

AFTER PAINS

BIRTH STORIES DON'T ALWAYS HAVE HAPPY ENDINGS

For some women, the whole experience is a nightmare that keeps recurring.

By Rosemary Barraclough, New Zealand Treasures Magazine, ACP Media Ltd, Private Bag 92 512, Wellesley St, Auckland 1036, from August September issue 2000. Used with permission, March 2003.

After the birth of her daughter, Narelle George didn't feel high or happy or fulfilled. She felt like she'd been raped.

Her daughter was born in an overseas hospital with unsympathetic staff who seemed to think that as long as mother and baby survived, everything was fine.

Narelle felt hospital staff blamed her for her labour going badly - because she was a European having her first baby at what they considered the late age of 32. She felt they almost enjoyed the fact she was having a hard time and didn't support her emotionally. With her baby in a posterior position, she struggled through a 33-hour labour with poorly administered pain relief.

Narelle, a doctor herself, wasn't asked for consent before a doctor performed a large episiotomy and pulled the baby out by ventouse, leaving her feeling violated.

But worse was to come. Home with her new baby, she couldn't stop remembering the birth, which replayed over and over in her head like a videotape. The memories stopped her sleeping and she became exhausted.

"When my baby woke for a feed I couldn't get back to sleep - I couldn't switch the memories off."

She was anxious and the demands of a newborn made her irritable. She had trouble loving her daughter and felt depressed. Any mention of birth set off a panic attack, with sweaty palms, a racing heart and a dry mouth.

Although she didn't realise it until much later, Narelle is one of a growing number of women diagnosed with post traumatic stress disorder (PTSD) following birth. This is similar to a disorder sometimes suffered by survivors of major tragedy, road accidents or other trauma.

About a year after the birth Narelle received counselling to help her get over her ordeal. Up until this time, she'd never talked through the birth experience, and now she chose as her counsellor a motherly woman who had children of her own. Talking about the horror of it all initially made things worse, but Narelle stuck at it and the counsellor encouraged her to re-enact the birth.

Narelle was terrified at reliving the brutal memories of her birth, but it was to prove a breakthrough in her treatment. The counsellor's supportive role during the re-enactment meant that when memories of the birth surfaced, Narelle could quell the panic by thinking about the counsellor's support.

Narelle hopes that something good will come of her struggle - that women will get support to

talk about traumatic births and that PTSD sufferers will be diagnosed and treated more quickly than she was.

SUPPORT GROUP

Now Narelle and several other Auckland women, who got in touch as a result of letters written to *Little Treasures*, have set up the TABS support group (Trauma and Birth Stress). They offer support to others suffering from PTSD, which they believe is hugely under-diagnosed and often mistaken for postnatal depression.

They say many women are suffering in silence without the treatment they need to put their birth ordeals behind them.

Because the trauma necessary to cause PTSD is defined as "a psychologically distressing event outside the range of normal human experience", birth used to be excluded. After all, most women go through it, psychiatrists argued.

In the last few years this has changed, as it has been recognised that birth, with all its interventions, can end up feeling far from "normal" for many women.

Emergency procedures, a serious threat to the baby or its death, haemorrhage and particularly the experience of loss of control, all contribute to the experience being traumatic.

BIRTH FLASHBACKS

Some symptoms of PTSD include:

· Re-experiencing the event in nightmares, flashbacks or like a movie running in your head. Similar feelings, like menstrual cramps or bleeding, can catapult a woman back to the birth.

· Avoidance and/or emotional numbing. Women with PTSD will often stay away from pregnant women and avoid discussing the experience. They can feel distanced, as if it never really happened or at least not to them. Some women are emotionally numb, not able to experience pleasure, joy or even rage or fear, as if letting go might make the birth come back to them.

· Being jumpy, having difficulty concentrating, being irritable or angry, having sleep problems, getting sweaty and panicky. Symptoms must be present for at least a month, but they may surface weeks, months or even years after the birth.

Women who have had previous trauma are more likely to develop PTSD. This may be related to birth, such as a previous traumatic delivery or miscarriage, but unrelated trauma, like childhood abuse, a car accident or assault, can also make a woman more vulnerable. Women who have suffered depression, anxiety or eating disorders are more prone to PTSD, but it can happen to anyone.

Psychiatrist Sara Weeks, who specialises in treating birth-related PTSD, says the way the birth is handled can make the condition more likely. Many women describe being distressed when birth attendants panic, fail to sensitively explain what is going on or seem to lack understanding about what the woman is going through. Being treated by many different

medical professionals can also contribute to the trauma.

If PTSD is not treated it can lead to depression, obsessive compulsive disorders, phobias, panic attacks, alcohol or other substance abuse, eating disorders and relationship problems. Specific treatment is needed, as general counselling, psychotherapy or medication don't always help the flashbacks and other signs of PTSD, says Dr Weeks. TABS suggests looking for someone who specialises in the area. They can supply a list of helpful medical professionals (see TABS contact details below).

Partners can be traumatised by the birth too. TABS suggests all women giving birth should consider having a second support person, preferably someone who has had children herself.

The TABS group says it's not how bad the birth seems to others that matters, it's how the woman herself finds the experience. One person's trauma may be another person's picnic," says one PTSD survivor. Never compare your story to anyone else's to decide whether it's bad enough to get help.

