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Recommendations Relax on Liquid Intake during Labor

Washington, DC -- Women in labor may be allowed to quench their thirst with more than just the standard allowance of ice chips, according to a new Committee Opinion released today from The American College of Obstetricians and Gynecologists (ACOG) and published in the September issue of *Obstetrics & Gynecology*. Although the guidelines on prohibiting solid food while in labor or before scheduled cesarean surgery remain the same, ACOG says that women with uncomplicated labor, as well as uncomplicated patients undergoing a planned cesarean, may drink modest amounts of clear liquids during labor if they wish.

Standard hospital policy for many decades has been to allow only ice chips for pregnant women in labor if they were thirsty. Women are not allowed to eat any solid food during labor. "The reason for restrictions on food and water (or other liquids) during labor is to avoid aspiration in the event that a woman needs to be anesthetized for a cesarean delivery," said William H. Barth, Jr, MD, of Massachusetts General Hospital in Boston and chair of ACOG's Committee on Obstetric Practice. Aspiration, which is potentially fatal, can occur when the contents of the stomach are drawn into the lungs while under anesthesia. Over the past 60 years, however, the incidence of maternal death due to aspiration while under anesthesia has declined dramatically, mainly due to the prohibition on solid foods as well as improvements in obstetric anesthesia.

According to ACOG, women with a normal, uncomplicated labor may drink modest amounts of clear liquids such as water, fruit juice without pulp, carbonated beverages, clear tea, black coffee, and sports drinks. Fluids with solid particles, such as soup, should be avoided, however. Women who have uncomplicated pregnancies and are scheduled for a cesarean delivery may also drink these clear liquids up to two hours before anesthesia is administered.

"Allowing laboring women more than a plastic cup of ice is going to be welcome news for many," Dr. Barth said. "As for the continued restriction on food, the reality is that eating is the last thing most women are going to want to do since nausea and vomiting during labor is quite common."

According to ACOG, expert consensus supports the recommendation that women undergoing a planned cesarean delivery or elective postpartum tubal ligation after vaginal birth should have no solid food from six to eight hours prior to surgery. Pregnant women who have additional risk factors for aspiration, such as morbid obesity or diabetes, and those at high risk for operative delivery (ie, forceps, vacuum), may need to be restricted from fluid intake on a case-by-case basis.

Committee Opinion #441, "Oral Intake during Labor," is published in the September 2009 issue of *Obstetrics & Gynecology*.

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The American College of Obstetricians and Gynecologists (ACOG) is the nation's leading group of physicians providing health care for women. As a private, voluntary, nonprofit membership organization of approximately 56,000 members, ACOG: strongly advocates for quality health care for women; maintains the highest standards of clinical practice and continuing education of its members; promotes patient education; and increases awareness among its members and the public of the changing issues facing women's health care. www.acog.org