

## <u>" THE LETTER OF MADRID"</u> For the improvement to the assitance to the low risk birth

We, health professionals involved with maternity care meeting 8-9 de April, 2005 in Madrid and wishing to contribute to improving care for low risk birth in our countries, are ready to take actions that contribute to the development of appropriate birth practices to facilitate safer and more harmonius births for women and a more wellcoming entrance to life for future generations.

Our group recognizes the necessity of respecting the physiological processes and cultural values of each society to promote multi-professional and interdisciplinary care.

## Considering:

-The importance of birth as one of the most significant events in the life of woman and her family - an essential unit of each society.

- The importance of basing our clinical practice on scientific evidence, of adopting procedures and practices proven to be efficacious and restricting unnecessary practices

- The importance of rescuing birth as a critical socio-cultural and existential event with deep and wide personal repercussions.

- The importance of increasing the participation of the couple in the process of birth.

- The importance of combining technical and scientific knowledge that has been systematized and proven in daily practice

Basing ourselves in the principles of Bioethics and scientific evidence, we propose:

- 1. Family centered care
- 2. Full preparation of the couple for birth and breastfeeding
- 3. Encouraging the company of individuals selected by the woman.
- 4. Avoiding the systematic use of procedures of doubtful efficacy.
- 5. Adapting maternity services to permit the laboring

6. Being flexible about the mother's dietary intake during the period of dilatation in labour

- 7. Simplifying monitoring protocols
- 8. Promoting the use of non-pharmacological drugs for pain relief
- 9. Allowing adoption of the position of the woman's choice during the pushing stage.
- 10. Polícy of restrictive use of episiotomy.
- 11. No use of fundal pressure (Kristeller) during the pushing stage.
- 12. Avoiding rapid cutting of the umbilical cord except in cases of absolute indicates.
- 13. Ensuring contact between mother and baby inmediately upon birth.
- 14. Ensuring no separation between mother and baby.
- 15. Ensuring rooming-in during the post-partum period.
- 16. Encouragement and protection of breastfeeding.
- 17. Continuos training of the whole medical team.
- 18. Encourage multidisciplinary collaboration.

These proposals are in perfect accord with the documents created with the same goals in similar meetings in European and American countries (Washington, Fortaleza, Trieste) with participation of professionals in maternal- infant healht.

Individuals involved in birth assistance (citizens, physicians, nurses, midwives, obstetricians, etc.) have a unique opportunity to weave a network that can generate the most effective birth model ever created by human beings.

Information about indigenous birth practices is available, some of which (massages, versions, vertical positions....) are highly effective and could be incorporated into daily practice.

There has never been access to so much information about the phisiology of birth and about the kinds of care available to the birthing mother. Appropriate technologies exist that can facilitate the adoption of any model care

Today is possible to apply apropriate technology in combination with humanistic care and the concepts of holism.

We can create the best birth model that the world has ever known.

Madrid, 9 April 2005

Universidad Estatal de Campinas, Brasil Universidad Complutense, España Hospital Clínico San Carlos, Madrid, España Asociación Española de Matronas, Madrid, España