The Mindful Cesarean

Toolkit for a Healthy Birth

Mary Esther Malloy, MA
Companion booklet and audio for themindfulcesarean.com
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Thank you for purchasing The Mindful Cesarean Toolkit for a Healthy Birth.*

While most placentas move as the uterus grows, this one didn’t. It was covering Renee’s cervix, obstructing her baby’s exit. Her doctor was certain that a cesarean would be the best and safest way to birth.

I have been a labor support doula for over a decade and like other couples I’ve worked with facing similar news, Renee and her partner struggled to orient themselves to the idea of a cesarean. We worked together to prepare. When the time came, they found their way through their baby’s cesarean birth with peace and conviction. It was an honor to stand at their side and offer tools to enhance the natural hormones of birth and remind these parents with an unwavering faith that birth is sacred, no matter the circumstances.

In many parts of the world, one quarter to one half of all babies will be born by cesarean. Too often women who birth by cesarean feel unprepared, frightened, traumatized or left with a sense of failure. If a cesarean might be the safest way for you to birth your baby, The Mindful Cesarean helps you prepare for a meaningful and healthy birth and recovery.

Themindfulcesarean.com features practical tips and inspiring birth stories while the Toolkit—this booklet and audio—helps you bring mindful awareness to each phase of your child’s birth and stay connected to the people who love and support you. Doing so lets your body - and baby - know this isn't just a surgery. This is a birth.

*If someone has shared these materials, please consider supporting The Mindful Cesarean Project with a $10 contribution at themindfulcesarean.com
How to Use This Toolkit

This booklet, the accompanying audio, and themindfulcesarean.com are designed to be used together. Feel free to jump around to find information and inspiration.

If you are going to give birth soon, read or listen to the “Birth Visualization” – audio track four, and page 12. For an overview of cesarean basics, see “The Mindful Cesarean Birth Plan,” pg. 20, and “Quick Notes for Partners,” pg.21.

If you have more time — days, weeks, even months, read and listen to “Enhance Your Body’s Experience of Cesarean as Birth,” audio track two, and do the exercise on “Working with Fears,” audio track three, before listening to the “Birth Visualization.” You can listen daily to the “Pregnancy Relaxation,” audio track five. Cultivating calm and connection beforehand means you will have an easier time accessing these states (and their corresponding hormones) during and after your child’s birth.

For inspiring birth stories and tips on delayed cord clamping, microbial vaginal swabs, in-labor cesareans and other topics, visit themindfulcesarean.com.

Because it is one of the best tools we have to naturally augment healthy birth hormones with a cesarean, you will find information on skin to skin contact both on the website and in these pages. A warm thank you to Dr. Nils Bergman and Jill Bergman of the Neuroscience for Improved Neonatal Outcomes Foundation (NINObirth.org) for their assistance developing this section.

“My midwife and I decided it was time for a cesarean. I started to weep. I told her I knew it was necessary, but I still felt sad; I had wanted so badly to deliver vaginally. She understood. When the attending OB came in, a lovely woman with a warm smile, I said to them both ‘This is my birth. I want this c-section to be sacred and powerful and a rite of passage.’” Elana

“How I was feeling was pretty indescribable: I was now in the middle of the operation so there was nothing to fear, I was beyond excited, so apprehensive and weirdly calm… it was very strange. As the minutes ticked by I got more and more excited. I was close to meeting my baby and becoming a mum!” Kelly
For over a decade I have helped couples prepare for the possibility of a cesarean and then recover both physically and emotionally as they launch their families in the healthiest ways possible. The Mindful Cesarean is the result of these efforts. You will find the insights of my clients, colleagues and students throughout this booklet. I am grateful for their contributions.

I am available to help you prepare for or recover from your cesarean birth. This can be over the phone, in person or via skype, either before or after your baby is born, or both. Start by contacting me at info@mindfulbirthny.com

I hope the perspective and practices offered here help you have a powerful experience of birth, a speedy recovery, and a healthy start to parenting, no matter how your baby is born.

Mary Esther Malloy, MA

“Mary Esther - what an empowering method of preparation! I love the concept of treating cesarean with the same language as vaginal birth. That re-framing alters a woman’s whole experience.”

Suzanne Chesney, Co-leader, International Cesarean Awareness Network
Optimizing Healthy Birth

Hormones

“Modern medicine has the goal of helping mothers and babies survive. But nature wants more. Nature wants mothers and babies to thrive.”

Dr. Sarah Buckley, NYC, 2014

When labor begins on its own natural timetable and unfolds without interference, and when mother and baby remain together after birth, the intricate and long-evolved dance of childbearing hormones — oxytocin, beta-endorphin, prolactin, and catacholamines — can best orchestrate what nature intends: mothers and babies who are healthy, happy, well-adjusted, breastfeeding and bonded.

But sometimes interventions are needed. Sometimes, to survive, the tools of surgery are essential. And, when a cesarean is needed, aspects of birth are skipped that involve hormones that have been part of birth since human time began — and for ages before. With a cesarean, especially a planned cesarean, mothers and babies can experience lowers levels of these important hormones.

“When a baby must be born by cesarean, what can families do at each stage to optimize healthy birth hormones to best ensure that mothers and babies thrive?”

