

## **Nick's Story**

### **Early Pregnancy**

The birth of my son was something that seemed to be doomed from the start. We found out that my girlfriend was pregnant after she was suffering with stomach pains for a few days. It came to a head when I awoke in the early hours of the morning to find her sobbing in the foetal position on our bathroom floor.

After taking her to casualty and being told that she was pregnant in a matter of fact way with terrible bedside manner and lack of any care we were rather stunned. We were told that the pregnancy was ectopic and that Amanda would be admitted to a ward to have a procedure later that day to remove the pregnancy. Given that she would be going to theatre she was deemed as 'Nil by mouth'. After being on the ward for about 15 hours we realised that the IV drop which she had been hooked up to wasn't turned on. She had gone yellow as a result of consuming no liquids for nearly 20 hours.

A junior doctor was sent round to see us and was very chirpy as she told Amanda not to worry about the procedure even though they might need to remove one of her fallopian tubes which could have implications on her future fertility. The manner in which this information was delivered was nothing short of shocking.

Eventually at about 11pm (nearly 24 hours after arriving at the hospital) they took Amanda down for surgery. Before taking her in the consultant wanted to examine Amanda to check the situation. After five minutes she came out and had been told that there was nothing wrong with the pregnancy and everything was normal. Her pains were the egg bedding in.

If the consultant hadn't insisted on checking her over first (which at one point wasn't going to happen) they would have terminated a perfectly healthy foetus. If this had happened would we have ever found out?

### **Near the Birth**

At around 6- 7 months we were aware through Amanda's scans that our son wasn't growing as rapidly as he should be and was under weight. This situation was monitored closely and at 8 months we were told to come in the following day for Amanda to be induced because her placenta was failing and our son was a little over 3 lbs.

After going through the induction process for two whole days nothing had happened. On the third night in hospital Amanda started to experience some severe chest pains. She's never one to complain but describes it as feeling as though she was going to die. She couldn't control her bodily functions and was in a lot of distress. The midwife on call was bleeped and came in. She told Amanda not to worry and that it was only trapped wind prescribing a dose of Gaviscon! Amanda was adamant that trapped wind was not to blame but given that the midwife was the professional she went along with the diagnosis.

The pains continued through the night along with sickness and incontinence. When I arrived the following morning she looked grey. There was no life in her face and she looked as though she were on her death bed. Shortly after I arrived Amanda's full time midwife arrived and was shocked at the state of her and although she didn't say

so at the time she looked very worried. She immediately took some blood samples and had them sent for analysis following up with calls for the results every 20 minutes.

As she had suspected Amanda had been suffering from pre-eclampsia during the night which had developed further into HELLP Syndrome. Within about 5 minutes of this diagnosis a consultant arrived who sat on the bed calmly and explained the condition and how they were going to treat it. In the background two doctors wheeled in a bedside trolley which was covered with drug bottles. They spent about five minutes drawing from all the bottles to fill two large syringes which were then administered to each arm via timed IV machines.

During the course of the day Amanda had dilated to around 4cm and the decision was made to perform a C-Section to deliver the baby as quickly as possible. Before administering the epidural another set of bloods were taken and came back with the results that Amanda's blood platelet count had dropped from an average of around 400,000 to 22,000. This meant that she was unable to have the epidural in case of internal bleeding on the spine. Also if they had performed the C-Section with a count that low it would have been very difficult to stem the bleeding after the procedure.

It was only at this point that I was really made aware that the complications that we were facing were pretty serious. I took the midwife to one side and asked how serious the situation was to which she replied 'Amanda is very ill and we need to get the baby out as quickly as possible, if you need to call anyone for support do it now'.

I called Amanda's parents and broke down in tears as soon as they came on the phone. They rushed to the hospital.

The Consultant had decided that time was now critical for both Amanda and the baby. They decided to blue light 4 units of platelets from another hospital on the other side of London to perform a transfusion. Once they had performed the transfusion they would then give Amanda a general anaesthetic to perform a C-Section as quickly as possible.

When they contacted the other hospital to arrange the platelets it was 4:45pm on a Friday evening which was about the worst time you could ask for in terms of traffic! They arrived by 'blue light' in 40 minutes.

Amanda was prepped and I was told that I would not be able to go into theatre because it would be a full surgical procedure. They wheeled her away and there was no more comfort I could offer her. It was at this stage that I really panicked.

I had to wait outside with Amanda's parents. The consultant who would be performing the C-Section came out and saw us and explained what they were going to do. He was very calm and instilled a lot of confidence in me but he did state that it was a very serious situation in which they couldn't predict the outcome. He said that they would do everything possible to help both mother and baby. At this point I had to sign a consent form for them to go ahead.

I watched as the vehicle with its blue lights and sirens arrived. The guy in the vehicle ran through the reception area and into the maternity unit. I watched realising that I might not ever see Amanda again or our unborn child.

After about 15 minutes the consultant came out and told us that whilst giving the platelet transfusion Amanda had started to dilate naturally and that they wanted to

deliver the baby naturally if possible. I was asked if I wanted to go into theatre and be with her.

I am about the worst person to deal with blood and needles given the fact that I have a phobia of them. However I had decided in advance that I wanted to be at the birth and the £150 I had spent on hypnosis leading up to the event would now be put to the test.

I got scrubbed up and went in. There was a nurse on either side of Amanda squeezing the platelet bags to get them into her as soon as possible. Shortly afterwards and with the help of some forceps our son Joshua was born at 8:25pm 25.11.2005. He weighed in at a tiny 3lb 10oz. After checking him over and showing him to Amanda and myself, he was rushed off to the Special baby Care Unit. I went with him while Amanda was taken back to the recovery area. This was the point at which she was at most risk.

Amanda spent a further 4 days in hospital being pumped full of magnesium and other drugs to balance her blood pressure and bring down the effects of the HELLP Syndrome. Being so full of drugs and ill herself she found it very difficult to bond with Joshua. She didn't want to hold him, feed him, or be anywhere near him really. It was down to me to perform of the parenting duties for the first week. Once Amanda had been discharged it didn't get a great deal better. Coming home from hospital without your baby is a traumatic experience and not a great feeling.

Joshua spent the first 4 weeks of his life in the Special Care Baby Unit and was allowed to come home when he was just over 4lbs.

I have to say that apart from the on call midwife and her dose of Gaviscon the Maternity team at the hospital were amazing. Their teamwork, skills, knowledge, and ability to perform under such pressure was truly a testament to the hospital. I strongly believe that had it not have been for them both Amanda and Joshua wouldn't be here today. All in all we went through a terribly traumatic experience but are truly lucky to still be here.

### **Post Birth**

Once home we could really start to be a proper family and Amanda started to bond with Joshua. Amanda has been through a bout of Post Natal Depression and was diagnosed with PTSD when Joshua was 15 months old. It's a tough road to travel and a difficult thing to deal with after everything we've been through but I'm sure we'll get there in the end. Amanda has had a course of counselling which has made things worse rather than better, and a course of anti depressants which she is now coming off of.

I am currently doing some research into CBT regarding traumatic birth.

I am also applying to the hospital to try and gain copies of Amanda's records in order to give some more detailed info regarding our case and hope to add this soon.

I have no issues in being an email contact for others to speak to if necessary, you can find my contact details on the supporter page of the BTA website.