

of spinal anaesthesia tends to produce uterine inertia, thus prolonging the second stage of labour and sometimes making the use of forceps necessary. The use of drugs to induce more powerful uterine contractions is also suspect, in that the period of relaxation between contractions is shortened, the time that the baby is without oxygen (during contractions) is increased, and pain-killing drugs are made more necessary."<sup>6</sup>

45. Research has "shown fetal hypoxia and respiratory delay at birth to be major correlates of low I.Q. and neurological impairment . . . [and] also suggests that fetal hypoxia and a delay in respiration at birth can interfere with the child's later ability to cope normally with stress."<sup>7</sup> Neonatal brain damage can also result in later behavioural disorders such as those considered within the syndrome of minimal brain dysfunction. Although other factors influence the occurrence of this syndrome, in most cases there is the underlying cause of cerebral damage.<sup>8</sup> In an American study of children who had suffered from perinatal oxygen deficiency, there appeared to be a significant impairment in the area of social competence of the subjects at the age of seven years.<sup>9</sup> Equally, there is the possibility that birth complications involving damage to the brain may lead to the later development of neuropsychiatric disturbances. Studies have found that brain damage is "accompanied by a much increased rate of psychiatric disorder."<sup>10</sup>

46. Some of the obstetric practices which are used in Canada should be re-examined from the point of view of the safety and well-being of the infant. The use of drugs and methods of intervention in the natural birth process have been criticized in representations made to your Committee.

47. There has been considerable progress in recent years in Canada. Between 1968 and 1975 infant mortality rates dropped from 21.8 deaths per 1,000 live births to 14.3 and the mortality rate for mothers declined to 7 deaths per 100,000 live births from 27. In some cases classes are now available to prepare young couples for the birth experience. Many women are being taught to give birth in ways which are as natural as possible. Hospital procedures are being changed to permit much freer contact between parents and new-born. These developments are to be highly commended and encouraged.