This is the question I’ve asked as I’ve written The Mindful Cesarean. Throughout these pages I detail practices that tap your body’s age-old knowledge of birth and link that inner blueprint to the experience of a birth aided by technology. My goal is to help families who birth by cesarean to what nature intends: mothers and babies who are healthy, happy, well-adjusted, breastfeeding, and bonded, even with the challenges of surgery.
Surviving and Thriving: Focus on Oxytocin

While oxytocin shares the stage with other birth hormones, it has long been considered to have a starring role with its many benefits for mother and baby. The Mindful Cesarean therefore focuses on this powerful reproductive hormone.

Oxytocin can have a calming and pain-relieving effect for mother and baby during and after birth. Oxytocin can bring about changes in the mother’s brain that reduce stress, promote healthy social connections and prime reward centers to imprint pleasure with caring for her newborn, and my own favorite, increase “ferocity in defense of young.” With skin to skin contact between a mother and baby after birth, oxytocin reaches peak levels and its benefits may include hormonally-mediated mother-baby bonding and, by reducing stress for both mother and baby, an easier start to breastfeeding.(i) If you are looking at the possibility of a cesarean for any reason, you and your child will benefit from the oxytocin-enhancing practices you'll find here.

"Although I would never have chosen a C-section, although my recovery has been painful and hard, I feel proud of my labor, proud of the choice I made to bring my son safely into the world, and proud of the way I was able to be present..." Elana

(i) Sarah Buckley, “Hormonal Physiology of Childbearing,” J Perinat Educ. 2015; 24(3)
“Birth is sacred. Period. No matter the course, length, or pathway. A child is being born. A family is being born. This is of the highest order of sacred. There are no second-class births. A birth by cesarean is birth, and can be honored as such in the language of birth…

Typically, the phases of labor are described as:

- Early Labor (labor is building)
- Active Labor (strong, regular contractions)
- Transition (the final, intense stretch of cervix over the baby’s head)
- Pushing/Birthing (bearing down, birthing the baby)
- The Birth Pause (quiet, mother-led time to see and greet the baby)
- The Golden Hour (first quiet hours with baby skin to skin and breastfeeding)
- Recovery

In what follows, I frame the stages of a cesarean in terms of the stages of labor. I also suggest practical things to do at each phase to activate your body’s endocrine system, thus enhancing your body’s sense of birth. Remember, oxytocin is a key birth hormone. It plays a central role in mother-baby bonding and successful breastfeeding. It is important to do what you can to enhance this hormone, before, during and after a birth by cesarean.

The sequences and times I’ve outlined here may be different given the circumstances of your child’s birth. If possible, discuss with your doctor ahead of time your preferences and hopes.
Early Labor
With a cesarean, this is the period leading to the birth: the week before, the day before, the morning of, the time waiting in triage to be called in, or the hours of contractions before you go in to birth your baby. This is an important time to enhance the oxytocin in your and your baby’s bodies.

At home in the weeks, days, or hours before, try:

• Gentle massage (skin-on-skin)
• Tender intimacy with your partner
• Quality time with friends, family and pets
• Warm baths (if you are experiencing early contractions, keep in mind that baths can slow contractions. You might opt for showers instead)
• Practice a body scan (sit quietly and use your imagination to breathe into different body parts, observing muscles as they lengthen and soften with your breath and awareness)

In the hospital during in the waiting period before you enter the operating room. you might:

• Sit quietly and visualize the birth and meeting of your baby
• Tell your baby what is about to happen and why
• Explain to your baby what he or she will experience
• Reassure your baby that you are in good hands
• Breathe in slowly to the count of 4 and breathe out even slower to the count of 6
• Practice “grounding.” Anchor your attention to the lower half of your body. Focus on your feet, the feeling of pressure from your socks or the floor. Notice any sensations within your feet and legs. Observe the calming effect throughout your body.

Active Labor
With a cesarean birth, active labor begins when you enter the operating room. A local anesthetic is placed. The surgical prep happens. Your partner joins you. As your team begins their work, you do your own powerful work of this birth: finding connection to your birth partner and your baby, staying soft, connecting to this as birth, your child’s birth.

Things to do here:

• Look each other in the eye
• Breathe together slowly
• Count your slow exhales
• Hold hands
• Touch your partner’s face
• Stay focused on what is happening: you are birthing your baby; you are about to meet your baby.
• Practice non-focused awareness. Pay curious attention to all the sensations in your body and beyond: the cool air moving in and out of your nostrils, the warmth of your partner’s hands on your face, the weight of your head on the table, sensations related to the birth, the quality of the lights in the room. Keep your attention roving. Notice one thing after another. Breathe it all in. Remember, these calming and connecting practices can help enhance the birth hormone, oxytocin.
Transition
As you get closer to birthing the baby, we’ll call it transition. You’re feeling more tugging and pulling. You may feel hazy or overwhelmed. You may feel dramatic shaking. You may feel nauseous. You are now about 10 minutes in – only a few minutes away from meeting your baby.

This is a time to go within and talk to the baby: let the baby know he or she will soon feel hands, will soon be born, will soon see the world. Let the moments wash over you. These moments are part of the passage. There is tremendous energy moving in your body in the final phase of this birth.

Birthing
And then, incredibly, you birth your baby. You listen. You look. You see the baby above you, or perhaps they place the baby on your chest. If the baby goes to the warmer, your partner goes to be with the baby as soon as possible. And then, after some minutes, your partner returns to sit by your side, holding your baby skin to skin against you as the repair happens.

