

MY NEMESIS: LIFE-AT WHAT PRICE?

‘A thing of beauty is a joy forever’. Blue Sapphires are my favourite gemstone which I love to look at for their rich, abyss of colour like a vast stormy sea with sparkling depth. My husband (Jason) and I decided while our daughter was being born by emergency Caesarean, to stay with our original decision to name our baby, if it should be a girl, Sapphire. As she is something precious to us and to be treasured, something priceless. Priceless indeed, for I was just hanging on unknowingly to my life, as we discussed possible names for our impending new arrival, to our lives. Jason explained to me afterwards that the reason for him bringing up the topic of names at that moment was to keep me talking and conscious while my blood arrived. I had haemorrhaged and had lost an estimated



four to five units of blood, which is more than approximately half. I remember a dream like sequence of activities enacted in front of me and strange sensations of tugging inside me with pain. I mumbled to Jason that I could still feel pain and he beckoned for a top up for my epidural. I had several top ups. It was evening time. Maybe the agony of prolonged contractions had made me hypersensitive. Why had I been denied the epidural around 5.30am that morning when I had requested it on my maternity plan and practically begged for it in my hospital room later that morning? Why had the controller insisted that I have pethidine when I'd expressly written in my birth plan that I did not want pethidine. I had heard during my antenatal classes that pethidine had been known to make some women drowsy and disoriented, but leaving them in pain unable to communicate their torment; and this is what happened to me.

My contractions were so strong that they were off the chart. I was gripping the headboard of the bed with excruciating pain in my lower belly and painful shooting up my back. The pain in my belly was like a red hot glow that periodically intensified and receded as my womb contracted pulling my ligaments taught as though at snapping point, and then a shooting sharp almost indescribable unique pulsating pain ascended from my lower back up my spine to my neck and head. It was almost like the sensation of touching an electrified fence, but far more intense and painful pulsing up my back cyclically intensifying and subsiding. My TENS machine which was supposed to help reduce the pain was now adding to the discomfort and as I pressed its buttons with each contraction, extra pain was layered onto my contractions and despite Jason re-wetting the TENS machine electrodes on my back, the pain intensified and it felt like burning under the electrode pads. Jason suggested that he remove the electrodes. I wanted anything that would reduce the pain, so for a couple of hours I went without pain relief. Why hadn't the emergency buzzer been answered? Jason had hit the buzzer at least eight times. I was in agony and drifting in and out of consciousness.

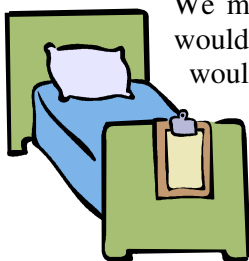
Jason could not leave me alone in the room to call for help – he was afraid that something bad could happen when he was out. He desperately tried to mop my waters which had broken (akin to a splitting polythene bag pouring out warm viscous water) hours before and in which I was lying. My legs felt like lead and numb. I could barely feel my legs and toes and therefore couldn't go to the toilet, so I had no choice but to wet the already wet bed. Is this the indignation that women have to suffer in this country to give birth? This degradation? Why hadn't the midwife come to help Jason? All I think these days looking back is neglect. I hazily remember hearing the door to the room opening, and a female voice telling me that I should wait longer before having the epidural to stop the slowing down of the dilation of my cervix and Jason explaining to her that I did not want pethidine (which can also make the baby drowsy).

She left the room and returned with a male voice whose face I could not turn to see as my legs were numb and I was gripping the headboard face down pleading and asking powerlessly for them to

make the pain stop. My voice was weak and barely audible. Jason pressed his face close to mine in order to hear me. I gripped Jason's hand – one grip for yes and two for no. My mind was wafting in and out of the room and oblivion. The male voice strongly suggested that I take the pethidine first despite the plea for an epidural. Jason explained to him that the consultant, the previous night had recommended and affirmed that I could have an epidural. Why had I listened to the subliminal hippy messages in the antenatal class for a natural birth? It seemed that only the doctors had adequately answered my questions on pain relief. Why did so many women and midwives seem to try to avoid discussing just how painful birth would be? Were they in some form of denial?

