

Maternal Morbidities and Neonatal Complications

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Introduction

In the following paper, I shall review the two major practices of childbirth about both maternal as well as fetal well-being. In this regard, I shall review two commonly used delivery procedures during childbirth and contrast them to one another. (World Health Organization, 2025) These procedures include the Valsalva Manoeuvre and the Spontaneous Pushing. In essence, I shall review both methods of childbirth about time constraints experienced during the period of childbirth (Albers et al. (UNICEF, 2026), 2005). Furthermore, in reviewing these two methods of delivery, I will also consider the primary purpose of midwifery, which is to observe [patient safety](#) at all times, thereby ensuring the safety of both the mother and the child especially in the rising wake of maternal morbidities and neonatal complications. (Osterman et al., 2023)

It is imperative to note that no specific [evidence prohibits nursing](#) practitioners from teaching women how to push during childbirth. In this case, most midwives and nursing practitioners assisting expectant mothers during childbirth instruct the women to perform Valsalva Manoeuvre during the second stage of labor. (Centers for Disease Control and Prevention, 2024) In essence, I believe that the rationale used for pushing during childbirth is primarily drawn from the fact that pushing during childbirth speeds up the labor process, and, as such, quickens the pace of delivery (Danford and Mercein, 2017). Nonetheless, this process of pushing placed both the mother as well as the baby in harm's way, especially during neonatal complications.

According to my understanding of the childbirth setting, the midwife is supposed to guide the pregnant mother through the process of delivery by instructing her to push. In this case, the directions to push the baby out of the womb involve the Valsalva Manoeuvre, the open glottis pushing while breathing out (Hamilton, 2016). Normally, the maneuver relates to an attempted forceful exhalation against a closed airway, whereby the pregnant mother closes her mouth and pinches shut her nose while pressing out, as though she were blowing up a balloon. However, in this case, the mother is blowing out a baby from her womb. In most cases, this childbirth procedure is advocated during childbearing.

Nonetheless, after conducting extensive research in the same field and attending a biology lecture on parturition, I realized that it is unnecessary for women to receive guidance from midwives and nursing practitioners during childbirth. This assertion is because women can easily push independently without someone directing their pushing rhythms. However, the women may need assistance after delivery to detach the newborn baby from the umbilical cord (Lemos, Dean and Andrade, 2011). This

is a task that many cannot perform properly on their own, especially due to the excruciating labor pains that they would be experiencing at the time. Nevertheless, the above assertions do not confirm the perception that women are experts in childbirth, and, as such, are still in dire need of assistance during childbirth, especially when considering the processes involved in undertaking either the spontaneous pushing or the Valsalva Manoeuvre during childbirth.

Literature Review

A thorough literature review analysis is essential in focusing on a particular topic of discussion. In this particular case, I believe that by conducting an in-depth literature review analysis, I could discover various key issues regarding my research topic. Furthermore, the literature review analysis is effective because it reviews all the secondary data published on the same topic of discussion (Roberts, 2003). Therefore, I began conducting an extensive literature review analysis on the Valsalva Manoeuvre and Spontaneous pushing under restrained timing during the entire process of childbirth, all to maintain patient safety and well-being for maternal and fetal health.

The first step to conducting a proper literature review analysis is identifying the keywords for the search process. In this case, there are two major keywords, as the research topic focuses on comparing two methods of childbirth procedures that are commonly used, as well as identifying the dangers involved in both procedures. As such, the first keyword was the Valsalva Manoeuvre technique, whereby I researched to find out its definition, how it is undertaken, as well as how it is applied during childbirth, as well as taking note of the risks associated with using the procedure during the childbearing process (Roberts and Johnson, 2007). Similarly, the second keyword was the Spontaneous Pushing technique, whereby I researched its definition, how it is undertaken, and how it is applied during childbirth, in addition to unearthing the dangers associated with using the technique during childbearing procedures.

After identifying the keywords, the next step of the literature review involved identifying the right platforms or databases from which to conduct the research. The fact that the research topic was health-related meant that the databases identified for sources had to be health-related. This assertion is because health-related journals and databases had a stronger appeal about the findings and recommendations than opinionated journals or reports from interest groups (Prins et al., 2011). In this regard, I paid particular preference to journals from NICE and NHS detailing the two childbirth procedures and the possible risks or dangers associated with either of the processes. Some databases I used for my research included the Cochrane Library, Ovid Online, and EBSCOhost databases.