The Birth Pause
The stitching is happening. Your partner holds your baby on your chest, as much skin to skin contact as possible. You pause, and begin to take in your baby. Even though the surgery is still underway, this time is a quiet space between the work of birth and the work of parenting to come, a pause to catch up to the moment as you greet your baby. You and your partner welcome your baby. If the baby has access to your breast, he will likely begin suckling.

The Golden Hour
They finish the repair after about 45 minutes and you, your baby, and your partner move to the recovery room. Now that the baby is about an hour old, you settle and your golden hour begins. The baby finds the breast and feeds. This is can be a special moment in your family’s beginning. Pay attention. Slow yourself. It’s a time for quiet connection: you, your partner, and your baby.

Recovery
In terms of recovery, day two is usually the hardest physically. But, just like after most surgeries these days, you will be up and moving, eating foods and using the bathroom. You will also be caring for your baby. And, really, the best medicine is parenting your baby. Keep your baby close. Keep your baby skin to skin for hours at a time and nurse frequently, every hour if possible. This will go a distance toward repair on so many levels for you and your baby. Line up extra support from family and friends for these early days."
Working with Fear
Audio Track 3

Calm Your Body

Fear is normal, and when we face the thing we fear, the fear transforms.

Oxytocin and adrenaline are antagonistic hormones. This means that fear hormones can impede the release of birth hormones and you want the opposite, especially if a baby is born by cesarean. For this reason, you work with fear ahead of time.

Listen to audio track three for an exercise to help you address fear before your child’s birth. Get a piece of paper and a pen, pencil, colored pencils, or markers before you start.

Mindfulness practices invite us to acknowledge what we are feeling. Try the following if fear comes up in the days, hours, or minutes before your child’s birth.

• Name the fear and take two deep breaths. Say exactly how or what you are feeling. Rate the feelings on a scale of 1 to 10.

• Then take action. Rest your forehead in the heels of your hands. Maintain this hold for a few minutes. Notice how this hold soothes your thinking mind. Pay attention to one deep breath. Watch it all the way in and all the way out. Do it again.

• Once you are out in front of the fear, be curious about the fear. What is the quality of the fear? Where do you notice it in your body?

• For help easing your body’s response to fear, hold the powerfully calming acupressure point found between your finger bones about two centimeters below your pinkie and ring finger knuckles. Another hold that calms and warms the body is to place your index fingers against the inner point of your collar bones, and let your hands rest where they naturally fall on your chest. Breathe deeply.
Congratulations on setting aside time to visualize a cesarean birth. The goal here is to tap your body’s age-old knowledge of birth and activate the corresponding birth hormones. There’s nothing you have to think, see, or imagine as you listen. You can play this visualization as you fall asleep, do household chores, or walk on the beach.

“Take a deep breath and settle. Let your breath and body soften. Relax your skin all over. Let your jaw and lips go. Imagine ahead in time to when you will meet your baby…

Imagine your early labor:
As you wait to enter the room in which your baby will be born, you do the important work of preparing your body and your baby. You remind yourself and your baby what is about to happen: you both have work ahead and you are about to meet. It is time to be born. With compassion for yourself and your baby, remind yourself that birth is sacred, no matter the course, or length, or pathway. Your child is being born. Your family is being born. This is of the highest order of sacred, no matter the circumstances. Doesn’t your baby deserve to be fully welcomed? To build a sense of safety and encourage the flow of healthy birth hormones, you connect with your partner. You touch each other skin to skin. You look each other in the eye. You hold your gaze and take a few deep breaths together. You prepare to birth your baby, connected. Oxytocin, the love hormone, is surging through your veins.

“Being a mom is the hardest thing I’ve ever done…
...every challenge seems designed by nature to make you a better person, more empathic, more emotional, more open. There are times when I want to turn it all off, I don’t want to feel anymore but then our son settles into my arms and I feel my edges expand, my heart grow, my mind melt into a deep contentment.” - Mae
You then close your eyes and go within. You tune in to your body, placing your hands on your belly. Your belly responds and softens with the touch. You hold and warm the place from where your baby will emerge. Offer your belly some appreciation, your breath moving in and out. Notice the play of feelings as they come and shift. Notice where you feel the excitement in your body. Notice where you feel the fear. Is it your belly? Is it your shoulders? Your jaw? Find courage and observe the feelings and sensations, as they rise and fall, shift and move. You might find relief by shaking your shoulders—releasing the tension. Breathe into your heart center and be with it all.

Still waiting to enter the space where your baby will be born, go more deeply within. See your baby inside. Breathe a warm comforting light into your belly and surround your baby with this love. All your baby really needs is love. Imagine your breath in as a breath that carries warmth, and care. This warmth surrounds your baby, protects your baby, communicates love and connection, wonder, delight. Your breath out carries with it all fears or concerns. You breathe with your baby, easy together. You are already deeply connected.

Still waiting to enter, you take a moment to tell your baby what will happen. Tell your baby that the birth is about to begin and that your baby will hear noises and new voices, and then feel hands on, guiding her out. Tell her to push her way out strongly. You are waiting on the other side. She will feel the rush of air into her lungs. Tell her that though it may seem like a while, soon enough she will be on your warm body, hear your voice, feel your embrace. Birth is a process of welcoming. You are so excited to finally meet face to face.

