## Trends, Attitude, and Knowledge about the Methods of Labour Pain Management among Polish Women

Authors: Kinga Zebrowska, Maria Falis, Katarzyna Kosinska-Kaczynska, Bartosz Godek, Olga Plaza, Katarzyna Kwiatkowska Abstract: Introduction: According to the ministerial decree of 16 August 2018, each woman in Poland during childbirth has the right to the pharmacological and non-pharmacological labour pain management (LPM). Aim: The aim of the study was to assess the knowledge of Polish mothers about pharmacological and non-pharmacological LPM, to investigate which methods they chose and their satisfaction with chosen ones. Material And Methods: A prospective cross-sectional study was performed among women who gave birth between 2015 and 2018. The self-composed questionnaire was distributed via the Internet in October 2018. Results: 13.727 women participated in the study. 75% have learned about LPM from the Internet. 68% of them did not gain any information on LPM from doctors during their prenatal appointments Safety of the newborn (46%), midwife's advice (40%) and the chance of the immediate pain relief (39%) were the most important issues while choosing LPM. Respondents used a wide range of non-pharmacological methods, such as the assistance of partner during labour (81%), physical activity (58%), immersion in water (37%), relaxation techniques (15%) and others. 11% of mothers did not use any of the LPM methods. 52% of women declared that they wanted to use the pharmacological anaesthesia, while 49% had it performed (28% epidural, 16% inhaled anaesthesia, 5% parenteral opioids). Pharmacological methods were unavailable due to lack of anaesthesiologist in the maternity ward (41%) or inaccessibility of the chosen methods in the hospital (31%) and too advanced labour (43%). 48% of respondents did not decide to use pharmacological methods, because the pain was bearable (29%), anxiety of child's health (17%), or belief that the pain is natural and it should not be avoided (16%). 83% of respondents believed that epidural analgesia has no influence on the time needed to gain a full cervix dilatation and 81% of them claimed that serious spinal cord injury is a common side effect of epidural. 51% believed that epidural increases the risk of caesarean section. Conclusions: The knowledge about the methods of LPM is not satisfactory. We should focus on well-maintained education guided by doctors, midwives, and media.

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