

Nurse-Midwife —A Helper To Women In Labour

*By Miss Rosamma N.V.

LABOUR can be described as a short, but hard and difficult journey—a journey full of anxiety and apprehension, particularly for those women who have not been well-prepared to undertake the journey. A nurse can make the journey happy and fearless if she is able to render an understanding care to the woman in labour.

The nurse can help her in many ways when she starts the painful journey which has an happy end. The comfort the woman derive during the period depends upon the attitude of the midwife who is expected to be her constant companion.

The preparation of the labour starts from the ante-natal period. Except in unwanted pregnancies the woman is always happy to attain motherhood which is the crowning of womanhood. But at the same time a kind of fear creeps into her mind. She develops fears about her own health and that of the offspring comparing herself with many cases of complications known to her. She has many questions in her mind, particularly during her first delivery. A good midwife can help her by clearing her doubts and giving her confidence.

Ante-natal care does not mean only palpation, blood test, urine test, pelvic measurement, blood pressure and weight. These are only physical aspects of ante-natal care. What about the mental aspect? Women are not attracted to ante-natal clinic because of the neglect of the mental aspect. Their mental preparation is as important as physical preparation. Sufficient time and opportunity must be provided for the woman to have a free and frank discussion with one of the qualified persons who could give the guidance and counselling needed. During ante-natal period the woman must be taken round the labour room in order to show her the facilities and equipments available for delivery. She must be

told about the signs and symptoms of labour and the action to be taken by her. Many women would like to know what items they are expected to bring along at the time of admission for labour.

After the preparation in ante-natal clinic the woman comes to the labour room. Since she has been prepared, it is easy to deal with her during the admission and labour.

In the labour room, on admission a warm welcome must be awaiting her. The midwife who receives her should never forget to show a pleasant smiling face. At the first instance itself the nurse must gain her confidence. It is also necessary for the nurse to show concern for her relatives. She should deal with them with courtesy. The nurse should think what she would have expected had she been in the patient's place. That is the best way to find out the physical, psychological and social needs of the patient.

Orientation is very important on admission and it must be according to the condition of the woman. If she is in extreme pain due to contractions or nearing second stage of labour she will not be interested to listen. If she is admitted in early labour she may want to know many things. Half of her fear can be removed by good orientation.

Next comes her stay in the labour room. Emotional support given during the labour eases her tension and anxiety enabling her to cope up with the situation in a much better way. By explaining some of the experiences that she may undergo during her journey of labour, the nurse can diminish her apprehension. KOPPLOIS in her article says "Nursing support during the first stage is a vital predecessor of nursing support during second stage".

The second stage is often a time of panic. To the woman the pain becomes unbearable and to the nurse it is difficult to make the patient listen to her instructions. Rush and hurry should be avoided

as far as possible. The trip from labour room to delivery room must be calm so that enough time is available for the preparation of the woman without creating fear in her mind by the nurse's hurried actions. During the 2nd stage the midwife must be very patient. This is the time she needs to practice one of the most important qualities of a midwife—PATIENCE. Remember that a patient is a patient, her emotions are not under control due to extreme pain and discomfort. She may shout; she may curse the world; but be calm and help her patiently in her trial.

Reassurance can do a lot to help the woman. When the doctor and the nurse share with the woman her progress—such as "I can see a little more of the baby's head now"—they reassure and encourage her to continue her efforts. Reassurance also is demonstrated by constantly keeping company with her. Never leave the patient alone while she needs support and encouragement during the 2nd stage which ends with the delivery of the baby.

What psychological help can be given during the third stage of labour? Now the woman experiences a sudden release of pain. Her tension and worries come to an end as soon as she hears the first cry of the newborn. She experiences the joy of being a mother for the first time or otherwise. She is eager to see her infant. Don't forget to show the mother her most important treasure in the world—the baby. Let her see the whole baby and rejoice with her, make her understand that everything is alright and observe her carefully to avoid any complications.

After the rush and hush are over allow the husband and the relatives to share the joy with the woman. The third stage should not be complicated by hurrying the work to be finished.

By completing the third stage of labour the journey has come to an end.

The journey of labour can be made pleasant and happy if proper help is given in time and if proper attitude is shown to her by the hospital staff. Appropriate psychological dealings reduces the physical ailments. □

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