“And when we were all finally gathered in the operating room, his first room outside the room of my body, when he was finally coming, when I birthed him, we literally sang him into this world.” Elana
Imagine now your **Active labor**. You enter the space and the birth begins in earnest. The team assembles, the local anesthesia is administered and the prep happens. You commit to be present to what is: a birth as sacred as any other, your baby coming into the world, crossing from one realm to the next, as humans have always done. You keep it simple and focus on your breath. You and your partner breathe in and out together, slow and steady. You hold hands. Your partner gently strokes your face. You play your music. You find your partners eyes and lock in. Your partner reminds you that you are birthing your baby now. Strong and steady. Have compassion for yourself: stay soft, kind.

As you move into **Transition** you feel the push and pull, the tugging and pressure. You may feel yourself shaking. Or a wave of nausea. You may have moments of overwhelm. Let the moments wash over you. These moments are thresholds. These moments are part of the passage. There is tremendous energy moving in your body in the final moments of this birth.

With courage, breathe into your heart center. With inquiry, with curiosity, open to *this* moment, *this* child’s birth, *this* journey of yours as a woman. With great determination, lean in with everything you have… and soar with abandon…… beyond all that is easily known...

With all your might, see yourself pushing your baby into this world.

At last, — you **birth** your baby.

Every sense of yours is on. Time is suspended as you listen. Suddenly, you see your baby above you and hear that first cry. Perhaps the baby comes right to your chest. Or, maybe the baby goes to the warmer. If the baby goes to the warmer, your partner will go to be with the baby on the other side of the room while you listen to every sound your baby makes. You hear your partner talking to and soothing your baby. After some minutes, your partner returns with your baby.

These are the first slow moments in which you really see and greet your baby on the outside. You begin the process of getting to know each other. Your partner partially unwraps the baby and lays the baby across your chest, skin to skin. The stitching is underway but you **pause**, and slowly begin to take in your baby. There is no hurry. Maybe your baby begins feeding.

The repair happens over a 45-minute period. As you and your partner greet and study your baby, you birth the placenta. You ride the wave of emotions and sensations, connected to your partner, touching your baby, until, finally, you are finished. Your partner and baby go to recovery. You are cleaned up and follow them to the recovery room where~...
…your **Golden Hour** begins. You are on the other side of the birth now. A great relief. You are catching up to all that has happened. You are settling, beginning to feel more yourself.

You study your child in your arms. Beautiful. Very much still arriving, eyes opening into light, opening to you. You drink in the presence of this being. You touch, caress, and soothe your baby. You feel the words come and you welcome your baby. You rest, breathing together with your baby, in and out, absorbing, as slowly as you need, your child’s arrival, your arrival, on the other side of birth. You continue resting and recovering skin to skin with your baby and your baby bops and scootches to your breast and begins feeding. You rest completely, filled with gratitude for this moment and the love that surrounds you and this child. You know that alongside the joy of meeting your baby, there is room for any grief you may feel. You will be well-supported through the healing to come with ample space for all you may feel.

Take a deep breath now and allow yourself a few moments to enjoy the pleasure of imagining this meeting. Your baby at your breast. And then slowly, slowly let this image fade into the future where it belongs. As I count from 3 down to 1, stretch gently and come back feeling present and good. 3... 2...1..."
Mindfulness Meditation and Massage for Pregnancy

This practice takes only a few minutes. When you slow down and move into a state of calm and connection, you activate the healthy birth hormone, oxytocin. Practicing relaxation will help you access this state when the hour comes to birth your baby. The hand massage you learn is a tool you can use throughout your day to calm your body whenever you feel stressed.

“Take a breath and settle for this meditation and massage. A simple pause in your day. Close your eyes. Take another breath. Notice what you see with your eyes closed…observe the quality of light through your lids… the shades of darkness… Notice the weight of your lids over your eyes… the place where your lids meet… your lashes…the letting go of the many muscles that surround your eyes… the muscles above your eyes, beside your eyes, below your eyes.
Pregnancy Relaxation

With your eyes still closed, shift the focus of what you see. See how you hold your face, compose it. Observe the held areas. Like a detective, check your brow, the sides of your mouth, your jaw. No need to compose your face now. Let it go… every single muscle slack… soft….. at rest.

Shift your focus again and see your baby inside. Moving in clear waters, eyes opening and closing, your baby studying shades of darkness and light, moving through watery translucence. Your baby’s face resting, at ease, like yours.

Imagine the sounds of your baby’s world… the pulsing and wooshing of your body … and muffled by water, the sounds beyond: language, laughter, birds, the sounds of the world into which your baby will be born. Imagine your baby listening… curious…

Bring your awareness to your own sense of hearing. Tune in now to everything you hear. Listen. Listen to the sound that is farthest away… Find a sounds close by. Deepen your breath and listen to the just-perceptible sounds of your own breath in and out … the hum of silence in between. Really listen. Notice yourself and your baby listening, quiet now, taking in this vast world of sound and silence.

Take one deep breath in and out. Observe how your body feels this breath, receives this breath.

Again, take one deep breath and imagine how your baby feels this breath, receives this breath.

Move your hands over your belly. Massage the muscles of your abdomen. Massage the muscle that is your uterus. Imagine how your baby perceives the warmth of your hands.

Then, with your eyes opened or closed, use your right thumb and massage your left palm, round and round, opening the cupping muscles of your palm.

