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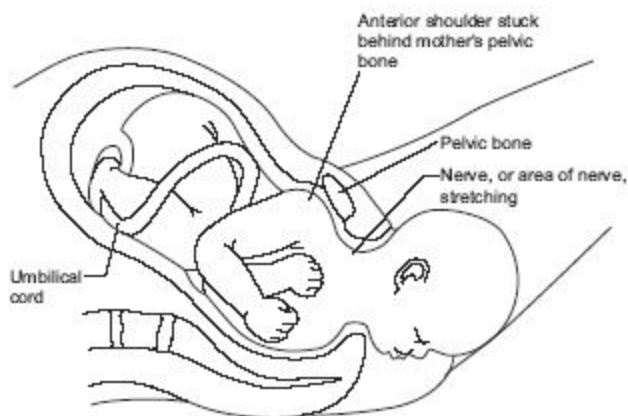
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Shoulder Dystocia



What is shoulder dystocia?

Shoulder dystocia occurs unexpectedly during childbirth. It is when the baby's head has been born but one of the shoulders becomes stuck behind the mother's pelvic bone, preventing the birth of the baby's body (see diagram below).



Shoulder dystocia: the baby's shoulder becomes wedged behind the mother's pelvic bone

Shoulder dystocia can occur during a normal (spontaneous) birth or an instrumental (ventouse or forceps) birth .

In a normal birth there is a small delay between the delivery of the head and the body but in shoulder dystocia the delay is longer than normal. The head has been born but the baby cannot start breathing because its chest remains compressed in the mother's pelvis. At this time, the baby's body also squashes the oxygen carrying umbilical cord.

In this situation the baby's shoulders need to be quickly released so that the baby's body can be born and the baby can start breathing air into its lungs

1. How common is shoulder dystocia?

Shoulder dystocia occurs in about one in 200 (0.5%) of births.

2. Can shoulder dystocia be anticipated?

At every birth there is a small risk of shoulder dystocia. In most instances, it is not possible to identify who it will happen to or why it occurs.

Some factors may indicate when a difficult birth might occur. These are:

- large babies (over 4.5 kg)
- diabetes in pregnancy
- previous shoulder dystocia
- induction of labour
- slow progress in labour.

Shoulder dystocia has been linked to the birth of large babies. However, most large babies (over 4.5 kg) do not have a difficult birth. In addition:

- ultrasound scanning is not an accurate predictor of birth weight towards the end of pregnancy, particularly in large babies
- at least half of all the babies who have shoulder dystocia weigh less than 4 kg.

3. Can shoulder dystocia be prevented?

In most instances, shoulder dystocia cannot be prevented because it cannot be predicted.

- If a mother has previously had a birth complicated by shoulder dystocia, the obstetrician or midwife may discuss having a caesarean section birth.

4. What happens if a baby has shoulder dystocia?

When shoulder dystocia is suspected during the birth, it can be very frightening for the mother and birthing partner. It is an emergency and therefore minutes matter.

Your midwife will push the emergency bell and three or four members of staff, including obstetricians, midwives and a doctor for the baby (pediatrician), will come into the delivery room and assess the situation.

There are specific manoeuvres to help to release the baby's shoulder and allow a safe birth.

5. What could shoulder dystocia mean for a mother and baby?

For the baby

- Nerve damage (brachial plexus injury)
 - Other Injuries
- Shoulder dystocia can cause other injuries including fractures of the baby's arm or shoulder. In the vast majority of cases, these heal without any problems. Sadly, in some situations, even with receiving the best care, a baby can suffer brain damage, if he or she is not getting enough oxygen (birth asphyxia) and can even die.

For the mother

- Vaginal tears
- Heavy bleeding (postpartum haemorrhage)
- Emotional impact