



Waterbirth International
Waterbirth: Easier for moms... Better for Babies!TM



Waterbirth FAQ

<http://www.waterbirth.org/waterbirth-faq>

Research has verified many aspects of water labor and waterbirth

- Water facilitates mobility and enables the mother to assume any position which is comfortable for labor and birth
- Speeds up labor
- Reduces blood pressure
- Gives mother more feelings of control
- Provides significant pain relief
- Promotes relaxation
- Conserves her energy
- Reduces the need for drugs and interventions
- Gives mother a private protected space
- Reduces perineal trauma and eliminates episiotomies
- Reduces cesarean section rates
- Is highly rated by mothers - typically stating they would consider giving birth in water again; some even stating they would never give birth any other way!
- Is highly rated by experienced providers
- Encourages an easier birth for mother and a gentler welcome for baby

Placing a pool of water in a birth room changes the atmosphere immediately. Voices get softer, the mother stays calmer and everyone becomes less stressed.

The effect of buoyancy that deep water immersion creates allows spontaneous movement of the mother. No one has to help the mother get into a new position. She moves as her body and the position of the baby dictate. Movement helps open the pelvis, allowing the baby to descend.

When a woman in labor relaxes in a warm deep bath, free from gravity's pull on her body, with sensory stimulation reduced, her body is less likely to secrete stress-related hormones. This allows her body to produce the pain inhibitors-endorphins-that complement labor. Noradrenaline and catecholamines, the hormones that are released during stress, actually raise the blood pressure and can inhibit or slow labor. A laboring woman who is able to relax physically, is able to relax mentally as well. Many women, midwives, and doctors acknowledge the analgesic effect of water. Thousands of these mothers state they would never be able to consider laboring without water again.

Why is water birth not available in more hospitals?

Waterbirth International works diligently with couples who want to use warm water during their births in hospitals. We have been very successfully with obtaining approvals for portable pools in many hospitals in the last fifteen years. Hospitals are more cooperative today than ever before as doctors and midwives begin to see the benefits of allowing women to make their own choices.

Waterbirth profoundly demonstrates that a woman is empowered by "giving birth," not "being delivered". Many healthcare providers are seeing women take charge of their birth experiences and welcome this attitude and do what they can to facilitate a gentle birth. But others are still "locked into" the medical technological model of birth and have a harder time being convinced of the efficacy and safety of waterbirth. As couples become more informed of their options, they are assuming more responsibility for their own birth experience. If you would like one of Waterbirth International's midwife or physician consultants to work with your doctor or hospital, simply [contact us](#). We'll call and discuss the approaches to take and the steps that are necessary to change policy.

The very first step is to make a decision to not sit on the fence. If this is something that you really want, then don't take "NO" for an answer. Also be aware that the sooner you start the process, the more chance there is to have a waterbirth in a hospital. If you call or enlist our services in your last trimester of pregnancy, the chances are reduced by 90%. Call or write as soon as you know you want this. [contact us](#)
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What prevents baby from breathing under water?

There are four main factors that prevent the baby from inhaling water at the time of birth:

1. Prostaglandin E2 levels from the placenta which cause a slowing down or stopping of the fetal breathing movements. When the baby is born and the Prostaglandin level is still high, the baby's muscles for breathing simply don't work, thus engaging the first inhibitory response.
2. All babies are born experiencing mild hypoxia or lack of oxygen. Hypoxia causes apnea and swallowing, not breathing or gasping.
3. Fetal lungs are already filled with fluid. That fluid is there to protect the lungs, and keep the spaces open that will eventually exchange carbon dioxide and oxygen. It is very difficult, if not improbable, for fluids from the birth tub to pass into those spaces that are already filled with fluid. One physiologist states that "the viscosity of the fluid naturally occurring in the lungs is so thick that it would be nearly impossible for any other fluids to enter."
4. The last important inhibitory factor is the Dive Reflex and revolves around the larynx. The larynx is covered all over with chemoreceptors or taste buds. The larynx has five times as many as taste buds as the whole surface of the tongue. So, when a solution hits the back of the throat, passing the larynx, the taste buds interprets what substance it is and the glottis automatically closes and the solution is then swallowed, not inhaled.

What is the temperature of the water?

Water should be monitored at a temperature that is comfortable for the mother, usually between 95-100 degrees Fahrenheit. Water temperature should not exceed 101 degrees Fahrenheit as it could lead to an increase in the mother's body temperature which could cause the baby's heart rate to increase. It is a good idea to have plenty of water to drink and cold cloths for the mother's face and neck. A cool facial mist from a spray bottle is a welcome relief for some mothers as well.

How much does a waterbirth cost?

If your hospital offers waterbirth as an option, there is usually no extra cost. Sometimes a hospital will charge a fee for the use of a portable birth pool. You can also purchase your own birth pool through many different sources. We recommend Waterbirth Solutions.com. The cost for a complete birth pool kit is now under \$250.

Some insurance companies do reimburse for the expense of the pool rental. If the hospital has permanent birth pool equipment, there is not really even any need to let your insurance company know that you have had a waterbirth. Just in case they may object to the process, it is always safe to inform the insurance company that the baby was born vaginally. It really doesn't matter if the baby was born in the bath or on the bed - it is still a vaginal birth.

Can I have a water birth at my local hospital?

Waterbirth International diligently works with families who want to have a water birth in a hospital environment. Hospitals are more cooperative today than ever before as more and more women have made their choices heard. Many people start the process by inquiring if they can bring in a portable pool kit for labor. There are a series of steps that need to take place in order to assist hospitals and providers in adopting protocols for water labor and birth and the use of a portable pool. Portable Birth Pools have been used in hundreds of facilities, including several military hospitals (no easy task!).

Our Executive Director, [Barbara Harper](#), is available to work with each family to assess how much is needed to get policies changed or established. Our success rate with hospitals and providers is about 95%. Call to discuss this aspect of our work if you want to help your local hospital institute a water birth policy. We ask that you [become a member](#) of Waterbirth International or provide a donation in order to help us with the cost of effecting these changes.

How long is baby in the water after the birth?

Here in the US, practitioners usually bring the baby out of the water within the first few seconds after birth.

There is no physiological reason to leave the baby under the water for any length of time. There are several water birth videos that depict leaving the baby under the water for several moments after birth and the babies are just fine.

Physiologically, the placenta is supporting the baby with oxygen during this time though it can never be predicted when the placenta will begin to separate causing the flow of oxygen to baby to stop. The umbilical cord pulsating is not a guarantee that the baby is receiving enough oxygen. The safe approach is to remove the baby, without hurrying, and gently place him upright onto the mother's chest.

When should I get into the water?

A woman should be encouraged to use the labor pool whenever she wants. However, if a mother chooses to get into the water in early labor, before her contractions are strong and close together, the water may relax her enough to slow or stop labor altogether. That is why some practitioners limit the use of the pool until labor patterns are established and the cervix is dilated to at least 5 centimeters.

There is some physiological data that supports this rule, but each and every situation must be evaluated on its own.

Some mothers find a bath in early labor useful for its calming effect and to determine if labor has actually started. If contractions are strong and regular, no matter how dilated the cervix is, a bath might be in order to help the mother to relax enough to facilitate dilation.

Therefore, it has been suggested that the bath be used in a "trial of water" for at least one hour and allow the mother to judge its effectiveness. Midwives report that some women can go from 1 cm to complete dilation within the first hour or two of immersion. The first hour of relaxation in the pool is usually the best and can often help a woman achieve complete dilation quickly.