“It’s now 12 weeks on and Amelie is an amazing, happy and beautiful little baby. She has jumped up percentiles with her weight. I’m all healed and weirdly proud of my scar. We are still breastfeeding and Amelie is clearly thriving from it and I have no intention of stopping anytime soon. We have discovered the joys of baby-wearing and Amelie loves her sling. We still both stare at Amelie and can’t believe we’re lucky enough to have her. Being a mum is the best thing I’ve ever done, I truly love it.”

- Kelly
With your right hand, firmly squeeze your left wrist and forearm, squeezing and releasing as you move towards your elbow. When you reach the bones of your left elbow, Squeeze the muscles, tendons, ligaments around the joint. Continue squeezing the muscles of your upper arm, moving up to your shoulder. Squeeze the muscles, tendons and ligaments around your left shoulder. Press on your trapezius muscle on your upper back. Now bring your attention to your left hand and vigorously shake your left hand… shake shake shake… and then place both hands palms up on your thighs. Eyes closed, take a deep breath and notice how your hands feel different from each other.

Repeat on your other side. Use your left thumb now to massage your right palm, around and around. Squeeze your right forearm up to the elbow. Squeeze the muscles around your elbow. Continue squeezing and releasing the muscles of your right upper arm until you get to your shoulder. Squeeze the muscles, tendons and ligaments of your shoulder. Notice what your shoulder feels like. Press on the big trapezius muscle on your back. And now shake your right hand. Shake shake shake. Place both hands palms up on your lap and – eyes closed - take a breath. Again, notice your hands. Notice how your body feels. Observe how it feels to be pregnant in this moment… you and your baby breathing, seeing, listening, feeling.

To finish, pay attention to one breath. May you and your baby have a wonderful day."
Skin to Skin

As soon as you have the opportunity, and whenever you can throughout the recovery period, slip your baby into or under your shirt and hold your baby skin to skin. Moreover, make it a priority to help your partner hold the baby skin to skin whenever she can, for as long as she can. The research on skin to skin contact between a baby and her parents is overwhelmingly positive. Skin to skin helps regulate blood sugar and body temperature and enhances immunities. It calms your baby and helps your baby sleep deeply. It enhances bonding and positive brain development for everyone involved.

What’s not to love about having your little sweet-pea snuggled against you skin to skin?
Birth Plan

We understand that medical concerns may take precedent over our wishes, but we would like you to know what is important to us as parents if we birth by cesarean.

- We would like to know the names of the people providing us care. Please introduce yourselves!
- We would like our midwife and/or doula to be present.
- We would like to play music.
- We would like to announce the baby’s sex.
- We would / would not like to do the microbial vaginal swab. (We will need a sterile gauze pad and a sterile plastic bag).
- We would like to respectfully ask doctors and nurses to limit conversation to what is relevant to the birth.
- Please do / do not tell us what is happening with the surgery.
- Please let us know if you will administer anesthesia that may affect the mother mentally.
- Please delay cord clamping for our baby for one to two minutes.
- Please pass our baby to us under the curtain, if possible.
- If the baby goes directly to the warmer, I would / would not like to see my baby first before the baby is wiped off.
- Please invite my birth partner to the warmer as soon as possible.
- Please return the baby to our side as soon as possible.
- Please assist us with skin to skin contact in the operating room.
- Please assist us with breastfeeding in the operating room / please assist us with breastfeeding in the recovery room.
- Please discuss single vs double layer suturing with the repair.
- Please save the placenta for us to see (or take home).
- Please do all you can to keep mother and baby together after the birth and help us get bonding and breastfeeding off to a good start.

Thank you very much for your care!
Every birth is unique, but here are some things to do and request if at all possible.

OVERVIEW of Timing

- **The Prep**: 15 minutes or so. Your partner goes without you into the operating room for local anesthesia and the surgical prep. During this time, you put on scrubs and wait until you are called.
- **Start of Surgery until Baby is Born**: 5-15 minutes. You will sit by your partner's head.
- **Baby at the Warmer with Nurses/Peds after Birth**: 5 to 10 minutes (unless they hand the baby right to you. Ask if they will!). If the baby is at the warmer, you go to your baby.
- **Suturing/Repair**: 45 minutes while you are holding baby on mother.
- **Recovery Room**: a few hours as your partner’s and baby’s vital signs are monitored.
- **In-Hospital Recovery**: 3 to 4 days in your postpartum room before going home.

BEFORE Your Partner Goes into the Operating Room

Most Important: As your partner prepares to birth this little boy or girl, help her to minimize fear. We don’t want the fear hormone — adrenalin -- interfering with the bonding hormone, oxytocin. What can you do to enhance the oxytocin? **Talk to her, touch her, reassure her, remind her to focus on her connection with you and the baby.**

- **Prep Microbial Swab.** Secure permission from your doctor or nurse and get gauze pad and sterile bag from nurse one hour before surgery (or for whatever time you have). The gauze can be rolled and your partner can insert it into her vagina. Before going into the surgery, she will remove the gauze and place it in a sterile bag.
• Prep scented paper towels. Put a few drops of lavender or peppermint (or other favorite) essential oil on a paper towel. Place in a small bag or in your pocket.
• Bring the stuff. When the nurse comes for you, bring your phone for pictures and music, the bag with the microbial swab, and the essential oil paper towel either loose in your pocket or in a plastic bag.

DURING the Birth

**Most Important:** Touch your partner skin to skin. Touch her face. Hold hands. (Skin to skin augments oxytocin). Make eye contact. (A gaze of 20 seconds or longer spikes oxytocin). Take deep breaths together, you and your partner. This is calming and connecting.