The day before (Christmas Eve) when I had been admitted, Jason and I stayed overnight at the hospital. By the time we'd reached the hospital the length rate of the contractions had subsided and as it would take us a long time to return home and being Christmas Eve the consultant in charge allowed Jason and myself to stay in a private room for the night. I had ketones (fats) in my urine and they wanted to keep me in for observation. I was very exhausted, my belly stretched out far in front of me and my shoulders hunching as I tried to walk without waddling or arching my back to counteract the weight. It was like having a set of gym weights attached to my tummy. Jason moved the twin beds close together and I lay in bed on my side to face him in the other bed. I could see that he too was exhausted and troubled. I reached out and held his hand and told him not to worry, looked into his azure blue eyes and stoked his feather soft hair. We exclaimed and remarked at how relieved and lucky we were to be able to stay for the night.

Early, the next morning the nurse called in to brief us and she ordered us breakfast. She took great care of us. My blood pressure and contractions were taken by a trainee midwife and a Professor arrived with a few students to consult me. I suddenly felt like a freaky curiosity again – a frequent theme throughout my pregnancy. What was it that was so unusual about my pregnancy or the way that I looked? Unlike most pregnant women that I had seen, my bump was way out like a giant longitudinal egg that almost touched my knees when I sat down. When I heard the professor's voice, it sounded very familiar which was kind of comforting. He introduced himself and the students and told me that he had studied pregnancy and birth in West African women and how they differed in pregnancy from Caucasian women, including how their labours tend to be longer. At last somebody who understood what I was going through and knew what they were doing, I thought. Phew. He looked at my notes and quizzed why I had crossed out epidural. I told him how my antenatal classes and fear of the risk of paralysis from epidurals had persuaded me to cross this out on my birth plan although this had been my first choice from the start. It seemed strange that most of the midwives had seemed anti-epidural and pro-pethidine whereas the doctors recommended epidurals. I wished later that I had not been swayed and had listened to sound, empathetic advice. He suggested that I take the epidural and agreed and he noted it in my birth plan. He assured me that I could have it when I needed it. I agreed to be induced (labour accelerated with hormones) as my labour was progressing slowly. My labour contractions had begun two days earlier and continually accelerated and subsided. Later we found out that the bladder was so swollen that it was not allowing the womb to contract fully and slowed the progress of my back labour.



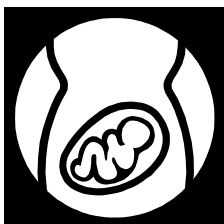
We moved to the shared ward and I was induced. How primitive childbirth is. I would have thought that with so many technological advances that something better would have been devised for measuring the dilation of the cervix other than fingers!

Another question that was sidelined in the antenatal class. I dreaded each time those words were echoed saying that they were going to inspect the dilation of my cervix - it is uncomfortably painful having a hand placed in one's private space. It was like having my sacred place invaded. Why can't someone invent a smooth miniature shaped capsule like gadget that's covered in gel that slides in comfortably and takes electronic readings or scans of the size of the

cervical dilation. Surely women deserve better doing the important job of bringing new life into the world than the finger treatment. I had electrodes attached to me to measure the size and frequency of the contractions and Jason and I were left in the cloth cubicle and periodically checked. I was induced and I had gas and air which worked for now on the contractions. Jason held my hand at each contraction and reminded me to breath in and out as we had learned in the antenatal classes. I had to ride the wave with the increased intensity of each contraction, as I had read in a pregnancy article. These contractions felt intense, but I was blissfully unaware of how much more intense they would be the next morning after my waters broke.

