ARCHIVES OF HELLENIC MEDICINE: ISSN 11-05-3992

SHORT COMMUNICATION
ΒΡΑΧΕΙΑ ΔΗΜΟΣΙΕΥΣΗ

ARCHIVES OF HELLENIC MEDICINE 2023, 40(4):564–565
ΑΡΧΕΙΑ ΕΛΛΗΝΙΚΗΣ ΙΑΤΡΙΚΗΣ 2023, 40(4):564–565

Waterbirth
A simple and cost-effective way to promote normality in childbirth

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Τοκετός στο νερό: Ένας απλός και οικονομικά αποτελεσματικός τρόπος προαγωγής του φυσιολογικού τοκετού

Περίληψη στο τέλος του άρθρου

Key words: Birthing experience, Cost-effective, Normal births, Safety, Waterbirths

In the majority of developed countries, caesarean section rates are well in excess of 50% and continue to rise, even though rates above 19% have not been associated with reductions in maternal and neonatal mortality.[1] Moreover, the current birth culture is significantly medicalised with increasingly high rates of oxytocin use, episiotomy rates, and use of pharmacological analgesia. The majority of childbirths take place within hospital settings and home-births are in decline with rates of less than 2% in England and in other countries.[2,3]

A simple and feasible measure to "re-introduce" normality during labour and chilbirth that does not require complex organisational restructuring of the maternity health system would be to support the installation and use of birthing pools for labouring women in their birthing suites, especially in hospital settings.

In the United Kingdom, water immersion during labour and childbirth is a standard option available to women in all maternity units since 1993.[4] Waterbirthing rates in England have risen from 3% in 2007 to 9% in 2015 and the use of water during labour and birth is currently integrated within the United Kingdom (UK) clinical guidelines.[5,6] Nevertheless, the use of water at labour and birth is still not a standard practice and option for many developed countries.

There is evidence that labouring and giving birth in water facilitates women to have a greater sense of control during childbirth and reduces their need for an epidural analgesia.[7] There is also an association reported between waterbirthing and fewer interventions during labour and birth for low-risk pregnant women.[8] This is extremely important, since one in two pregnant women from the general obstetric population are considered low-risk in accordance with the National Institute for Health and Care Excellence (NICE) clinical guidance criteria and are therefore eligible for a waterbirth.[6]

At the moment, birthing pools are most commonly used in midwifery-led birth units and not in hospital maternity settings. If waterbirthing was to be used in the highly medicalised hospital environment, then this would support the role of midwives as it would increase their autonomy in their everyday role and practice, and could facilitate them in increasing the incidence of normal births in the maternity hospital.[9]

Moreover, despite the fact that a waterbirth appears more costly when compared to a dry land birth due to the costs of additional equipment, it has nevertheless been shown to be more cost-effective than a traditional delivery.[10] It has been quoted that a waterbirth offsets the reported increased costs of labour and birth by reducing the rates of perineal tears and by increasing maternal well-being without any adverse consequences in terms of labour duration and newborn health status.[10]

Introducing pool facilities in maternity hospitals for waterbirthing may be a simple and feasible way to bring normality during labour and childbirth back again. It can

Submitted 13.7.2022
Accepted 23.7.2022

immediately be brought to effect without invoking major changes to maternity services provision and does not require changes in the birthing philosophy as waterbirths have always been traditionally carried out by midwives. This opportunity to invoke changes in maternity care should not be missed. The next step is for policy makers and stakeholders to acknowledge the evidence base. We have the tools; we need to make it happen.

ΠΕΡΙΛΗΨΗ

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Αρχεία Ελληνικής Ιατρικής 2023, 40(4):564–565

Ο τοκετός στο νερό αποτελεί έναν απλό, εφικτό και οικονομικά αποτελεσματικό τρόπο προαγωγής του φυσιολογικού τοκετού στο υψηλά ιατρικοποιημένο νοσοκομειακό περιβάλλον των μαιευτηρίων. Αν και τα οφέλη του νερού στη διάρκεια του τοκετού είναι επαρκώς τεκμηριωμένα στην επιστημονική βιβλιογραφία, η επιλογή μαίευσης στο νερό δεν είναι ακόμα δημοφιλής σε όλες τις ανεπτυγμένες χώρες. Η εφαρμογή αυτής της μεθόδου ουσιαστικά προϋποθέτει μόνο αναδιάρθρωση του σχεδιασμού των μαιευτικών υπηρεσιών, καθώς το κόστος του πρόσθετου εξοπλισμού είναι μικρό και οι επαγγελματίες υγείας που μπορούν να παρέχουν αυτή την επιλογή στην έγκυο γυναίκα, παραδοσιακά δηλαδή οι Μαίες, στελεχώνουν ήδη το σύστημα υγείας.

Λέξεις ευρετηρίου: Αποτελεσματικότητα ως προς το κόστος, Ασφάλεια, Εμπειρία τοκετού, Τοκετός στο νερό, Φυσιολογικός τοκετός

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