



Family— coaching



Welcome antenatal class 2!

Birth





Preparing for labour

- It is not important to decide what is going to happen
- It is important to build trust in yourself, your body and the process of labour
- There are many ways to build trust
 - Getting to know your own body: ways to relax
 - Learning about labour and delivery and how to manage pain
 - Read up, educate yourself





Preparing for labour

- Listening and talking to
 - Your spouse or birth partner
 - Other mothers, fathers, parents
 - A doula?
 - Your neuvola nurse
- If you need more support, there are
 - Hospital midwives (antenatal), student midwives (during delivery)
 - Doulas
 - Private antenatal classes and midwives
 - Neuvola (anytime)





Birth plan?

Could be helpful but not compulsory

Studies show preparing for delivery can result in a more positive experience, irrelevant what the outcome may be 😊

A good tool for this:

[HUS birth plan in English](#)



Signs of labour

Your waters will break

or

your contractions will start

Always call the hospital first,
before arriving!

Naistenklinikka, Espoo, Lohja, Hyvinkää

If you suspect your waters have broken but are not sure, please contact the hospital.

It is the hospital's job to look after you, so please do not hesitate to contact them!



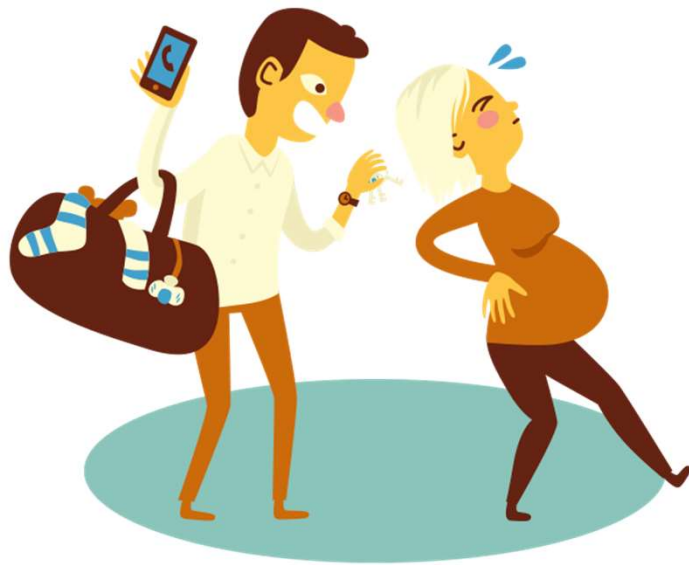
Overdue pregnancy and induction of labour

- Assessment based on the wellbeing of mum and baby
- Induction will take place in hospital at 41+ weeks if there are no signs of labour yet
- Instructions on how to book on your 41 week appointment
- There are different ways to induce labour, medical and non-medical





Stages of labour



I: Dilation

II: Birth of your baby

III: Delivery of the placenta

[Animation Labor and Birth](#)

[Patient Education Animation: Labor and Vaginal Birth - YouTube](#)



Latent phase

- Can take anywhere between a few hours and a couple of days
- Irregular contractions far apart
- Contractions fairly short in duration
- Throbbing pain in the lower back, lower abdomen
- You can keep up your strength by eating and drinking as normal
- Rest when possible

You can always consult the hospital if you are in any way concerned about the progress of your labour!



1. Dilation

- Cervix gradually opens
- Regular contractions lasting 45-60 seconds
- Contractions are getting stronger and closer together
- Every birth is different





2. Birth of your baby (a few minutes up to an hour)

- A break first
- Cervix at 10cm, baby is down
- Mother and womb working together
 - 1-2 midwives helping and assisting
- Push calmly and slowly, relax the muscles in your pelvis
- Consider different positions for pushing
 - Study these prior to labour, ask your midwife for advice





