

8 Most Common Vaginal Birth Myths Debunked By A Gynaecologist

Many women choose to deliver their baby via vaginal birth. However, one must understand that several factors play a key role in driving the decision for how the delivery will be executed. You must not believe in myths and consult your doctor in ca...

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Irrespective of a woman's choice to deliver her baby however she wants, society always has tons of unsolicited advice to offer. Some of them are given out of concern and personal experience, while others are myths birthed from fake information.

Vaginal delivery may be the most natural way for a baby to enter this world, but myths can make it a little scary for the pregnant woman to deal with certain situations. We approached *Dr Anisha Gala, Senior Consultant - Obstetrics, Fernandez Hospital*, to help us debunk the eight most common myths surrounding vaginal delivery.

Myth 1: You Can Stimulate Labour Naturally

Ever heard that if your due date is extended, you can induce labour by drinking castor oil, stimulating the nipples, pressing acupuncture points, hypnosis, eating spicy food or having sex? None of them is true.

Nipple stimulation releases oxytocin which can cause uterine contractions but not enough to induce labour. Similarly, walking is an exercise only, hypnosis helps with pain management, acupuncture is good for musculoskeletal pain relief, castor oil induces intestinal motility, spicy food increases gastritis, and sex can cause pelvic cramps, but none of them can induce labour.

Myth 2: Epidural Increases Chances Of Caesarean

Epidural analgesia helps with pain management. The timings and doses are monitored by the doctor during labour. In fact, taking an epidural can ease the descent of the baby by relaxing pelvic muscles and relieving pain. It can make labour a little enjoyable.

The pregnant woman remains at ease during the birth and takes part in the conversation regarding her health as well as of the baby. There is no evidence that epidural increases chances for caesarean.

Myth 3: Vaginal Birth Forms Instant Bond Between Mother & Baby

Skin-to-skin contact is encouraged in vaginal and caesarean births if there are no complications with the newborn. However, some maternal instincts may take some time to develop for some new mothers, while there may be an instant connection with others.

Myth 4: You Must Give Birth On Your Back

Dr Gala shared that there are many birthing positions, including all fours, propped-up, upright and left lateral along with delivering on your back. A doctor or midwife only can guide the patient regarding this. There is no hard and fast rule about the positions in which one can give birth.

Myth 5: Small Babies or Wide Hips Make For Easy Birth

Uterine contractions, foetal heart tracings and presentation of the foetus are among the major factors driving the birthing plan. The obstetrician explained that while the pelvic size can help with vaginal delivery, the small size of the baby can be an unhealthy indicator.

Myth 6: Your Labour Will Be Like Your Mother

Labour depends on many facts like age, health conditions, hypertension, birth weight, and number of foetuses in the uterus. There is no evidence that a woman's labour would be like her mother's.

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Myth 7: You Cannot Deliver Twins Via Vaginal Birth

The doctor agrees that the rate of caesarean is higher when a woman is carrying twins or more babies than in single pregnancies. However, there is a high chance that one can deliver twins via vaginal birth.

Whether or not a woman would have a vaginal birth or caesarean, only a doctor can tell after considering hundreds of factors. A [pregnant woman](#) must discuss her options at length with her doctor and make an informed decision.

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Myth 8: Your Birth Plan Is The Best

You may devise any birth plan you want, but you cannot execute it without the supervision of a doctor or midwife. You can definitely discuss options with your doctor after considering your health as well as the baby's.

For example, if you have chosen vaginal birth in water but a few complications at the last moment might prompt the doctor to opt for a [C-section](#). Therefore, you must be ready and listen to your doctor because only an expert knows the best.