

HUMANIZED CHILDBIRTH: REALITY OR DESIRE IN PERU

PARTO HUMANIZADO: REALIDAD O DESEO EN EL PERÚ

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The definition of childbirth is the expulsion or extraction out of the uterus of the product of conception of 22 or more weeks of gestation and 500 grams at a higher weight (1). There are other types of births such as vertical birth, which refers to the position of the pregnant woman at the time of delivery (standing, sitting, squatting or kneeling); vaginal delivery; abdominal delivery which refers to surgical intervention.

The World Health Organization (WHO) (2) proposed 56 recommendations for a positive birth experience; likewise, in 2016 the Ministry of Health issued the Technical Health Standard for vertical birth care within the framework of human rights with intercultural relevance so that all health provider entities implement the standard in their childbirth care (3). Really the question would be whether all the hospitals of the Ministry of Health, Essalud, Police, Armed Forces and clinics have implemented it.

Humanized childbirth is defined as the model of care provided by health personnel with women playing a leading role in labor and delivery. The prominence of the woman in her childbirth comes from the time of Mesoamerica as visualized in the sculpture of Tlazolteotl, where the goddess is found giving birth naked in a squatting position or like the Mayan queen who gave birth in the middle of the forest alone; throughout history, childbirth has taken place in different positions and with the protagonism of the woman or accompanied, this is how the writer Analía Bernardo (4), captures it in her article "Giving birth like the goddesses: recovering vertical childbirth."

The care model of a humanized birth consists of: The woman takes the leading role in her birth, they are informed of everything that happens, choosing a company, free movement during labor (including psychoprophylaxis exercises), including traditional medicine (hydrotherapy, massage, oils, rebozo techniques, etc.), expressing their emotions, respecting the rituals that their culture is used to, choose the position of giving birth (squatting, kneeling, standing, and a cozy environment that respects your intimacy (privacy).

The benefits of a humanized birth is that the pregnant woman feels calm and comfortable with her relatives in an appropriate environment applying psychoprophylaxis exercises and free movement will improve her stress, which will increase her level of oxytocin and this will contribute to uterine contractions and opening the birth canal (5). The experience of a humanized birth will facilitate the transition to motherhood.

It is important for gynecologists and obstetricians to question the modern model of childbirth care and reduce the rate of cesarean section in all institutions, and to take into account that contact, support, free movement of the pregnant woman in labor, reduces fear, stress and pain mediated by oxytocin. It facilitates childbirth and has a positive impact on the memory of a parturient and on family members as a positive and respected birth.

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