



DUE DATES

TOO EARLY? TOO LATE? HOW A 'DUE DATE' IS REALLY A 'DUE MONTH'.

WHAT IS 'NORMAL' GESTATION?

Most elective inductions are offered to mothers at a time when they are presumed to be near 'term' based on the most recent ultrasound. As a childbirth educator, I get people coming to class all the time with the news that 'my due date has changed *again*'. To which I respond, "Really? How many times did your *conception date* change?" Obviously, the date your baby was conceived does not change, therefore your 'due date' does not change either. You are the same amount pregnant today as you would be had you not had the ultrasound. A due date is more accurately a guess date. "Term" is anything from 37 weeks to 42 weeks and one day. An ultrasound can be off by as much as two weeks in either direction and two pounds in either direction. How many women have you heard about who had a cesarean because she was told her baby was 'too big' only to find out that baby was of average, or even small, size? Think about the difference between a 4 lb. and a 6 lb. baby and you'll see two pounds is a lot when you are talking about a little baby. This can lead to preventable prematurity, especially when twins are involved. Current obstetrical practice is to predict that 'twins usually come early...at about 36 weeks', and then not 'let' the mother go past 36 or 37 weeks by insisting on a cesarean. Talk about a self-fulfilling prophecy!

That 36 or 37 week mark is most often determined (or 'confirmed') by ultrasound. Now a two week difference in accuracy means the difference between 36 weeks and 34 weeks...a critical difference. It isn't so surprising that prematurity and infant mor-

tality are all on the increase in the US. Just because a baby *can* be forcibly evicted from the uterus and survive does not mean (s)he *should* be.

'Due' & Post-dates

A clarification of terminology, times and techniques may help understanding.

In years past, a woman simply expected to be pregnant until the baby came out.

If a woman began feeling surges that became longer, stronger and closer together before 37 weeks gestation, and it was determined that they were dilating and/or effacing the cervix, attempts were made to stop them. It's been known for a long time that premature babies have far more problems than healthy, full-term babies. Keeping babies inside for at least a full forty weeks yields great success.

When studies began to show that postdates babies showed a statistically higher rate of stillbirth and other problems after 42 weeks gestation every attempt was made to try to get those babies to come out before those problems could develop, with great success.

The problem arises when the 'average' length of pregnancy (40 weeks) becomes the 'cut off date'. There are actually three main problems with this.



Planning your baby's birth together can be a date night opportunity!

CONSIDER THIS:

- *Are your requests appropriate for your personal situation?*
- *Are your requests supported by scientific evidence?*
- *Are your requests reasonable?*
- *Are other people in your situation able to have their requests honored?*
- *Are you willing to be flexible if your situation changes and your requests are no longer appropriate?*
- *If your reasonable requests are being denied, is scientific evidence provided to support that decision?*

NOTES:

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NOT INTENDED TO REPLACE SOUND MEDICAL ADVICE. EVERY CIRCUMSTANCE IS UNIQUE AND EACH MOTHER MUST COLLABORATE WITH HER CARE PROVIDER REGARDING INDIVIDUAL CONCERNS. EACH MOTHER ASSUMES TOTAL AND COMPLETE RESPONSIBILITY FOR ANY ACTIONS TAKEN IN REGARD TO HER MATERNITY CARE CHOICES.

RESOURCES:

- Beech, B., (1999). Ultrasound: Weighing the propaganda against the facts. *Midwifery Today* (51). <http://www.midwiferytoday.com/articles/ultrasound.asp>
- DeNoon, D., (2005). Rate of premature births hits a new high in the U.S. WebMD Medical News. <http://my.webmd.com/content/article/111/110100>
- Goer, H., (1999). Fetal Distress and Electronic Fetal Monitoring, Chapter 7, pages 131-153. *Obstetric Myths versus Research Realities: A Guide to the Medical Literature*.

Calculate your due date using data actually from this century, you can go to: <http://www.transitionsdoula.com/>

NORMAL GESTATION CONTINUED...

One is that every pregnancy is different. Just as every child doesn't begin walking on the exact same day, or every five-year old exactly the same size 90 days into their 5th year, not every woman has exactly a 28-day cycle, and every woman does not ovulate at exactly the same day of their cycle. Does every woman have exactly the same nutrition or stress level in her life? So why would every woman gestate EXACTLY 40 weeks? The second problem is the standard method of calculation that brought us to the average '40 week' length of gestation.

This method where the little 'wheel' you may see at each prenatal visit came from. It's called 'Naegele's Rule', named after the physician that determined the average human pregnancy lasted 266 days from the dates of con-

ception...in **1850's** based on historical rather than observational data.

During the 1700-1800's, not only did malnutrition, lack of birth control, illness relating to poor sanitation often lead to prematurity, but women were advised not to gain more than 5 to 14 lbs.!

In 1990 Mittendorf et al re-examined the accuracy of Naegele's Rule. They found many factors, such as mother's age, weight, ethnicity, prenatal care, prenatal nutrition and smoking, number of prior pregnancies, and more, influence the length of pregnancy. It was discovered that healthy Caucasian, American women actually gestate for 274 days from the date of conception. A full WEEK longer than American women expect to be pregnant! Therefore, to say a woman is 'over' by any amount of days once she's

reached 40 weeks is not accurate. She's actually not even DUE yet!

The third problem is in using ultrasound to determine gestational age. Ultrasound can be off by 2 lbs. in either direction and/or two weeks in either direction (Beech, 1999). We also again have the issue of whether all babies have the same length bones (one of the ways gestational age is determined in late pregnancy) on the exact same day. What are the odds that all of the people born on your birthday have the same length bones today? On the day you were all born?

If mom isn't sure of her conception date, talking induction at 38, 39 or 40 weeks based on a late ultrasound is risking *preventable prematurity* (DeNoon, 2005).

Normal, healthy pregnancy lasts anywhere from 37 to 42

That means a woman is 'due' *within a 5 week time-frame*. If she knows when she conceived, she is not 'early' at 38 weeks, nor is she 'over' at 40 weeks, or even 41 weeks. A woman should actually be considered 'due' at what is currently considered 41 weeks. After 41 weeks, biophysical profiles, kick counts and other ways of establishing fetal well-being are certainly reasonable. Providing reassuring results of those tests, if at 42 weeks the mother is still pregnant, induction may be the next logical step...sex with her partner if the water bag remains intact being the most likely to result in labor.

If she still fails to go into labor, we are fortunate that we have physicians with powerful induction agents and the technology to monitor mother and baby to ensure their health and safety.

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