

Is natural childbirth dangerous?

by Henny Ligtermoet

Dr. Eva Reich, the wellknown American doctor, has spent some months in Australia travelling to many places where she has spoken about labour positions, natural childbirth, homebirth and baby massage, following in the footsteps of Elisabeth Noble, an Australian physiotherapist, who has made a name for herself in America, also promoting natural childbirth and homebirth.

Both ladies drew huge crowds which once again pointed to the public interest in the management of childbirth. Both ladies showed a remarkable film of squatting births, which birth position in practiced in a hospital in Brazil with great success. The film was indeed remarkable: the women there all practice squatting during their pregnancy.

Five births were shown with the mothers just pushing gently, looking very comfortable and composed in the squatting position and having some back support. All the babies were born quickly with very little if any tearing of the perineum and the most remarkable thing of all was that no-one touched the perineum or the baby's head at all during the birth.

Not until the babies were completely out, lying between the mothers' legs, did the attendants or the mother pick them up and looked them over. No hands at the perineum, no pulling at baby's head, just let nature take its course. And afterwards no worry about the placenta: it comes, completely, by itself.

Eva Reich also had some slides of Dr. Michel Odent's work in France, where similar methods are used, the difference being that the mothers there are encouraged to spend most of their labours in a pool of water. There too is very little tearing, no interference with or worries about the placentas.

Nature does it all, resulting again in very little instrument deliveries and Caesarean sections. Even inductions are very rare because Dr. Odent checks the color of the amniotic fluid if the mother is later than her dates would indicate. He uses a little instrument, an old and safe method of checking amniotic fluid which does not

necessitate piercing the membranes like with amniocentesis.

If the fluid is clear he lets the mother go; he keeps checking regularly and if the fluid keeps a clear color there is no danger, if it is troubled, he either induces or does a Caesarean section. But both complications are very, very rare.

What a contrast to an entirely different attitude coming to us from Britain in an article in the British Sunday Times (February 28) which mentions a statement by a Professor Ian Craft of the Royal Free Hospital in Hampstead, who no longer will 'allow' women to have their babies without drugs of anaesthetics. He claims that that is the attitude of many other hospitals in Britain: Doctors feel that natural childbirth is less safe and less convenient (the article does not say convenient for whom!) than so-called 'high-technology childbirth' where the woman gives birth lying on her back, often wired up to electronic monitoring equipment and anaesthetised to varying degrees. Pros. Craft told a lady who wanted to have a natural childbirth that he was not prepared to use natural methods until they were proved to be as safe as those currently in use.

Such a statement seems to be entirely back to front, as high technology childbirth has not been proved to be as safe as the advocates of it would like it to be. Yet there seems to be a world wide push by many doctors towards this unproven high technology methods despite warnings in medical journals that high technology has its dangers. Even low technology has, as evidenced by various drug tragedies starting with thalidomide causing deformities in babies whose mothers took the drug trusting their doctors' advice that it was safe; through Desstylboestrol causing cancer in daughters whose mothers took the drug to prevent miscarriage and who again trusted their doctors' assurance that it was safe, to the present news on Debendox. Debendox taken for morning sickness has for years been suspect of causing deformities in babies.

Dr. William McBride who exposed the thalidomide danger, has for some years held Debendox under suspicion.

Debendox however continued to be declared safe by the authorities. Last week a news item informed us that a component had been taken out of Debendox because it had no use. As the same component had been taken out in America about three years ago because

of its suspect action, why was the public not told of the real reason for the change in Debendox components? Dr. McBride a day earlier had said in a news item that drug taking by women in pregnancy was not safe.

To keep the public in the dark about any dangers of drugs, however well-meaning such policy might be, is not a very responsible attitude; the public is entitled to know the truth. And is it not much better to keep educating the public that no drug taken during pregnancy unless in a real emergency situation, is safe?

Is it not much better to educate pregnant women that morning sickness, if it occurs at all, is a passing discomfort, that eating easily digestible healthy foods, or having a dry biscuit or a glass of water before getting out of bed in the morning or even chewing on a piece of well-scrubbed lemon peel, may help or at least minimise the discomfort?

Morning sickness will go after a few months and although not nice, it is bearable. To me it would seem to be preferable to the risk of having a deformed child. The controversy about the safety of natural childbirth and high technology childbirth, is not anywhere near finished yet. It is imperative that those who believe in natural childbirth, be it at home or in hospital, let their voice be heard, in order to keep that choice alive.

Sunscreen list defended.

The Director-General of Health, Dr. Gwyn Howells, has defended the safety of Australian sunscreen preparations after recent media reports.

The reports suggested that chemicals called psoralens, allegedly included in some sunscreen preparations, might promote rather than help to prevent skin cancer.

Dr. Howells said none of the sunscreen preparations in the list prepared and distributed by the Commonwealth Department of Health last October contained psoralens.

He said, however, that these agents were present in some products from overseas which promoted sun-tanning and which were not sunscreens.

Dr. Howells said Australia had the highest rate of skin cancer in the world, and sunscreens were of great value in its prevention.

Ascorbate (VIT C) Therapy (Continued from Page 24)

Nutrition, Vol. 34 (1981) penned by Dr. K. H. Schmidt, et al., the opinion was that heavy ingestion of ascorbate had little effect on the level of urinary oxalates. Bang, goes the myth dealing with kidney stones!

Now, very quickly, just a few additional discussion points:

1. A daily intake of 750mg would appear to be the minimum Vitamin C supplement to the diet of hard working young adolescents.
2. One can see an increased level of physical and emotional endurance when there is Vit. C supplementation to the diet.
3. There is some evidence to suggest that ascorbate supplementation actually enhances academic performance and overall levels of student concentration.
4. Ascorbate administered intramuscularly has a therapeutic effect on some allergy, especially that caused by insect bites.
5. The healing of fractured limbs is speeded up

when high doses of ascorbate are taken with the everyday diet.

6. There are strong indications that young adolescents require considerably more ascorbate for everyday healthy living than both older teenagers and people of adult age.

Finally, one may ask: 'What has been the overall effect on the health status of the eighty or so students attending Christian Brothers' Agricultural College, Tardun?' Well, I think the results speak for themselves: for from the period February to early December, 1981, there were only eight students referred by me to an examining physician for purposes of antibiotic cover, and of this number, five had the option of hospitalisation — and this was for several days at the most.

The greatest number of our other referrals were the result of accident, and of the thirteen referred seven were for cases of fracture, three

to eliminate the possibility of fracture and three for varying degrees of tissue trauma. Naturally, there were varying degrees of absence from college because of the nature of the above mentioned injuries.

On the whole though, I've been able to cope with most other conditions without either referral or antibiotic medication. In fact, the number of boarding school days lost by students (i.e. cases that I thought required bed rest and who remained on campus), all together numbered seventy three.

Frankly, such a figure is quite insignificant when one considers that there are over two hundred and thirty boarding school days for each of the eighty students attending this establishment.

This by no means suggests that ascorbate is a cure all, for there are many things that play a part in health care maintenance; but certainly, it appears to have played quite a significant part in the overall health care management of students under my direct care.