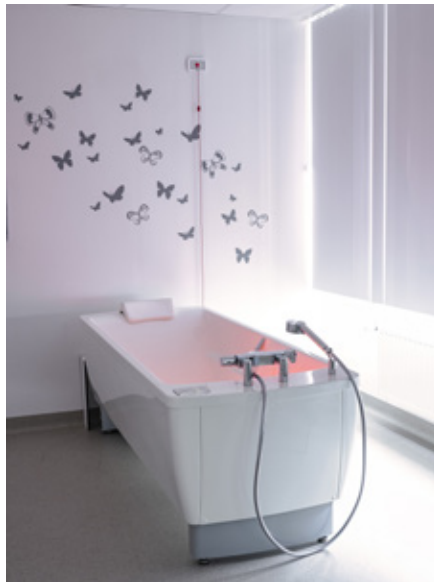
# Bath birth/ Underwater birth

As an alternative to classical childbirth, you can opt for a bath birth or underwater delivery.

It is important that, if you are considering a bath birth, you discuss this with your gynaecologist before the start of your labour and delivery. This way you can be adequately informed about it.

This brochure will give you more information on the potential advantages and disadvantages of this procedure, as well as possible reasons why an intended bath birth sometimes has to take place outside of the water anyway. If you still have questions after reading this brochure, you can always contact our gynaecology department.

We hope that after this you can make an informed choice between a classic birth or bath birth.



## 04 Advantages and disadvantages

To date, there is insufficient evidence-based data (= data from scientific studies) on the pros and cons of underwater birth to support or advise against this choice.

Below we summarise the potential benefits and risks, as well as reasons why giving birth in the bath may not be the best choice for some mothers.

### Advantages

The use of hot water during labour and childbirth is seen as positive by many women.

- Better relaxation
- Freedom of movement
- Less pressure on pelvis and muscles
- Increased production of endorphins = body's own hormone with pain-relieving properties
- Reduced use of medical painkillers including epidural anaesthesia (= lumbar puncture)
- Sense of control during labour
- Greater satisfaction



## Cons

### Newborn

At the population level, there is no evidence of increased adverse outcomes in the newborn such as infection, admission to intensive care, lower APGAR scores, among others.

However, some rare but serious complications in the newborn after bath birth have been reported in the past.

- Infections in newborns with bacteria from water e.g. Legionella, Pseudomonas, ...
  - Water aspiration: when a newborn would inhale underwater and thus get bathwater in the lungs.
    - It is assumed that the baby's "diving reflex" also prevents the baby from breathing underwater at birth. This is partly because the water is the same temperature as the mother. However, if the baby does struggle during birth, the diving reflex can be drowned out by "gasping" or violent inhalations, which can still result in aspiration (inhalation of bathwater).
  - Umbilical cord rupture - severing of the umbilical cord.
    - After birth, the baby must be placed from the water on the mother's belly. Sometimes the umbilical cord is too short to bridge this distance, which can cause it to tear. If not noticed in time, this may be accompanied by blood loss in the baby.
  - More difficult follow-up of fetal heart tones to verify fetal well-being.
- Moreover, the position in the bath makes it more difficult to intervene quickly in case of certain complications such as:
- Imminent fetal distress
  - Shoulder dystocia: difficulty tracking the shoulders during birth
  - Umbilical cord entanglement
  - Short umbilical cord

### Mum

- Control of the perineum (= skin between vagina and anus).

- Due to the position in water, the gynaecologist/midwife has less control over the perineum and possible need and possibility of cutting to prevent tearing.
- However, at the population level, no more severe tears (grade 3 < = with damage to the anal sphincter muscle) occur with classical delivery vs bath delivery.
- Harder to estimate amount of blood loss after delivery because of mixing with bath water.
- Water embolism (= water entering the mother's blood vessels) due to backflow of water into the uterus after delivery.

