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The Educated Parent: *There is no place like home!*

By Amy V. Haas, BA, BCCE

Once upon a time a woman sat down to have lunch with her best friend. “I’m pregnant!” she said, “and we’re planning a homebirth!”. “Congratulations!” said her friend, “But are you insane!?!”. “Nope” said the mom to be, “Homebirth is just as safe, if not safer than hospital birth, and it’s much more comfortable”. Smart woman. Sounds like she’s done her homework.

The controversy over home vs. hospital birth has continued to rage over the last 80+ years, as the miracle of birth began to move from the family home to the hospital. It was originally believed that medical science would markedly improve outcomes for moms and babies. In some ways it has – through sanitation, antibiotics, clean drinking water and better nutrition. Certain emergency problems can be solved with medical technology, and sometimes we say “thank goodness we have the technology!”. However, the majority of low risk women and babies do best when left alone to birth at home; with just intermittent monitoring by a certified Midwife.

A 2005 study published in the British Medical Journal[i] found that for low risk women homebirth was a safe and healthy option. Two large studies published in 2009, one in the UK, and one in Canada, both found that birthing at home was as safe as at a hospital for low risk women attended by Midwives. A meta-analysis of the many studies in a ten year or more period, observes the same data results[ii]. Only one poorly controlled analysis found anything different.[iii] It turns out they forgot to eliminate emergency or high risk births from their data.

So what are the issues with homebirth? Safety, pain control, and potential transport are three of the major issues that people ask about.

“What if there is a problem and I need medical care?”

Women who choose homebirth should be carefully screened to ensure that they are low risk and good candidates. This means that they are healthy and have no preexisting problems that might require medical intervention.

Two very interesting facts stand out – medical interventions (especially those that are not truly medically necessary) have risks that cause riskier and more invasive procedures. By birthing at home you eliminate what are called nosocomial (hospital caused) or iatrogenic (doctor caused) side effects. Here’s some food for thought: Data from hospital records show that just walking into a hospital to birth you double your chances ending up with a medically unnecessary cesarean section.

Secondly, as experienced homebirth Midwives know, the rare problems that can occur have warning signs that are quite obvious ahead of time. Proper observation and intermittent monitoring by a trained Midwife will pick up those problems in case transportation to a hospital is necessary. It is common to alert the local ambulance corp ahead of time when having a homebirth, so that they are on standby in case of a problem. Additionally Midwives have protocols as to how far away their patients can be from a hospital - 45 minutes is a common cut off point.

The British Medical Journal study showed that only 12% of women needed to be transferred during labor to a hospital, and 1.3% of mothers, and .7% of newborns need to be transferred after birth. This is the factual home birth data compared to the AMA medical model which assumes that all women require medical intervention during labor.

“What if I need pain medication?”

Women who choose to birth at home desire a natural, medication free birth. They've done their homework and have found that many of the common hospital interventions actually cause additional pain during labor. Restrictions of movement, position or support partners and the introduction of medically unnecessary interventions can create a more painful experience for a woman. In a home setting a woman is free to move how and where she wishes. She can eat to keep her energy up and drink to stay hydrated. She can include whomever she wants as labor support, and the Midwife (or in some cases family physician) serves as a “life guard” watching over, but not interfering with the labor process. Labor support personnel may suggest position changes, comfort measures and natural labor techniques that help women cope with the sensations of labor. Interestingly enough it's been found that women experience less pain when laboring at home due to the uninhibited release of natural pain relieving hormones.

It is helpful for a woman to educate herself and her partner about how to stay healthy and low risk when they desire a natural labor/birth experience; and what techniques can help her reach this goal. Knowing what is normal and what is not, and having a loving labor support partner who is trained to assist you, go a long way in giving you the best chance of a healthy natural birth. Thorough childbirth education classes will help prepare you for all contingencies.

If, in the long run, a woman and her birth team decide that she needs medication or a medical intervention, she can be transported to the local hospital at any time. Interestingly,

studies show that the number of women who do end up transporting for pain relief is very small – 2.2% of 5418 women. In the hospital setting 90% of women use pain medications, and most are not aware of the risks.

So why choose homebirth?

Last, but never least, there is spirituality in homebirth that is present to a lesser extent in a medical institution. Birth, in and of it's self is miraculous, yet some how the clinical setting

degrades that with its isolation from family and friends. Birthing at home allows a family to grow in peace and love without interruption. The other children wake in the morning to find Mommy and their new sibling curled up in bed. The experience lends to stronger lineage, legacy and intimacy. Where could it be more natural for a child to be born?

It is said that in order for a woman to be able to open up and feel safe in letting her child be born into this world, she must be in a place that she feels comfortable enough to make love [iv]. An institutional medical setting inhibits not only the spiritual feelings, but also the actual hormone response that is natural to assist a woman in birthing.[v] If we wonder why so many women require intervention during institutionalized or industrialized birth procedures, we need only to look at the atmosphere in which they are birthing.

When there is a problem or complications we say thank goodness for medical technology and well trained physicians. However, the majority of women do not need these interventions.

So why choose Homebirth? Comfort, safety, fewer interventions, privacy, less chance of a cesarean, a healthy baby, a healthy Mom and a positive birth experience are the advantages of home. Home --- where welcomed, wished for children come “trailing clouds of glory—from God who is our home—“.[vi],[vii]

For more information on homebirth, the local Homebirth Circle, or lists of Independent Childbirth Educators and Midwives contact Rochester Birth Network at www.rabn.org

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[Note: In 2012 The Cochrane Database conducted a review of available studies on home birth can concluded that planned home birth in many places can be as safe as planned hospital birth and with less intervention and fewer complications. View a copy of the study here: http://almenpraksis.ku.dk/nyheder/oleolsen/Hjemmef_dsel.pdf/

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