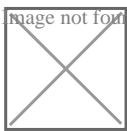


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The accompaniment of the father and the beginning of early lactation are two of the recommendations of the WHO to achieve more humanized deliveries. Autor: Taken from telediaridigital.net Publicado: 26/06/2019 | 03:29 pm

Science and tenderness for a memorable birth

If we want more births, birth should be a pleasant experience, an event to narrate from the enjoyment and not from the validation of evil myths

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The most wonderful thing about science is that it is alive

Richard Phillips Feynman

If we want more births, birth should be a pleasant experience, an event to narrate from the enjoyment and not from the validation of ill-fated myths, or from the uncomfortable shock of being trapped in an impersonal and standardized "productive flow" that also violently to the rest of the family keeping it aside.

On the cultural causes of that reality and the intention to reverse it was one of the most animated debates of the 17th. Congreso de la Sociedad Cubana de Ginecología y Obstetricia (SCGO), which reaffirmed the subjective weight of many obstacles that prevent women from giving birth at their own pace, keep evidence of that transcendental moment and feel emotionally and effectively accompanied in the work of delivery or cesarean section.

Every decision that undermines this right, every mechanical measure that does not take into account the impact

on the physical and psychological health of the mother and her relatives, is an act of obstetric violence whose individual and social impact should not be neglected, declared Professors Sara Urgellés and Jorge Delgado in the debate.

For decades, Cuba has guaranteed an effective clinical follow-up of its pregnant women to help them give birth in the best possible conditions. But pregnancy, childbirth and puerperium are not just physiological processes. According to Lizet Vila, director of the Proyecto Palomas who was invited to the congress, they are also cultural realities lived in a changing society, with a meaning of their own for every woman and every man who assumes the paternal role conscientiously.

Vila advocates the implementation of more loving births, based on recommendations from the World Health Organization (WHO) and studies that demonstrate the viability of humanized protocols, according to doctors Gwendolyn Pino, Anadys Segura and Guillermo Rodríguez.

The pain is unlearned

Pain is a relative experience, like any sensory response to external circumstances (cold, heat, fear, discomfort). Their intensity varies from one woman to another according to their beliefs, habits, behavior patterns.

The fear of suffering twitches the body at the wrong time and exhausts the future mother. In cultures attached to Nature, tradition helps to accept each contraction as an opportunity to advance. Today the WHO suggests that the parturient choose the most comfortable position, have greater mobility and expect spontaneous bids at their own pace. Institutionalized birth also needs flexible norms to apply what has been learned during psycho-prophylaxis and to resort to useful relaxation techniques: yoga, meditation, music, controlled breathing.

In the obstetric services it is urgent to prepare spaces for the couple or another relative to accompany them, offer pharmacological alternatives that keep the pain in adequate limits and cultivate the empathy of the health personnel so that they respect the beliefs and emotions of their patients, provide them with timely information. process and pay attention to their anguish without disparagement.

When the imposition of medical procedures based on a supposed superiority of knowledge is legitimized and the act of signing the informed consent is handled in an authoritarian or superficial manner, the cultural rights of that mother and her family are being violated.

Obstetric violence is also to cling to surpassed conceptions and not to consider new scientific evidences that make the procedures more flexible and give a more integral look to the needs of the parturient.

An example of this is the fast imposed to avoid aspiration of the food in a planned or emergency surgical act. Many mothers remember those hours of fatigue or thirst with displeasure and refuse to give birth again to avoid the ordeal. Today it is known that taking the organism to that catabolic state is much more risky, and it is indicated to give sweetened tea or fruit juice well filtered until two hours before surgery.

Neither are shaving, routine episiotomy, or vertical-sectioned cesarean, and it is inappropriate to supply vein

fluids at the operating room temperature, accelerate labor, or maintain fetal monitoring if there are no risks. These discomforts irritate, delay recovery and compromise the systematic nature of breastfeeding, but they are still applied by obstetricians who place their own comfort or speed of service before the maternal well-being.

As evidenced in this congress, the SCGO supports the right of women and their families to demand the humanized attention that corresponds to them by law, and to receive tenderness as an antidote to invisible gender violence, in order to deal positively with this happy pain.

<http://www.juventudrebelde.cu/index.php/en/cuba/2019-06-26/science-and-tenderness-for-a-memorable-birth>

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