

Advice to help you complete your Birth Plan

Please discuss your birth choices with your midwife and have the knowledge that your birth plan is a working document you can change and adjust to meet your individual needs. Consider what you do/don't want and feel you can use a check list to help you write your birth plan to maximize your safety whilst in hospital care.

Example:

- Order and pack an extra supply of antiepileptic drugs (AEDs) in anticipation of admission to hospital
- Set reminders for medication times on your mobile [Epilepsy Society app](#)
- Share your birth plan, summary of epilepsy and treatment plan with the hospital midwife
- Identifying emergency call buzzers in all rooms. If your partner needs to leave the room, please ask for a midwife to attend to maximize your safety
- Continue your AEDs as prescribed even during labour; do not miss any doses as this could result in an increased risk of seizures occurring.
- If you feel nauseous, please ask for an anti-sickness injection to prevent vomiting and allow absorption of AEDs.
- Bring a recording of all your favorite music that helps you to relax for use in labour.
- Many women find it useful to have massage and use relaxation techniques which they have practiced antenatally, such as: [Mindfulness-NHS advice](#). For further details click on: [NHS birth pain advice](#).
- Stay as mobile as possible and drink enough water in order you are not thirsty.
- Feel supported and listened to and be central to all shared decision making about your care. Any intervention should only be with your consent.
- If immersing in water is your choice of pain relief, as well as discussing risk assessment and safety with the midwife & obstetrician; do conduct your own risk assessment. Click on [Epilepsy Society, Risk assessment](#). Also, ask yourself, would you feel safe in that environment; if there a hoist if I need to get out quickly? Avoid being in a bath or pool unattended at all times. Stay well hydrated, as it can become really hot in the birthpool room. If you feel at risk of a seizure, inform your birth partner and midwife and be helped out of the pool, safely.
- Inform your birth partner and midwife urgently if you feel at risk of seizure at any time in the labour.
- Avoid pethidine as this is converted to norpethidine which evidence suggests has the potential of lowering seizure threshold. Guidelines suggest that Diamorphine is an alternative analgesia if requiring sleep in early labour; this will change your perception of the pain rather than take it away. Please note, this can cause excessive drowsiness and vomiting.
- Gas and air (entonox) is considered safe for most women with epilepsy. Be careful not to overbreathe as this can make you feel dizzy, light-headed, with tingling in your lips, hands and sometimes feet. Following the contraction, if you have these symptoms, tell the midwife and she will be able to show you how to relieve these symptoms.
- If you have a history of absence seizures, avoid hyperventilating (over-breathing) if using entonox (gas and air) and when baby's head is delivering.

- Consider epidural if this is your requested form of pain relief or if you require more effective analgesia (pain relief) to allow you to rest. Ordinarily, an epidural is sited when a woman is in established labour. Be guided when to have it by how you are feeling, your level of tiredness, your progress in labour and the expert opinion of the midwives/obstetricians who are caring for you.
- For me, the safety data for use of TENs machines is inconclusive for use in pregnant women with no long term follow-up of mums and babies. Therefore, I am personally unable to recommend this form of pain relief. Please discuss this further with your midwife or care provider.

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