• Help her to focus on this as a birth, not a surgery. This is the birth your daughter or son needs. You are about to meet.
• Don't be shy about reminding nurses and doctors that your are hoping to do this as naturally and gently as possible. Remember you can ask for anything.
• Request that the anesthesiologist ask before administering any medicine that might affect your partner’s mental clarity.
• If the nurse uses restraints on your partner’s wrists, you can request they leave them undone.
• Take pictures! Photos might be important to your partner when she looks back on the experience. Nurses are frequently happy to take pictures.
• Play music on your phone. Something calming or celebratory.
• Hold a paper towel with lavender or peppermint oil to your partner’s nose.
• Ask for delayed cord clamping! Can they place the baby on your partner’s thighs or chest and delay one to two minutes?
• Ask if the doctors can pass the baby to you under the curtain.
• If at any point, your partner says she can’t breathe, alert anesthesia but most likely she just can’t feel herself breathing. Breathe with her and count her exhales to calm her.
• If she experiences shaking, remind her (and yourself) this is normal. Encourage her to breathe into it and get through it.
Immediately AFTER

• As soon as you get the go-ahead, join your daughter or son at the warmer. Talk to your baby. Touch your baby. Reassure your baby.
• Remind the nurses afterwards to allow you to swab the baby with the gauze. Wipe the baby’s head, face, mouth, nose, eyes, torso and limbs.
• When the repair is underway, you and your partner will sit with the baby. This is an opportunity to unwrap the baby and place her skin to skin on your partner. Ask a nurse to help. If the baby has access to the breast, she will likely feed.

In the Hours and Days AFTER

• Keep your baby with you! Decline a routine visit to the nursery if at all possible. Ask the pediatrician to assess the baby while she is with you. Or, if special care is needed for your baby in the nursery or NICU, go with your baby and insist on holding her skin to skin. Ask if procedures can be done while the baby is on your body. Remind nurses: no formula; no bath; no Hepatitis B shot (you can discuss this with your pediatrician in weeks to come).
• Room in! Stay overnight with your partner. She needs help with the baby. If the hospital won’t let you stay, consider finding a female family member or friend who can stay over on a cot. It can be traumatic to be left alone soon after a cesarean with a baby who needs more care than you can manage!
• Support skin to skin with your partner as much as possible. Six hours the first day will go a great distance toward stabilizing the baby following a cesarean. Hold the baby skin to skin yourself! The more the better for all of you!
• Help your partner get support for the breastfeeding and the emotional and physical parts of recovery. Don’t let her go it alone!

“Charlie was in our arms for the first two days of life --
...we literally didn't let the nurse take her for anything without one of us holding her! I really feel this helped her emerge into the world from a safe place.” Tom
“Since we were not expecting to have a Cesarean, I hadn’t researched the symptoms during recovery and the gas was the most unexpected and hardest thing I dealt with. Your abdomen gets a lot of air trapped in it from surgery and that air causes pain sometimes in unexpected places like your back or neck. I thought I was having back spasms but it was just the gas pain manifesting in my back. Had I known ahead of time, I would have asked for the gas meds and eaten only easy to digest things like soup after surgery.” Tiffany

Gas pains can be a challenging side effect of a cesarean. The surgery itself can "stun" the intestines and medications given during the surgery and early recovery can slow the intestines. Trapped gas in the intestines or abdominal cavity can be a painful part of recovery.

For relief, be sure to walk as soon as you are given the go-ahead and try a heating pad wrapped in a towel on any painful areas. To avoid problems, take it easy with food in the beginning. Eat slowly and be sure to include sipping broth in the days following surgery.

**Sipping Broth**

Sipping broth is a warm, comforting, easily digestible drink that will help you minimize post-surgery gas pains. Additionally, when the broth is made from bones it can aid your recovery by offering your body a nutrient-dense food at a time when eating well might be difficult. Consider this: your body is nourishing your baby before and after birth. Your body needs nourishment too, especially if you are also healing from a surgery!
Mary Esther’s Simplest Bone Broth

Use a slow cooker or stock pot.

Get lots of bones (given how animals are fed and stressed in our industrial food supply chain, it is important that you use bones from pasture-raised chickens and pigs and grass-fed cattle).

Add filtered water to cover the bones.

Add a dash of vinegar to help extract minerals.

Bring the water to a boil and then lower to a simmer. Skim off any scum that rises to the surface.

Simmer for a while! (8 to 48 hours is a ballpark range - make sure to keep the bones covered by adding more water when necessary)

In the last eight or so hours, throw in veggies (frozen scraps from the week are great). Seaweed, ginger, tumeric, garlic, bay leaves and peppercorns can be used in any combination. Wait to salt until you use your broth.

Simmering bones into a broth is a simple process and you can be creative. You can’t really go wrong here.

Bone Broth!

Bone broth is not the salty, preservative-laden chicken soup you’ll get from your hospital. For the last many decades, commercially prepared soups have relied on MSG and other additives for flavor. By contrast, broths flavored by boiling bones have been part of the human diet for at least tens and probably hundreds of thousands of years. For our ancestors - and for many people today - eating a few choice cuts and discarding the rest of the animal was an undreamed of luxury. After the meat of an animal was consumed, further nutrition was extracted from bones that spent days simmering in water. The absence of the nutritious compounds derived from boiling bones is considered to be a significant deficit in the contemporary western diet.
Why Bone Broth after Surgery?

