

The Use of Water During Labour



The benefit of using water to reduce the pain of labour and childbirth is well established and accepted in most care settings. The use of a shower or hot wet towels for pain relief is common practise. The buoyancy of water enables a woman to move more easily than on land. This alleviates pain and optimises the progress of her labour (Burns & Kitzinger, 2001, Enkin et al 2000). Water offers a labouring woman an environment where she can behave instinctively and feel in control. When a woman feels in control during childbirth, she experiences a higher degree of emotional well-being postnatally (Green et al, 1990).

Women who wish to labour while immersed in deep warm water know it is a simple way of assisting them to cope without the use of strong drugs. A reduction in the use of pain relieving drugs not only benefits the mother (who is more alert and responsive after the birth) but the baby will also benefit considerably. One study has demonstrated how babies whose mothers had epidural anaesthesia were still showing adverse effects of the drug up to six weeks later (Rosenblatt et al, 1981).

Labouring in Water

There are considerable perceived benefits of using immersion in water during labour, including less painful contractions and less need for pharmacological analgesia, shorter labour, less need for augmentation, with no known adverse effects for the woman herself.

The evidence on timing of immersion into water during the first stage of labour was not robust enough to set criteria but early labour could be managed by mobilisation and other activities within a labour room rather than water immersion.

Most of the available evidence, both randomised and observational, is restricted to healthy women with uncomplicated pregnancy at term, although induction of labour and previous caesarean section

have been managed using water for labour and birth without reported problems.

Further Information

If you wish to discuss this in more depth, your midwife will be pleased to help you.



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