

# Healthy Mothers, Healthy Babies

**C**ONTENTED and healthy, a newborn baby lies cradled in its mother's arms. The father is aglow with pride. Because this happy scene occurs millions of times every year, it is easy to take normal childbirth for granted. After all, it is a natural process—so, what is there to worry about?

Granted, births usually go well, but not always. Hence, prudent prospective parents take reasonable measures to avoid unnecessary complications. For example, they learn about the causes of childbirth problems, they seek quality prenatal care, and they take some simple steps to reduce risks during labor and

delivery. Let us consider these points in more detail.

## Causes of Childbirth Problems

One cause of childbirth problems for both mother and baby is lack of good care during pregnancy. Dr. Cheung Kam-lau, consultant pediatrician for the neonatal care unit of Prince of Wales Hospital in Hong Kong, says that “having no prenatal care can put pregnancies in high risk.” He also states that “most of these mothers expect healthy, chubby babies, but things just don't always happen ideally.”



Regarding the problems that can affect mothers, the *Journal of the American Medical Women's Association* states that "the major direct causes of maternal mortality" are excessive bleeding, obstructed labor, infection, and abnormally high blood pressure. Effective treatments are well-known, however, and in most cases "modern medical care . . . does not require highly technical interventions," the journal adds.

Readily available care could also help many babies. The *UN Chronicle* reports that

**According to figures released in October 2007, one woman dies nearly every minute—536,000 a year—because of problems associated with pregnancy.**

**—United Nations Population Fund**

"two thirds of newborn deaths could be prevented if all mothers and newborns" obtained medical treatment that is "well-known, feasible and deliverable without complex technology." Sadly, though, the lack of knowledge and the laxity in prenatal care on the part of mothers is all too common, reports the Philippines News Agency.

#### **Optimal Prenatal Care for Mother and Baby**

"Healthier mothers have healthier babies," says the *UN Chronicle*. It also observes that when a woman gets inadequate medical care or none at all during pregnancy, childbirth, and the period thereafter, her baby also receives little or no medical care.

In some lands it may be difficult for a pregnant woman to get adequate care. Perhaps she has far to travel, or she may be unable to cover medical costs. Still, if at all possible, an expectant mother should try to get at least some professional prenatal care. This is particularly important for a woman who lives by the teachings found in the Holy Bible, which

states that human life is sacred, including that of the unborn.—Exodus 21:22, 23;\* Deuteronomy 22:8.

Does adequate care mean seeing a doctor every week? No, not necessarily. In regard to certain common complications that arise during pregnancy and childbirth, the World Health Organization (WHO) "found that women who visited their doctors only four times during their pregnancy" enjoyed results that "were comparable to those who had 12 or more visits."

#### **What Doctors May Do**

In order to improve prospects for the mother and her unborn child, health-care professionals, particularly those who specialize in obstetrics, take the following steps:

- They review the patient's medical history and perform an examination to determine risk and forestall complications that may involve the mother or her developing baby.

- They may take blood and urine samples to check for such problems as anemia, infection, Rh incompatibility, and disease. The latter may include diabetes, rubella, sexually transmitted diseases, and kidney disease, which can elevate blood pressure.

- When advisable and acceptable to the patient, they may recommend vaccinations for such things as influenza, tetanus, and Rh incompatibility.

- They may also recommend vitamin supplements, especially folic acid.

When doctors identify the risks associated with individual pregnancies and take the needed precautions—or help the mother to do so—they enhance the prospects of a positive outcome for her and her unborn baby.

#### **Minimizing Risks During Labor and Delivery**

"The most dangerous time for a pregnant woman is the critical period around labour

\* The original Hebrew text refers to a fatal accident to either mother or unborn child.



and delivery,” says Joy Phumaphi, former assistant director general for Family and Community Health at WHO. What can be done to prevent serious problems, even life-threatening ones, at this critical time? Actually, the steps are simple, but they do need to be taken in advance.\* This is especially important for those who refuse blood transfusions for Bible-based reasons or for those who want to avoid blood because of the significant medical risks.—Acts 15:20, 28, 29.

