

# Risks still too high for home births

Only when there is a perfect way of assessing birth risks prenatally will the Wanganui Base Hospital's senior obstetric gynaecologist, Mr V.J. Hartfield, feel home deliveries are feasible.

In a recent address to the Wanganui Hospital Board, Mr Hartfield said:

"We are looking after two people, and one of them is unable to express itself well. It is difficult to make contact with, except in an indirect way, using a good deal of sophisticated technology. The needs and wishes of mother and baby are sometimes in considerable conflict. Usually the parents will change their behaviour or put themselves at risk for the sake of their baby.

"For example, an emergency caesarean section for fetal distress, which is quite a common indication for this operation, puts the mother at about ten times the danger of a normal delivery, and she is taking on this danger for the sake of her baby, who would probably not survive unless the operation is done. However, the baby could still be born by the normal way, though it would probably be a stillbirth.

"It brings up an interesting legal point about rights. A similar point is brought up after birth, where for example, a very unsuitable solo parent continues to look after her child instead of it being given a very much better environment by being placed for adoption.

"I fear the fetus still takes second place in the minds of many mothers, particularly the very young. However, I feel the media must take some of the blame for this, in that they do not always help to educate us in the right way.

"If I may give a recent example, we are whipped into a frenzy over 245-T and the possibility of it causing fetal abnormalities. It very possibly does, either via the father or the mother or both, but fetal damage must be fairly

would be well proved by now.

"We have front page news and much worry generated over this, yet we have known for many years that maternal and possibly paternal smoking and drinking of alcohol endangers, deforms and kills babies, but we hear almost nothing of it through our media. Thirty percent of women at conception are smoking and the majority continue to smoke during pregnancy. About 85 percent drink alcohol during pregnancy.

"The congenital deformities produced by heavy alcohol consumption are every bit as bad as those produced by Thalidomide, and of course very much more common.

It has recently been realised that only 30 percent of all conceptions survive the first few days of life, and of the survivors one percent will have a congenital abnormality.

"Without our care, some 10 percent of all normal children would die and from my work amongst people in natural conditions, I can say that one in 200 pregnant women would die in pregnancy or labour. Even in New Zealand, about 30 percent of women have some abnormality, often easily put right. If we are to give optimal care to the fetus in labour, 10 percent of deliveries will be by caesarean section.

"There is growing evidence to support the idea that the first nine months of life in the uterus are of curcial importance for the remainder of life. For example, it used to be thought that most intellectual handicap occurred because of a difficult birth. Nowdays, 95 percent of the damage is done before birth and is nothing to do with birth at all. Sometimes this damage is done many months before birth, sometimes even before conception. This is an immense challenge to us and to paediatricians. Paediatricians are more and more starting to look after their babies before they have left