Dr. Catherine Shanahan, author of Deep Nourishment, tells her patients that boiling collagen-rich bones extracts “special compounds with powerful, almost magical growth-promoting properties (whose) effects are soothing for your body.” Dr. Shanahan works with trainers for the Los Angeles Lakers and describes remarkable recoveries from injuries and surgeries when athletes make bone broth a part of their diet. She explains that compounds extracted from bone stock (such as proteoglycans, glycosaminoglycans, hyaluronans and chondroitin) stimulate critically important cells in our bodies called fibroblasts. This process enhances the growth of collagenous tissue in our bodies and helps our bodies heal and thrive.

If you are giving birth by cesarean, sipping broth and bone broth soups are a soothing and comforting food for the first few days postpartum – and beyond. The easily-digestible broth will minimize the likelihood of gas pains and offer your body nutrients that aid your recovery.

Once you have decided your broth is done, strain it into a large pot or bowl and let it cool. I store broth in mason jars. I chill the jars overnight in the fridge and then transfer them to the freezer without tops until the contents freeze. I then cover the jars and happily wait until the day arrives when I defrost my broth.

Sources for bones:
• The roast chicken you made for dinner and bones from any other meats you cook. Keep a bag in your freezer to collect them.
• Farmers Market
• Local Farms
• A health food store with a meat counter
• A butcher that sources meat locally
Be brave. Include the collagen-rich parts such as chicken wings, neck, feet, pigs feet, or any knuckles or shanks!

If time permits, make up a batch of broth before your birth to store in your freezer. If there isn’t time to make broth, order some from the sources listed below. Bone broth will be a healthy part of your recovery from birth, no matter if you birth vaginally or by cesarean.

www.barebonesbroth.com
www.kettleandfire.com

“Bone broth satisfies both our palate and a deep physiologic need.”

- Dr. Catherine Shanahan
Broth Ideas for After the Baby is Born

Day 1 - As soon as you are cleared by your doctor or nurse, drink your sipping broth. Some hospitals are lenient and permit regular food, but take it slowly. Hospitals will have microwaves. Ask someone to heat your broth and then let it cool to a warm temperature. Use a bendy straw if you are holding the baby or having a hard time sitting up.

Day 2 - Enjoy sipping broth throughout the day and any bone broth soups. You will likely be cleared to eat other foods but, again, take it easy! Avoid bean soups since beans can cause additional gas in your intestines.

Day 3 and going forward - Make bone broth soups a healthy part of your recovery!

Resources: Nourishing Traditions by Sally Fallon; The Bare Bones Broth Cookbook by Katherine and Ryan Harvey; Deep Nourishment by Catherine Shanahan; Brodo by Marco Canora

Mary Esther’s Simplest Sipping Broth
Warm up your bone broth. Add sea salt and pepper. Maybe a dash of cayenne. Pour into a mug and enjoy.

Mary Esther’s Kids’ Favorite Coconut Lime Sipping Broth
Warm some broth. Add a cup or so of coconut milk and the juice from two limes. I find a 2:1 ratio of bone broth to coconut milk works well. Add sea salt, a dash of powdered ginger and simmer for a few minutes. The best! Not insanely delicious? Add more lime and it will be! Turns into an amazing soup with the addition of cooked chicken and a few veggies. (adapted from The Bare Bones Broth Cookbook)

Mary Esther’s Favorite Bone Broth
Breakfast:
Poached Eggs in Bone Broth
As you warm up some bone broth, add carrots, mushrooms, kale or whatever veggies you have on hand. Flavor with a bit of turmeric, garlic, cayenne, pepper or whatever strikes your fancy. As it simmers, crack in two eggs. Simmer for 4 minutes. At the end, add avocado and fresh herbs if you have them. Enjoy!
“Cesareans are good for many reasons,” says Nils Bergman, a South African physician and international promoter of Kangaroo Mother Care (KMC). “Yes, if medically indicated, cesarean is good. But the separation of a mother and her baby following a cesarean, now that is something altogether different.” [ii]

Years ago in Zimbabwe, Dr. Nils Bergman introduced a protocol to keep low-weight preterm infants on their mothers, skin to skin, while every other aspect of care remained the same. He found that survival rates for these babies surged from 10 to 50 percent. Dr. Bergman later conducted a randomized controlled trial and found that preterm newborns in skin on skin contact with their mothers for the first six hours after birth were 100 percent stabilized. For babies in incubators, less than 50 percent had stabilized within six hours.[iii]

Dr. Bergman became convinced that on-going skin to skin contact is what our species expects at birth, reflecting millions of years of evolution, and yielding significant physical and emotional health benefits for newborns and their parents. His findings have launched an international mother-baby skin to skin revolution. Dr. Bergman now lectures throughout the world about the neuroscience behind Kangaroo Mother Care. He is challenging health care providers and parents to comprehend what is normal for nature — and for our natures — regardless of what is normal for our Western culture.

For babies born by cesarean, Dr. Bergman considers skin to skin contact essential. He explains that infants born by cesarean do not experience the same post-birth spikes of important hormones such as norepinephrine that wakes the baby’s brain and activates pumping actions that clear the lungs of fluid. Additionally, mothers who birth by cesarean and babies born by cesarean experience lower levels of oxytocin than when babies are born vaginally.[iv] But the real and largely avoidable problem, as Dr. Bergman describes it, is that after a cesarean a mother and baby are more likely to be separated from each other for long or short periods, further disorganizing the natural hormones of birth.