Such patients should do what they reasonably can to ensure that the health-care provider, whether a doctor or a midwife, is both competent and experienced in administering medical alternatives to blood transfusion. Also, expectant parents would be wise to check that the hospital or delivery facility is willing to cooperate.# Here are two good

\* See the box “Preparation During Pregnancy.”

# Couples who are Jehovah’s Witnesses may consult with the local Hospital Liaison Committee (HLC) for Jehovah’s Witnesses before the birth of their child. Committee members visit hospitals and doctors to provide them with medical information on the nonblood management of Witness patients. Additionally, HLCs likely can assist in finding a physician who respects the patient’s beliefs and who has experience in non-blood medical management.

questions to ask the doctor: 1. What will you do if the mother or the baby loses a significant amount of blood or if there are other complications? 2. If you are not here when the baby comes, what alternative arrangements will be made?

**“Each year 3.3 million babies are stillborn and more than 4 million newborns die within 28 days of coming into the world.”—UN Chronicle**

The prudent woman will, of course, check with her doctor to ensure that her blood count is as high as possible within the normal range prior to labor. To build up the patient’s blood, the doctor, in turn, might recommend that she take folic acid and other B-group vitamins, as well as iron supplements.

The doctor will also consider a number of other factors. For example, did his patient’s prenatal visits reveal any health problems that may need attention? Does the

prospective mother need to be off her feet? Should she get more rest? Would it be wise for her to gain or lose weight or get more exercise? And does she need to give more attention to bodily hygiene, including oral hygiene?

Studies show that gum disease in pregnant women is associated with an increased risk of preeclampsia, a serious complication that is characterized by, among other things, a sudden rise in blood pressure, severe headache, and edema (excess buildup of fluid in the tissues).<sup>\*</sup> Preeclampsia can lead to premature delivery and is a leading cause of fetal

<sup>\*</sup> Although more studies are required to determine if gum disease causes an increased risk of preeclampsia, it is always wise to take good care of your gums and teeth.

and maternal death, especially in developing lands.

Indeed, a careful physician will give attention to any sign of infection in the prospective mother. And if she has premature labor pains, he will recommend prompt hospitalization, which can be lifesaving.

“Women risk death to give life,” says Dr. Quazi Monirul Islam, director at WHO’s Department of Making Pregnancy Safer. But good medical care during pregnancy, at birth, and immediately afterward can help to avert many complications, even death. Most important, of course, try to maintain good health. After all, if you want a healthy baby, you need to do your best to be a healthy mother.

## PREPARATION DURING PREGNANCY

**1. Choose your hospital, doctor, or midwife wisely by doing advance research.**

**2. Make regular visits to your doctor or midwife, establishing a trusting, friendly relationship.**

**3. Give careful attention to your health. If possible, take the appropriate vitamins, but avoid medication (even over-the-counter products) unless your doctor approves. It is wise to avoid alcohol. “Although the highest risk is to babies whose mothers drink heavily, it is not clear yet**

**whether there is any completely safe level of alcohol during pregnancy,” states the National Institute on Alcohol Abuse and Alcoholism.**

**4. If you experience premature labor pains (prior to the 37th week), contact your doctor or maternity ward immediately. Prompt attention may help to prevent a premature delivery and the complications that can result.\***

<sup>\*</sup> Blood transfusions are commonly given to anemic premature babies, whose organs have difficulty producing sufficient red blood cells.

**5. Document personal decisions relating to medical care. For example, many have found it helpful to have a durable power of attorney (DPA) card filled out ahead of time. Find out what is used and legally acceptable in your country.**

**6. After the birth be mindful of your health and that of your baby, especially if the baby came prematurely. Consult the pediatrician right away if you observe any problems.**