

Home birth – why not?

Giving birth at home reinforces the importance of birth as an integral part of family life. At St Thomas' Hospital we are committed to supporting your informed choices. We encourage home birth for women who have a normal, uncomplicated pregnancy at the onset of labour. We hope this leaflet will answer any questions you may have.

Possible benefits

There are many potential benefits to giving birth at home.

- You are more likely to feel relaxed in your home, which can help the progress of your labour.
- Some research has found that women who give birth at home tend to use less pain relief than those in hospital, suggesting birth at home may be more manageable.
- You can choose who is present during the birth and afterwards, so you won't need to be separated from your family or partner.
- You don't have to worry about when to go to hospital or how to get there.
- Research shows that women who choose to have a home birth are less likely to need an epidural or instrumental birth (using forceps or a suction cup).
- You will have two midwives present during your birth, providing safe one-to-one care.
- The midwives are there to support you during your labour. If at any time you change your mind, they can arrange transfer into hospital.
- There is less risk of hospital-acquired infection.

Possible disadvantages

There are also potential disadvantages to giving birth at home.

- If you would like stronger pain relief, you will need to transfer into hospital.

- In an emergency the midwife will organise transfer to your local hospital by ambulance. This understandably may cause anxiety for you and your family. Research shows that most women who transfer in during labour still report their birth as a positive experience.

Who is suitable for home birth?

There are certain criteria to determine whether a woman is suitable for a home birth:

- an uncomplicated pregnancy
- singleton pregnancy (not twins, triplets etc)
- the baby being head-down in the womb (cephalic presentation)
- spontaneous onset of labour between 37 weeks and 42 weeks
- women having their 1st-6th baby without previous complication, or where recurrence of a complication would not be anticipated
- women with a body mass index (BMI) between 18.5 or 35 at booking.

Is our house / flat suitable?

People in the London area live in many different types of houses and flats, often not very large. We ask that you have suitable access to your home for an ambulance in an emergency. You can discuss the suitability of your home further with your midwife on an individual basis.

Is it safe?

Home birth is safe for some women. Your midwife and/or obstetrician can help you decide if it is the right choice for you. The Birthplace Study 2011 found that for women having a second or subsequent baby, home births appeared to be safe for the baby and offered benefits for the mother.

For women having a first baby, a planned home birth increases the risk of a poor outcome for the baby by a very small amount, compared with giving birth in hospital. This includes a slightly higher risk that the baby will be injured, become seriously unwell or die during or just after birth. These outcomes are very rare among healthy women with uncomplicated pregnancies, and they can happen in any birth setting.

The Birthplace Study showed that the transfer rate into hospital was 45% for first-time mothers and 10% for women in subsequent pregnancies.

The Royal College of Midwives and the Royal College of Obstetricians and Gynaecologists support home birth for women with uncomplicated pregnancies, and suggest it may have considerable benefits for them and their families. There is considerable evidence showing that giving birth at home increases a woman's likelihood of a birth that is both satisfying and safe.

Communication is key. Your midwife will be very open and honest about the need for intervention if the occasion arises.

Reasons for transfer to hospital

There are a number of reasons why a woman might transfer to hospital during a home birth:

- the woman chooses to
- the woman wants stronger pain relief
- the baby has done a poo before it is born (called ‘meconium-stained liquor’), which can cause problems for the baby
- bleeding from the vagina
- slow progress of the birth
- prolonged rupture of membranes
- concerns over the mother’s or the baby’s wellbeing.

We can continue to provide care while transferring into the local hospital.

Who will care for me and my baby?

Two qualified midwives will be present during the birth. During the labour and birth we will closely but discreetly monitor the well-being of you and your baby.

Can I have pain relief at home?

There are a number of options for pain relief during a home birth:

- **hydrotherapy** – water to help to relax and make contractions seem less painful

- **transcutaneous electrical nerve stimulation (TENS)** – small, safe amounts of electrical current that can help relieve pain
- **gas and air** – a mixture of oxygen and nitrous oxide gas that can help reduce pain.

Can I have a water birth?

Yes – you can buy or hire a pool online. Some midwife teams can lend women pools on a first-come first-served basis. We ask that you buy a replacement liner.

What about the mess?

Usually there is very little mess. The midwives will bring disposable pads. We ask that you provide some sheets that you don't mind getting soiled. The midwives will dispose all the clinical waste appropriately.

What if I need stitches?

Midwives who attend birth can stitch most perineal tears. Any complicated tears would require transfer to hospital.

Information for partners

A lot of partners have initial doubts. Most who have been present at home and hospital births prefer home birth. You should discuss your plans together during the pregnancy as it is important you both feel comfortable with the final decision.

How to arrange a home birth

You and your birthing partner are invited to attend our home birth workshop. It takes place on the first Friday of every month, 6-8pm in the education room on the 8th floor in St Thomas' Hospital. We can explain what is involved and allow time for individual questions.

References

RCOG (2007) Home births-RCOG and RCM joint statement number 2. [online] Available: www.rcog.org.uk/womens-health/clinical-guidance/home-births [accessed 18/08/13]

Brocklehurst P. et al (2011) Perinatal and maternal outcomes by planned place of birth for healthy women with low risk pregnancies :the birth place in England national prospective cohort study. *BMJ* 343:d7400. www.npeu.ox.ac.uk/birthplace/results

Find out more

Association for Improvements in the Maternity Services

Provides support and information about maternity choices.

t: 0300 365 0663 **w:** www.aims.org.uk

Which? Birth Choice

Understand maternity options, get expert advice and find local places that are the best fit for you.

w: www.which.co.uk/birth-choice

Midwifery Matters

A support group of midwives, student midwives and others in the UK committed to improving the maternity care provided by the NHS.

w: www.midwifery.org.uk

Contact us

Language support services – If you need an interpreter or information about your care in a different language or format, please get in touch using the following contact details.

t: 020 7188 8815 **fax:** 020 7188 5953

NHS Choices – Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

w: www.nhs.uk

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