Again, the position in the bath makes it more difficult to intervene quickly in case of certain complications with the mother. Some examples:

- Mother becomes unwell in bath
- In case of heavy bleeding

## 05 Contraindications

However, not everyone is eligible for a bath birth. In case one or more of the criteria below apply to you, a bath birth is not recommended.

- Stressful obstetric history = Problems in a previous delivery
  - Shoulder dystocia = difficulty tracking shoulders after birth of head
  - High birth weight
  - Grade 3 < rupture of the perineal/ anal sphincter muscle
  - Postpartum haemorrhage
  - Caesarean section

- Criteria current pregnancy
  - High blood pressure/preeclampsia (HELLP)
  - Gestational diabetes with insulin
- Pregnancy <37 weeks in labour and delivery
- Breech position
- Multiple
- Abnormal position of the placenta (previa = in front of the cervix)
- Baby's low estimated birth weight (= IUGR, weight <p10)
- Baby's high estimated birth weight (= macrosomia, weight p90<)
- Pregnancy complications:
- Infection:
  - Fever, temperature 37.5°C<
  - HIV, hepatitis B, hepatitis C, herpes
- Course of labour/birth
  - Strong meconium-containing amniotic fluid
  - Slow progress of dilation (= opening of the cervix)
  - Slow progress of birth during pushing
  - Signs of foetal unwellness - during tracking heartbeats
- Relative contraindications : influence on possibility of bath birth is determined by the gynaecologist
  - Gestational diabetes with diet
  - GBS carrier
  - Slightly meconium-containing amniotic fluid
  - Obesity (BMI 30kg/m²<)
  - Pregnancy scholastasis
  - Prolonged ruptured membranes

06

## When is a bath birth stopped?

At any time during the course of labour and delivery, the gynaecologist or midwife may ask you to get out of the bath.



Possible reasons for this are:

- Slow progress of dilation (= opening of the cervix)
- Slow progress of birth during pushing
- Signs of foetal unwellness - we notice this in the heart tones
- No optimal temperature of bath water - too hot or too cold
- Abnormal temperature in patient - too hot (hyperthermia) or too cold (hypothermia)
- Uncontrollable soiling of bath water e.g. with bowel movements
  
- Urgency during labour or delivery
  - Severe blood loss
  - Patient becomes unwell
  - Shoulder dystocia - difficulty tracking the shoulders during birth
  
- After childbirth:
  - Before the birth of the placenta
  - For suturing any perineal tear/cut

## 07 Sources

- "Immersion in water during lab edge delivery", ACOG Committee Opinion Number 679, 11/2016.
- "Hot water immersion during labour and birth," RANZCOG 07/2017.
- Cochrane database syst Rev 2009 Apr 15.

## **Informed consent for bath birth - underwater delivery**

I, the undersigned, .....

- confirm that I have received, read and understand the patient brochure "bath birth".
- will follow all tips and advice before and during labour and delivery as requested.
- confirm that I was explained the possible pros and cons of a bath birth.
- confirm that I could ask additional questions to the doctor and received a clear answer to them.
- declare that I myself request to give birth in bath/underwater.
- know that the midwife and/or gynaecologist can ask to leave the bath at any possible time during labour or delivery and that it is not guaranteed that I will be able to give birth effectively in the bath.

This consent form is kept in your patient file.

Retrieved from: ...../ ...../ .....

Signature and stamp gynaecologist:

Patient signature preceded by "Read and approved":

**Be sure to also take a look at our webpage. Scan the QR code below:**



# Notes

A series of 20 horizontal dotted lines for writing notes.







## Questions?

In the first instance, contact your GP. If the GP refers you or cannot be reached, you can contact:

maternity (ward H1)  
tel: 011 69 98 40

gynaecology secretariat  
tel: 011 69 94 85

[www.sint-trudo.be/en/departments/maternity](http://www.sint-trudo.be/en/departments/maternity)



Diestersteeweg 100 • 3800 Sint-Truiden  
[www.sint-trudo.be](http://www.sint-trudo.be)

Follow us on   