

Labour pain and how to relief it

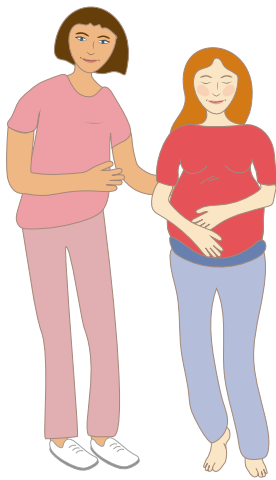


Labour pain and what influences it

Pain in general and pain during labour is not characteristic or always the same. On the contrary, it can be described as a unique, complex and very individual experience.^{5,6}

Women describe labour pains in very different ways. The evaluations can range from excruciating to pleasant, depending on the person and the situation.⁷

Women's perception of pain is influenced, among other things, by^{5,8}



Physiological issues (e.g. birth position)

Psychological issues (e.g. fear, anxiety)

Cultural and social elements

Motivational situation

Quality of the woman-provider relationship

According to studies, labour pain is the main reason for women to opt for a caesarean section, even though this carries a higher risk of complications.⁹

But does this have to be? After all, there are many ways to combat pain during labour.

Signs that labour is beginning⁴

- the amniotic sac bursts and the amniotic fluid flows or drips out
- contractions occur at intervals of 5 to 10 minutes

Childbirth and what it feels like

Experience of birth has different aspects and causes different feelings.

Aspects of birth¹

Possible feelings of birth^{1,2}



Giving birth can be unsettling, especially for first-time mothers. You don't know what to expect, you've already heard or read a lot and you have to get involved in something that most people describe as 'indescribable'.

It's an event that will change your life. You look forward to it with excitement and uncertainty at the same time.

It can therefore be reassuring to be familiar with the birth process in advance.³



A study has also shown that information about birth should not be limited to providing knowledge, but should primarily be based on building a relationship of trust with healthcare professionals, taking into account the individual values and expectations of each person.³

Did you know?

Only 4% of birth happen on the precise due date.⁴

4%

Therapy methods and how they work (examples)

Non-pharmacological⁸



Relaxation techniques to relax the body and reduce breathing rate and blood pressure (e.g. breathing exercises, yoga, music, hypnosis or mindfulness)

Manual techniques in the form of soft tissue manipulations to increase emotional comfort (e.g. massage, reflexology, shiatsu, warm and cold packs)



Acupuncture by inserting fine needles into different areas of the body to address imbalances of energy

Birthing ball as a large exercise ball on which women in labour can sit and perform movements like rocking and pelvic rotation



Transcutaneous electrical nerve stimulation (TENS), in which electrical currents are applied to the surface of the skin



Sterile water injection into or under the skin



Aromatherapy with essential oils used for body massage or inhaled via vapor infusion or a burner

Pharmacological^{6,8}



Via the lung e.g. a combination of 50% Nitrous Oxide with 50% Oxygen can be administered. The intake can be controlled by the woman herself, and it does not influence the labour progress.



Via the vein e.g. stronger painkillers such as opioids or more moderate painkillers such as acetaminophen or non-steroidal anti-inflammatory drugs (NSAIDs, an example would be ibuprofen)



Via a lumbar puncture a so-called epidural analgesia can be administered. This is the best-known form of pain relief during labour.

Self-determination and what it has to do with

Interestingly, satisfaction with labour analgesia is only partly dependent on the degree of pain relief. Aspects also appear to have an influence, such as⁶

- concentration
- satisfaction
- control
- support
- well-being

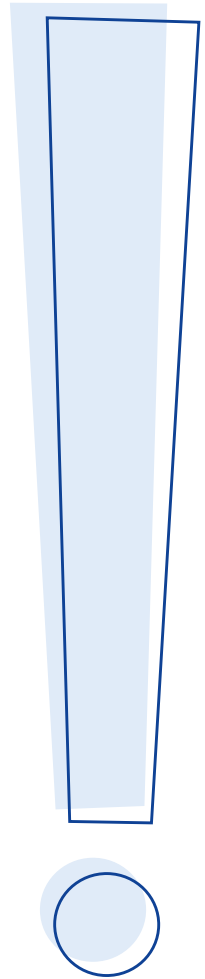
Parents expressed a desire to receive concrete and practical information and wanted to familiarize themselves with the birth environment in advance. Building a respectful relationship with the healthcare teams was also considered important.³

Studies have shown that women want to be able to decide which form of pain relief to use during labour. And many of them would like to avoid invasive methods.¹⁰

Experts recommend providing information about labour analgesia before the onset of regular contractions, e.g. as part of prenatal care or at a delivery room visit.¹¹

It is therefore not surprising that more and more emphasis is being placed on involving those affected in decisions and providing education.

So, take the opportunity to find out about pain therapy options from your midwife, doctor or maternity ward in good time!



What are the stages of a normal birth?¹²

- **First stage of labour:** This phase begins with the contractions and ends when the cervix is fully dilated.
- **Second stage of labour:** This phase begins when the cervix is fully open and ends with the delivery of the newborn baby.
- **Third stage of labour:** This phase begins with the birth of the baby and ends with the delivery of the placenta.

Are you interested in further information?

Get an idea of the
experiences of other mothers.
Simply use the QR code.



The birth of your own baby is one of the most important experiences in your life. Take the opportunity early on to take advantage of counseling services and be as self-determined and involved in this event as possible.



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