3. Delivery of the placenta

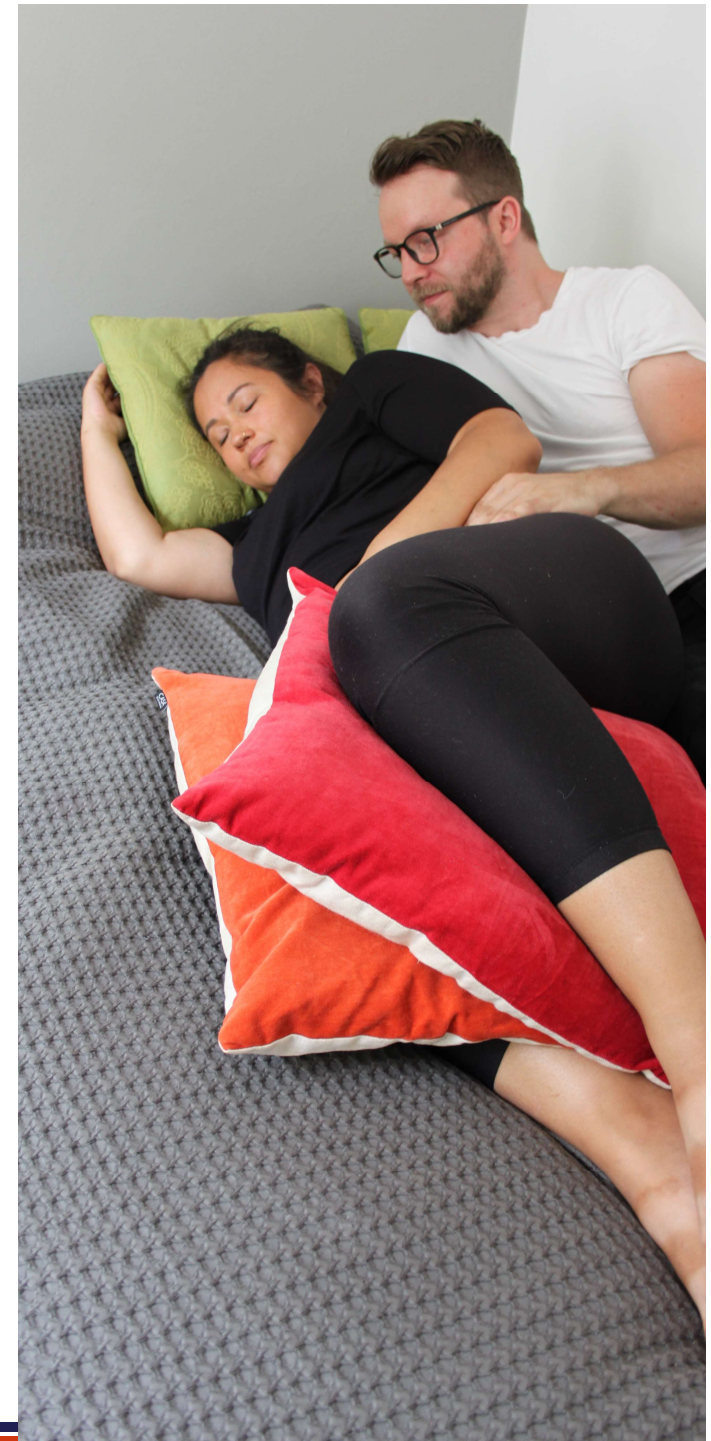
- Placenta delivered within 30min of baby
 - Sometimes an assisted delivery is needed
- Some medicines help contract the womb, breastfeeding also helps with this
- Sutures and stitches for any damage
- Observing the wellbeing of mum and baby
- Midwife will inspect baby while baby is feeding on the breast
- Vitamin K injection for baby
- Shower for mum
- Drinks and snacks for parents
- Transfer to postnatal ward after a couple of hours





Relaxation

- Assists the flow on oxygen and nutrients
- Releases oxytocin (mum's own painrelief hormone)
- Reduces tension in the pelvis and cervix
- Practice, practice, practice
- Lots of different methods
 - Naistalo [rentoutusharjoitusvideot](#)
 - Music
 - Chatting
 - Breathing
 - Touch
 - Humming
- Importance of psychological support – support person, midwife





The importance of your birth partner

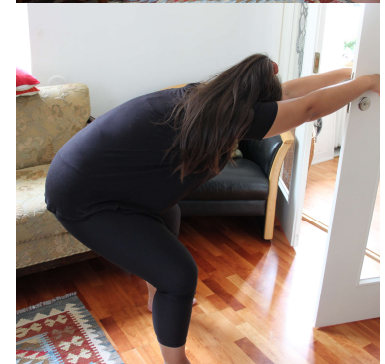
- Offers safety, comfort, relaxation
- Helps control anxiety and stress
 - Massage, stroking, words of comfort, physical support
- Helps and praises - "cheerleader"
- "Spokesperson"
- Gets to know baby straight away
 - Takes part in looking after baby, takes responsibility for the family
- Will share an unforgettable experience with you ♥





Movement

- Movement can help move your labour along and manage pain
- Moving can help your baby move down the birth canal -> easier to push
 - Women often automatically assume a position they are comfortable in
 - Walking, swaying hips, leaning forward, hanging
 - Going up and down stairs
 - To assist you: rocking chair, ball, bean bag, sling





Touch

- Touch helps release oxytocin - the body's natural pain relief hormone
 - Assists contractions
- Massage
 - Lower back, backs of thighs
- Reflexology
- Acupuncture
 - Activating acupoints
 - Helps manage pain from contractions, dilate the cervix, delivery of the placenta
- Gua shaa
 - Comb painful spots
 - Relieves pain, aids metabolism, balances the body, energises





