

Avoiding an Episiotomy

When talking with your caregiver about episiotomy, don't ask if he or she routinely does episiotomies. The standard answer is "only when they are necessary." Some doctors think they are "necessary" 95% of the time! It's much better to tell your caregiver that you want to avoid an episiotomy and ask how he or she can help you achieve your goal.

If your caregiver doesn't have any suggestions for avoiding an episiotomy, you may want to consider changing caregivers. You need to decide if you would rather risk a tear than have an episiotomy and tell your caregiver. The more experienced a caregiver in avoiding episiotomies, the better your chances are of an intact perineum or a minor tear.

Following are things that the woman and her caregiver can do to help safely avoid an episiotomy:

PRENATALLY:

- Pelvic floor contraction exercise (Kegel and Super Kegel)
- Pelvic floor relaxation and "bulging" exercise
- Practice various positions for second stage: semi-sitting, side-lying, all fours, standing/leaning, squatting, etc.
- Gentle perineal massage [note: recent studies have been unable to prove that perineal massage reduces the risk of tearing, and may actually weaken the tissues, making the perineum more susceptible to tearing *if done too strenuously.*]
- Education - know what to expect during second stage
- Good nutrition to promote healthy tissues

DURING SECOND STAGE:

- Reassurance and encouragement that intense sensations are normal
- Relaxation of the perineum
- Spontaneous bearing down (DON'T RUSH) Push only when you feel the urge.
- No breath-holding pushing - LISTEN TO YOUR BODY!!!
- Positions of comfort or to promote slow progress: gravity-neutral positions to promote progress (semi-sitting, squatting, standing, supported squat)
- Use of mirror, touch of the baby's head to encourage efficient bearing down efforts
- Perineal massage and support
 - Hot compresses
 - Cessation of bearing down when stretching and burning are felt; pant and blow instead



Perineal Massage

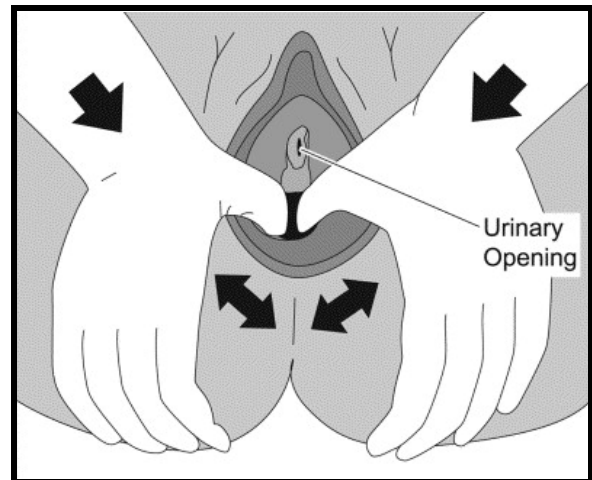
EXCERPT FROM THE BIRTH BOOK BY WILLIAM AND MARTHA SEARS

The better you prepare your perineal tissues for the stretching of birth, the less they will tear, and the better they will heal. Like training muscles to perform at their best in an athletic event, conditioning the tissues around the vaginal opening with massage prepares the perineum to perform. Midwives report that women who practice perineal massage daily in the last six weeks of pregnancy experience less stinging sensation during crowning. Mothers with a more conditioned perineum are less likely to tear or get an episiotomy. An added value of perineal massage is that it familiarizes a woman with stretching sensations in this area so she will more easily relax these stretching muscles when stinging occurs just before the moment of birth.

TRY THIS TECHNIQUE:

Scrub your hands and trim your thumb nails. Sit in a warm comfortable area, spreading your legs apart in a semi-sitting birthing position. To become familiar with your perineal area use a mirror for the first few massages (a floor-to-ceiling mirror works best). Use massage oil, such as pure vegetable oil, or a water-soluble lubricant, such as K-Y Jelly (not a petroleum-based oil) on your fingers and thumbs and around your perineum.

- Insert your thumbs as deeply as you can inside your vagina and spread your legs. Press the perineal area down toward the rectum and toward the sides. Gently continue to stretch this opening until you feel a slight burn or tingling.
- Hold this stretch until the tingling subsides and gently massage the lower part of the vaginal canal back and forth.
- While massaging, hook your thumbs onto the sides of the vaginal canal and gently pull these tissues forward, as your baby's head will do during delivery.
- Finally, massage the tissues between the thumb and forefinger back and forth for about a minute.



Being too vigorous could cause bruising or swelling in these sensitive tissues. During the massage avoid pressure on the urethra as this could induce irritation or infection. As you become adept with this procedure, add Kegel exercises to your routine to help you get the feel for your pelvic muscles. Do this ritual daily beginning around week 34 of pregnancy.

Many midwives and obstetricians believe that perineal massage is neither useful nor necessary as long as the mother's perineum is supported during crowning, her pushing is properly timed, and the baby's head and shoulders are eased out. Discuss the value of perineal massage with your birth attendant.