



**Medical  
Blueprints**

## ***ERAD: ENHANCED RECOVERY AFTER DELIVERY REPORT #2796***

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**BACKGROUND:** Nearly four million babies are born in the United States each year. Of those, just over 2.5 million are vaginal births and 1.2 million are c-section, or cesarean birth. A c-section is surgery in which your baby is born through a cut that your doctor makes in your belly and uterus. For some women and babies, a c-section is safer than vaginal birth. There are medical reasons a woman may have a c-section like problems with the placenta, such as placenta previa, which can cause dangerous bleeding during vaginal birth; you have an infection, like HIV or genital herpes, which can be passed to the baby during vaginal birth; you have a medical condition that may make vaginal birth risky, like diabetes or high blood pressure; or you're having multiple babies. There can also be complications that arise during delivery which lead to a c-section like labor not progressing as it should; the baby is too large; the baby isn't in a head-down position; the umbilical cord is pinched or prolapsed; or the baby is in distress.

(Source: <https://www.cdc.gov/nchs/fastats/births.htm> and <https://www.marchofdimes.org/pregnancy/c-section-medical-reasons.aspx>)

**PREP FOR PREGNANCY:** The key for making informed decisions during pregnancy and delivery is knowledge. To keep a healthy balance, most experts recommend taking a childbirth class taught by a registered labor nurse or a certified childbirth educator. The goal should be to learn the basics of the labor process, including how to know when it's time to get to the hospital or birthing center. "It's also helpful to know what interventions you may see during labor so you can share in the decision-making to promote a positive birth experience," says Juliana A. Parker, RN, RNC-OB, owner of Accel OB Partners in Care. If you want to learn more about something, like options for pain medications or the chances of an episiotomy (a surgical cut made at the opening of the vagina during childbirth to aid a difficult delivery and prevent rupture of tissues), no need to Google that stuff. It's best to talk with your doctor or midwife. Mindfulness meditation has been shown to help first-time moms manage their fears, as well as reduce symptoms of prenatal and postpartum depression. "It relaxes your mind, giving it the rest it deserves," says Jeff Livingston, MD, obstetrician gynecologist at Texas Health HEB. Incorporating meditation into your routine can help create the habit for when the baby arrives.

(Source: <https://www.healthline.com/health/pregnancy/how-much-do-you-really-need-to-prepare-for-labor#Get-educated,-but-dont-freak-yourself-out>)

**RECOVERING AFTER DELIVERY:** During the first six weeks after childbirth, pay attention to your body. You'll be tired and focused on the baby but try to notice changes to your body. If you've had a C-section, you'll have more restrictions about what you can do in the days and weeks following childbirth. A few things to expect is as your uterus shrinks back into its normal size and shape, you will feel pain in your abdomen called "afterpains." Most of these will be dull, but some may be sharp. It is very common to be constipated in the days following childbirth due to receiving pain-relieving drugs in the hospital, which could slow down your bowels, or if you had anesthesia for any reason. The first few days of breastfeeding, it is normal for women to have sore nipples and breasts. If the soreness continues beyond a few days, it could be that the baby isn't latching correctly. You may be eager for the swelling during your pregnancy to go away. It's known as postpartum edema, which your body will continue to hold on to because of an increase in progesterone. So, stay cautious and if you feel that something is not right with you or the baby, contact your doctor immediately.

(Source: <https://familydoctor.org/recovering-from-delivery/>)

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