The choice of each database used during the literature review analysis was guided by the level of resourcefulness contained in each platform. For instance, my choice of the EBSCOhost database was particularly informed by the fact that it is an accented academic resource center, and this research is primarily undertaken for academic purposes as opposed to medical purposes, I considered it wise to use the database. As for the case of the Cochrane Library, my choice was influenced by the wide

range of sources that the library contained, and as such, this provided me with an extensive platform on which to conduct my literature review analysis (Simpson and James, 2005). The same case also applied to the online database. Searching through each database was not very difficult now that I had identified the right keywords for my analysis. In fact, this made my work very easy as after typing in the keyword alongside the research topic, I got a list of numerous articles relating to it, some recent, and some old, which is selected at my pleasure, giving preference to the most recent articles nonetheless.

A Summary of the Research Paper

In essence, the entire process of conducting this research study focused on determining the constructs of maternal and fetal well-being with regard to the childbearing procedure used by pregnant mothers during childbirth. In this case, the research study focused on two primary childbearing procedures commonly used by midwives and nursing practitioners to assist pregnant women in delivering during their second stage of labor. The techniques analyzed in this case were the Valsalva Manoeuvre and the Spontaneous Pushing technique (Danford and Mercein, 2017). The focus of this analysis was to investigate how these procedures are usually undertaken during childbirth and establish the dangers associated with using these procedures during the process of childbirth, and whether any or both of them endangered maternal and fetal health.

The method used was the literature review analysis, whereby secondary resources relating to the research topic, drawn from various websites and databases, were reviewed to correlate the impact of each process on childbirth (Albers et al., 2005). The research study's primary findings established that spontaneous pushings and Valsalva maneuvers negatively affected the mother and child. As such, they were inappropriate in maintaining patient safety during childbirth, primarily for [maternal health](#) and fetal wellbeing. These findings were largely related to the pressure and distress that both methods caused to both mother and child during childbirth.

Reflections

Looking back at this research study, I can confirm that it was informative and entertaining. In the first place, the research study focused on a new topic of discussion that I normally took for granted not knowing the dangers associated with or involved with using each technique during childbirth. In essence, I can consider myself as being naïve in the process of childbirth, but after completing the research study, I could rate myself as an expert in the field. For one, I learned how each procedure is performed and how the midwives must direct the pregnant mothers to perform each procedure (Hamilton, 2016). Furthermore, I also learned of the dangers associated with each procedure. As such, I could advise a pregnant mother accordingly on the right approach to use during childbirth to ensure the patient safety of both mother and child. My reflection analysis adopted the Gibbs model of reflection to establish the level of transformation that I had undergone as a person following the

completion of the research study.

Conclusions

In conclusion, I learned from the research study that neither of the two childbirth procedures commonly used by midwives during childbirth was appropriate for maintaining maternal safety and fetal well-being. The reason for this assertion was that each method caused a significant amount of pressure in addition to constraining the free flow of oxygen from mother to child, placing both mother and child at grave risk. In essence, some of the risks involved in the adoption of either the spontaneous pushing technique or the Valsalva maneuver during childbirth include fetal distress, maternal distress, prolonging the period of labor, as well as perineal trauma among many other different forms of neonatal complications.

In this case, I concluded that the best birth procedure that women should be encouraged to use during childbirth is the instinctive pushing technique, as the procedure embraces natural vocalizations. As such, this approach in childbirth would be very effective in eliminating the challenges experienced by women during childbirth when using either of the two procedures discussed above. Furthermore, the fact that the instinctive pushing technique lacks any time restrictions imposed on the mother and her fetus also plays a fundamental role in promoting maternal safety and well-being. In fact, awaiting the instinctive behavior leads to the reduction of incidence in the urinary system, the pelvic floor as well as perineal trauma. As such, I suppose these findings should be made public to facilitate midwives to understand critically the guidelines provided for the second stage of labor, all of which are undertaken with the primary goal of reducing the rate of maternal morbidities and the risk levels of neonatal complications.

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