

## Alison's Story

My story dates back to May 2004 when I gave birth to my second child, a boy. It was well documented that I was expecting a large baby, I had a daughter at 37 weeks weighing 9lbs and this one was expected to be larger. I was offered a growth scan at 38 weeks when I was told the baby was already 'about 10lbs'.

I went into labour five days late and progressed fairly rapidly. I was 6cm when I went into hospital. At the hospital I was told the baby was still high and I expected a long wait so had an epidural. About three hours later I was fully dilated and started to push.

The baby's head was born easily at 1.20am. A minute or two after that we knew something was terribly wrong, the crash team was called and the room was filled with about 12 people. My son was stuck by the shoulder due to his size. His head was turning a deep blue colour and there was no way he was moving. I was put into a different position with my legs almost round my shoulders and a midwife pushing down on my abdomen trying to dislodge his shoulder. He was eventually pulled out by his arm 9 minutes later. He was completely lifeless and blue. He had no heart rate and did not take a breath. I didn't even know what sex he was. He was given cardiac massage and ventilated before being taken to NICU. I asked if he was dead and no one replied. At this stage I had not seen him, just a crowd of people standing over him trying to revive him. They took him straight to the NICU. It seemed hours before the doctor came back to say he was alive but very, very sick. He was 11 pounds 13 ounces. They told us he was showing signs of brain damage, but they did not know to what extent. He suffered convulsions, meconium aspiration, mild encephalopathy due to asphyxia, low heart rate and hypoglycaemia.

The next morning we were taken to NICU to see him. He was still having convulsions for which he was given Phenobarbitone but he was breathing unaided. The convulsions stopped after five days and he was allowed back on the ward with me. He was very floppy and seemed to sleep all the time, not waking for feeds and being generally unresponsive. Still no one could tell us if he had suffered long term damage and he was discharged after a week.

I was told by my consultant that I might have flashbacks about the birth but was not offered any support or advice. At home he was still very quiet and would sleep all the time. After about three weeks he started to become more alert when the drugs were no longer in his system. He was badly bruised around the arm and shoulder and held his arm in an awkward position. He had regular physiotherapy and massage and was seen by a specialist surgeon in Leeds when he was around 6 months old. Thankfully, he needed no treatment and regained full use of his arm. We were still very worried about him, not knowing if he suffered any long term effects but he met all his developmental milestones on time and was otherwise healthy. He is now just over 2 years old. He is slow to talk and he is due to see the speech therapist in a few months. We do not know if this has anything to do with the circumstances of his birth or not, apart from that he is a normal, lively toddler.

Around 2-3 months after the birth I started to have anxiety and panic attacks, not helped by the sudden and unexpected death of my father just three weeks after my son's birth. I had a lovely health visitor who suggested I see my GP which I did and was offered cognitive behaviour therapy which I found helpful but I had PTSD symptoms and panic attacks for over a year and I am still not completely the person I was. The counselling helped me a great deal, at the time

I did not know what was happening to me at all, it was awful, the panic would strike at any moment and would scare the life out of me, I was convinced I was having a heart attack!

I cannot fault the delivery team and the people who worked to revive my son. I received a letter of apology from the hospital as I had raised concerns about my care antenatally. In the letter the consultant said he planned to undertake an audit of all big babies born that year to identify any issues that had arisen from my case and would then be formulating guidelines as to the management of patients suspected of having a large baby.

I hope they did and that no one else has to go through a similar trauma.  
Alison.