To contact TABS (Trauma and Birth Stress) supports group, send a stamped self-addressed envelope to: TABS, PO Box 18 002 Glen Innes, Auckland or website www.tabs.co.nz or email: ptsdtabs@ihug.co.nz

TONI'S STORY

I was admitted to a hospital with toxaemia at 39 weeks, under the care of the hospital "team" instead of my GP.

At midday I was induced. Things got moving straight away, with what felt like bad period pains which rapidly increased in severity. I felt pleased. I was "getting on with it".

I had been told I would be examined six-hourly, but no one appeared until 8pm, when the doctor said she would meet me in a delivery suite to break my waters because of the severity of my toxaemia. I never saw her again.

When I arrived at delivery suite three women were in the process of giving birth, so breaking my waters was put on hold. They were one-midwife short and there was no one around to help. My midwife was having a frantic time, but she popped in now and again to monitor the baby. She was unaware of my toxaemia.

Twelve hours after being induced I still hadn't been examined, but I felt I had been making good progress as the contractions had been long and hard.

At lam my midwife was finally free to break my waters. The look of surprise on her face said it all. I wasn't dilated at all. She couldn't break my waters and rushed off to get a doctor. I felt totally crushed. I was exhausted and angry that things had taken so long.

Another doctor came. She broke my waters - already the contractions were nearly unbearable, now the pain skyrocketed to extreme. I was given an epidural, which was poorly managed, and I see-sawed between pain free oblivion and full-blown contractions.

I felt the staff were ALL oblivious to my feelings, as if they were just remotely handling their

'jobs". It seemed like an endless stream of people. I had internal examinations by six different staff.

My midwife had been very kind, but she went off duty just before delivery. The new midwife seemed to be inexperienced and couldn't find the baby's heartbeat when she looked for it.

After an hour or so of pushing I was offered forceps. I was whisked into stirrups, and my epidural was topped up, but not given long enough to work properly, nor was it checked. I felt the cut, the forceps going in. It felt as if they were tearing me apart. I screamed long and loud.

I was congratulated for how "quick and easy" it was, because with one pull, out Tom came, scoring a perfect 10 on the Agar scale. The worst thing was that nobody acknowledged I'd had a bad time. Everyone was so pleased it had gone so well.

Back home, after three months of breastfeeding problems, I began having flashbacks of the delivery. I withdrew and lost all my confidence. I was terrified of being alone with my baby in case I lost control. After six months of treatment for PTSD, I got my life back. By this time Tom was two years old. Recovery was a rough ride, but I am a stronger person for it.

I finally decided I wanted another child and carefully planned my delivery, with a Domino midwife to ensure continuity of care and a second support person. My second labour was quick and I had no intervention. It was very intimate and personal, with just the four of us there. This time my memories of the pain faded fast and I remember instead how special it was and how proud my husband and I felt.

SUE'S STORY

My troubles began at 28 weeks, when my suspicions were confirmed by a scan. I was too big for my dates. "You have polyhydramnios (excess amniotic fluid)," the sonographer said.

I was sent straight to the GP and then to a specialist, who prescribed steroids, told me to monitor my own size daily and said I should be peaceful and not worry.

Seventeen days later I was huge and unable to cope. I went to hospital for tests, expecting to go home afterwards. No one told me what was going on, but in fact I was already in labour and 2cm dilated. Our baby girl had a very poor heart trace and was not moving. After an emergency caesarean, our daughter was taken to the neonatal intensive care unit (NICU). An hour later I was told: "Your baby is the sickest up there." I knew in my heart she was going to die.

At lam we were taken to NICU, where she continued to deteriorate through the night, until at 6.50am the machines were turned off. We held her for the first time as she quickly died.

Back home I had a nagging feeling that I was not getting better, and in my third week I haemorrhaged. Back in hospital, with another set of doctors, I was told I had retained placenta. Another new doctor removed the remaining pieces of placenta with tongs, without much prior warning.

After this I began a steady downhill slide into blackness. One minute I had been pregnant, the next my baby was gone and I felt physically very weak. I received help from various health professionals, but their focus was my weight loss and the death of my baby, whereas for me it was trying to grapple with the events.

By some miracle I became pregnant 18 months later, despite my being very, very underweight. I had an excellent, physically healthy pregnancy, but in reality I just cut myself off at the neck and ignored it.

At full term our second daughter was induced and delivered.

Then my PTSD really kicked in, everything just came back to me. I actually sought out help for PTSD, something I had heard might be my problem. I wanted to scream at the world: "I am NOT depressed, listen to me. This is something different!" At last I was getting help with what had happened, not just help for the loss of my first baby.

At the same time, attending a medical disciplinary tribunal really forced me to own the events surrounding what happened to me. Acknowledging they actually belonged to me put me on the road to recovery.

I was no longer looking up seeing this "bubble of a movie" and occasionally reaching out and touching it, realising that what I was "seeing" actually happened to me. Now it was unmistakably mine.

Two years on I am beyond the destructive grasp of the trauma, although at times a tentacle can reach out and grab me, if circumstances trigger it. But it is never as intense as it was.

I want all women to get help for PTSD early on in their postnatal care and all women to be allowed to talk, talk and talk their birth experience out.