



Postpartum hemorrhage is one of the leading causes of maternal death worldwide; it occurs in about 10% of births and accounts for over 130,000 maternal deaths annually.

Active management of the third stage of labor has been shown to be more effective than expectant management in preventing blood loss, prolonged third stage of labor, severe postpartum hemorrhage, and resulting maternal death.

Routine use of active management of the third stage of labor for all vaginal singleton births in health facilities is recommended by the International Federation of Gynecologists and Obstetricians (FIGO) and the International Confederation of Midwives (ICM), as well as by The World Health Organization (WHO).

Pitocin is the brand name of the artificial form of the hormone Oxytocin. Oxytocin is a great hormone. It's probably your favorite hormone. It does important things like make the uterus contract, allow breast milk to come out, and perhaps most wonderfully, creates feelings of love and bonding that can range from fondness to ecstasy.

The artificial form of the hormone makes the body respond like the natural hormone, but it does not affect the brain. With Pitocin, we miss out on the best part of Oxytocin - those lovely feelings of love, reduced perception of pain, and bonding with our baby. The Pitocin floods the neuro-receptors that usually accept the Oxytocin, so there is no room for any natural Oxytocin that may be produced to get through.

So, not only does Pitocin not pack the emotional punch of Oxytocin, it prevents it! This is one reason many women want to avoid using the drug. In addition; studies have demonstrated an association between breastfeeding difficulties and Pitocin exposure; probably due to the disruption of the natural hormonal processes.

Many mom's might want to avoid Pitocin for induction or augmentation, but not if the other option is Cesarean. Something that you may not realize though, is that Pitocin is used more often postpartum than during first stage labor. Many providers have a standard practice of injecting mothers with Pitocin immediately after delivery. If you have, or had, an open IV line at delivery, you may not even be aware that you have received it.

After your baby is delivered, the third stage of labor begins. This is the separation and delivery of the placenta. In order for the placenta to separate from the uterus, the natural oxytocin which is at extremely high levels at the time of delivery, causes the uterus to contract; in effect eliminating the surface area that the placenta was attached to, and closing off the blood vessels in that area.

Practitioners are usually in one of two camps on third stage of labor management; active or expectant. Expectant management of the third stage of labor involves allowing the placenta to deliver spontaneously or by using gravity or nipple stimulation (your baby suckling causes you to release your own oxytocin). Active management involves administration of Pitocin to increase contractions and hasten delivery of the placenta, as well as controlled traction of the umbilical cord. Early cord clamping and cutting has traditionally been a part of active management, but most practitioners have moved away from that practice based on recent evidence suggesting delayed cord clamping is beneficial.

You might think that expectant management would be best - as we are always taught to respect our bodies and the natural process, but surprisingly, statistical evidence suggests that active management has better outcomes including lower maternal mortality rates and lower rates of hemorrhage. Keep in mind however, that these are international statistics, and include many rural and third world births that do not offer the protections of a modern hospital birth.

It is important to remember that medications have their place. They can make life more pleasant and save lives. As the patient, it is your responsibility to have a conversation with your provider about what is important to you. In an emergency, safety always should come first, and Pitocin can be life saving in certain circumstances. You need to decide what is best for you and your baby, while balancing risk and safety.