As the day progressed, I was asking Jason to open the gas valve wider. There was always a delay between breathing the gas and the pain subsiding, so I had to breath at the right moment. After a while I gave Jason a coded thumbs up to open and close the gas valve so that I didn't have to worry about fumbling in panic for the valve. Poor Jason didn't eat anything from the evening of Christmas until I was rescued from the labour room to the delivery room. Jason and I had drawn the curtains and were talking quietly when a midwife who we had observed standing outside our cubicle snooping on our conversation for a short while entered the cubicle. She asked Jason to leave. I insisted that he stay. We debated for a short while and I pointed out to her that I had requested in my labour plan that my husband be present with me throughout the labour. Up until this point, I had been relatively calm, but this woman got under my skin with her crazy request. No woman should have to undergo labour and birth without a trusted and familiar loved one present. I was not going to yield on this point and I was going to defend this right and above all Jason's right to be present. I think this was what aggravated me most. I felt that it was a personal attack on my cherished husband and that the midwife had shot an arrow instigating war. I thought we should have listened to Jason's manager and booked a private room. I asked the midwife how much a private labour room would cost. We could book the room on our BUPA health insurance cover. She told me there were none available and after I demanded to see the top consultant she went to enquire and returned saying that there was a room available that we could have, but that there was only one bed. I thought that was some progress as long as Jason and I could stay together, we'd sleep on the floor (although unsuitable) if necessary. So she reluctantly helped us to move room and left Jason to reset the gas and air. What do people pay national insurance for, I wonder. It's something that I would expect from an impoverished underdeveloped country, not a superpower with billions worth of high value currency units. Maybe the wealth of a nation needs to be redefined as the standard of its health care and the health of its citizens. So that was where my labour began to turn into a nightmare.

One would expect that a woman with signs of labour would find it easy to be admitted to hospital. This is where one wonders why some people join the caring (or in some cases the uncaring and neglectful) profession. Is it because they have a sadistic side to their personality and seek the opportunity to watch others in pain or inflict it? The type of person who casts an ugly unforgettable shadow over the great and priceless work of those in the majority who do have good patient care in the medical arena. Maybe they should give people personality or other psychometric tests to root out the people who neglect and abuse their roles and to select caring individuals.



This was a running theme in my pregnancy – the feeling of vulnerability and powerlessness. I felt alone. Jason felt alone. Nothing about it seemed 'normal,' but some of the hospital midwives fell silent when I asked certain questions as though they did not want to answer some of my questions. I received conflicting information. One of the receptionists exclaimed that my pregnancy scared her. Why, I wondered. I hadn't been told that there was anything to worry about. I was a couple of weeks from the goal post (having

my baby). Towards the end I felt confused. I had decisions to make about my birth plan but they all dodged sitting down to go through it with me, and I saw a different person at each antenatal hospital check-up so there was no continuity, so I filled it in as best as I could, jotted down my questions and asked the consultant doctor whom I saw a week before my due date. He was much more forthcoming with information and was very helpful. I concluded that in hindsight, I would have preferred a pre-planned hi-tech birth anaesthetised to the hilt from the onset and surgeons at the ready.

Why do we women put ourselves through the pain of labour when there is help on hand in the form of my new found friends, the anaesthetist and obstetrician? I think it's partly ignorance of expectations or for some people the enjoyment of pain (bizarre). Maybe some people experience much less pain than others, just as each pregnancy is unique. I had been having painful contractions from about a month before the birth. I had dismissed them as trapped nerves initially, as they were infrequent and very temporary and I was told they were Braxton Hicks contractions. They occurred at approximately the same part of the day. I confirmed that they were contractions when I saw the consultant a week before the due date and he also explained how the womb and ligaments tighten and cause the pain.



The contractions became more severe on Christmas Eve when I did the things had been suggested in our antenatal class such as bathing, TENS machine, hot water bottle, massage to ease the pain and I ate a light meal. We counted the contractions and called the hospital when the contractions were 3 minutes apart as instructed by the hospital. The midwife who answered the phone was unsympathetic and suggested that I take another bath and call back in a couple of hours (which ironically was after her shift and finished). She also was rude enough, I thought, to ask why I had chosen a hospital further away from home than my local hospital. That agitated me. I exclaimed to Jason that it was irrelevant and that it was the patient charter to choose the hospital of my choice. I decide that the next time I phoned in I would tell her off, but the next time her shift had ended and I had a much more sympathetic person listening. We were excited and were looking forward to seeing the new addition to our household. All those months of suffering and wonderment were about to conclude. Jason loaded the car with the packed bags and after driving a few metres down the road and returning for forgotten items such as nourishment a couple of times, we were off. Heading into central London...



To be continued in the October issue of Magna

Deli Vinyo Buckley-Keogh