Separation is Stressful!
Dr. Bergman and his colleagues conducted a study to understand the effect of even short-term separation of a newborn from his mother. They measured deep sleep and heart rate variability (as an indicator of central anxious autonomic arousal) in two-day-old newborns as they slept skin-to-skin with their mothers and when they slept alone in a nearby crib. During the time the babies were separated from their mothers, the babies’ autonomic arousal averaged 176 percent higher and quiet sleep 86 percent lower than when they slept skin to skin with their mothers.[v]
“We made a startling discovery,” Dr. Bergman says. “When babies sleep separate from their mothers, heart rate variability triples, deep sleep is significantly reduced, and there is no sleep cycling.” Furthermore, he says, “The absence of the mother, even for a short period, doubles cortisol for full term infants. In preterm NICU babies, cortisol is ten times higher for babies in incubators than for babies skin on skin.” Dr. John Krystal, Chairman of the Department of Psychiatry at Yale, commented on the study’s findings: “This study highlights the profound impact of maternal separation on the infant. Dr. Krystal summarized, “We knew that this was stressful, but the current study suggests that this is a major physiologic stressor for the infant.”[vi]

Keep Your Baby Close
With Kangaroo Mother Care, or continuous skin to skin contact between a mother and newborn, stress is reduced and oxytocin levels soar. Oxytocin’s benefits are many. Babies stabilize faster. They cry less. Breastfeeding is likely to go better.[vii] High oxytocin levels are good for mothers too. Human and animal studies tell us that oxytocin activates positive changes in mothers’ brains to reduce stress, promote healthy social connections, prime reward centers to imprint pleasure with caring for her newborn and, my own favorite, increase “ferocity in defense of young.”[viii] In her important report, “The Hormonal Physiology of Childbearing,” Dr. Sarah Buckley puts it this way: “Oxytocin enhances hormonally-driven mother-baby bonding.”[ix]

Of course, sometimes there are unavoidable separations or stressful procedures a baby must endure. Dr. Bergman’s wife, doula and author Jill Bergman, says, “When separations occur, the question is how quickly can we restore the baby to what she anticipated with oxytocin-enhancing skin-to-skin and breastfeeding.”[x]

Kangaroo Mother Care is one of the ways nature ensures that a mother and child get off to a healthy, bonded start. When a baby is born by cesarean, Kangaroo Mother Care may be one of families’ most effective tools to compensate for the lower hormone levels associated with a cesarean. Following a cesarean, Dr. Nils Bergman considers continuous skin to skin and hourly breastfeeding a necessity.

Kangaroo Mother Care just celebrated a major victory: six major international health associations endorsed the universal use of KMC for preterm and low birthweight infants.[xi] Increasingly, we can expect KMC to become the standard of care for these vulnerable newborns. But Kangaroo Mother Care is not yet a standard of post-cesarean care. To prioritize skin to skin contact in the sensitive hours, days and weeks following a cesarean, families may have to ask nurses and doctors to do things differently to assist with on-going skin to skin contact. Extra help may be needed from family, friends, a doula or a KangaroulaSM.

For more about Kangaroula Care and how to make skin to skin happen after a cesarean, see my interview with Jill Bergman at www.themindfulcesarean.com/skin-to-skin

For more on the neuroscience of skin to skin, see my article, "Kangaroology: The First 1000 Minutes," at www.thebirthpause.com.

Additional information about the important work of Nils and Jill Bergman can be found at ninobirth.org
References

[i] Dr. Nils Bergman lecture at New York University, New York, February 2016. For more from this lecture visit my blog thebirthpause.com “Kangaroology: The First 1000 Minutes.”


(vi) www.healthynewbornnetwork.org/resource/kmcjointstatement


Finally, our son was born; big, lusty, beautiful. He laid across my chest with wide open eyes and a grave silent stare for the next hour while they did the repair. Once in the recovery suite he nursed easily, hungrily and continues to this day. I'm grateful that our surgeon was fully onboard for our wishes to let our placenta pulse, immediate chest-to-chest contact, hours of delay for newborn exams, a vaginal swab and total immersion for three days in a private suite.” - Mae
Thank you
Jeremy Hopwood
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Nils and Jill Bergman
Andrea Syms-Brown
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Kelly Foulds, Rasheed Hislop, Aimee Karr and the many families who
contributed stories and photos

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Mary Esther holds a masters degree in anthropology and writes
regularly about birth. You might find these articles of hers of
interest:

• The Birth Pause - Waiting to Inhale: How to Unhurry the Moment
  of Birth, published in the Journal of Perinatal Education
• Babies are Born Where They are Born: A Conversation with a
  Midwife about Not Handing Babies to their Mothers, published in
  Midwifery Today
• Delayed Cord Clamping, An all of Human History Practice (20th
  Century Exempted), published in Midwifery Today
• Slowing Down at Birth for Vulnerable Newborns, published in the
  Journal of Perinatal Psychology and Health
• Delayed Cord Clamping Needs a New Table, published in
  Midwifery Today
• Getting Smart About Smart Technology, published in Midwifery
  Today

Mary Esther and her husband are the parents of three children,
ages six to 14. They are the lights of their lives.

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