Water

- Water offers certain advantages
 - Pain relief – water can be luke warm or chilly
 - Helps to relax and comfort
 - The support of the water means you can try different positions and move more freely
- Showering at home – at least 15mins
- Birthing pools in hospital for 1st or 2nd stages of labour





Warmth

- Helps ease tension and discomfort
- Helps distract pain
- Hot or cold packs, hot water bottles etc





Sterile water injections

- Involves tiny amounts of sterile water being injected into the skin around your lower back
- Can be painful for the first 30secs but then effective at blocking pain messages for a couple of hours
- Releases oxytocin





TENS-machine

- “Transcutaneous Electrical Nerve Stimulation”
- Small hand held device with pads
- Electrical pulses stimulate nerves that run to the spinal cord and block the transmission of pain
- Increases endorphins
- A tingling sensation which the parent giving birth can adjust
- Easy to use at home
- Rent or buy





Medicinal pain relief

- At home paracetamol 1g per 8 hours
- In hospital injected opiates
- Gas and air
 - Your midwife will advise on the technique
 - Dials down the pain
 - Does not affect your baby
 - Can be used throughout the delivery
 - Cause nausea if inhaled incorrectly





Local anaesthetics

- Epidural / spinal
 - You will need an iv line
 - An anaesthesiologist administers
 - Regular blood pressure checks, CTG, rest
 - Movement encouraged after 30 mins
 - helps baby move down, progress of labour
 - Used with an oxytocin infusion to boost contractions
- Paracervical block
 - Numbing the cervix
- Pudendal block
 - Numbing the perineum





Special circumstances: Caesarean section

Elective/planned caesarean

- Birth partner can attend
- Epidural/spinal

Emergency caesareans

Category 2 – 30 mins

- Birth partner can attend
- Non-life threatening problems affecting baby

Category 1 – 5 mins

- Rare
 - Birth partner cannot attend
 - Immediate threat to the life of the mother or baby
 - Under general anaesthetic – you will not be awake
-



Ventouse or vacuum delivery

- Your baby is not moving out of the birth canal as would normally be expected
- Mum or baby struggling
- Episiotomy first
- Device attached on baby's head
- As you push the doctor will gently pull





Postnatal life

- Postnatal ward after a couple of hours, duration of stay 1-3 days
 - Discharge based on each family's circumstances
- Whilst on the postnatal ward...
 - Mother recovering from delivery
 - Baby adjusting to life outside the womb
 - Blood sugar, temperature, breathing frequency, jaundice
 - Breastfeeding, bottlefeeding success
- Stay is short and the idea is to get to know your baby and learn to look after them
 - Be active
 - Evaluate the need for visitors
- You will continue to recuperate at home
 - Feeding problems? Contact the hospital!





Recovering from delivery

- Dissolvable stitches in the vagina, caesarean section wound may have stitches or staples
- Postpartum bleed for 2-6 weeks: avoid sauna, swimming, intercourse
- Sex when you feel like it, use a lubricant, don't forget birth control
- Watch out for uterine infection, mastitis,
- Look after your caesarean section wound
- Don't forget pelvic floor muscles, recovery of abdominal muscles





Feeling depressed after childbirth

- Feeling low after birth
 - Affects 50-80% of mothers, typically 3-4 days after delivery, lasts a few days
 - Postnatal depression
 - Affects 10-20% of mothers, usually appears within 3 months of delivery
 - Symptoms include difficulty sleeping, inability to concentrate, feeling forlorn and unhappy, feeling unusually worried about your baby
 - Mother herself might not notice the symptoms – importance of family in identifying
 - Äimä ry www.Aima.Fi - peer support
 - Postpartum psychosis
 - Rare – affects 1 or 2 mothers per 1000, appears 3-14 days after delivery
 - Restlessness, insomnia, mood swings, delusions, hallucinations, confusion, behaving out of character
 - Is a medical emergency
 - Discuss any issues with mood with your neuvola nurse!
-



First days at home

- Contact the neuvola helpline for a home visit
- You can contact the hospital for up to 2 weeks after delivery – any concerns about mum or baby
- Getting to know your baby, adjusting to a new way of life
- Eat and rest whilst looking after baby
- Fresh air weather allowing



HAVE A WONDERFUL DELIVERY!





Useful links

- <https://www.hel.fi/sote/perheentuki-en/pregnancy-and-childbirth/>
- <https://www.hus.fi/en/treatments-and-examinations/labor>
- [Naistalo-sivut](#) in Finnish
- https://www.youtube.com/watch?v=OUXgHV_w3nY
- [Etusivu - English - Äidit irti synnytysmasennuksesta](#)
[Äimä ry \(aima.fi\)](#)