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Positions and movement: promotion of physiological labour and birth

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Objective: The objective of the present study is to analyze the management of labour and birth which includes use of alternative positions, duration of labour, use of episiotomy and sutures, incidence of lacerations and hematoma, maternal and fetal outcomes, use of therapeutic positions in obstructed labour.

Materials & Methods: The sample consists of 100 women, from 16 to 45 years old, randomly recruited who have given birth at the Pugliese-Ciaccio Hospital, in Catanzaro, Italy. In order to improve the knowledge and skills in the labour management and to compare the results with the data collected through the interviews with women, an anonymous questionnaire was administered to the 12 midwives of the hospital working in the delivery suite.

Results: From the data collected, 75% of women use alternative positions during labour, following their instinct, the advices from the antenatal classes or from the midwife who looks after the labour. The positions used are varied and different, but the litotomic one is always present (90% of cases), especially in the second active stage, in fact less than 2% of women gave birth in a different position and even the use of episiotomy and suture is very high (about 55%). Regarding the length of labour, primips women who have used the alternative positions are having a labour of about 1 hour shorter than those who have not used them (on average 4 hours and 30 minutes). As for the multiple, however, the labour with the alternative positions is shorter by about 1 hour and 20 minutes (on average 2 hours and 20 minutes versus 3 hours and 40 minutes). The maternal and fetal outcome is positive.

Conclusions: Healthcare professionals should promote the use of alternative positions especially in the management of dysfunctional labour. The midwife must, first of all, let the woman understand that labour and childbirth are very instinctive. This can sometimes be particularly difficult. Women, however, do not need someone to teach them how to give birth to their child, rather than having confidence and awareness in the knowledge of their body in order to make the event a unique and unforgettable experience.

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