

## **HB1563/SB0879 OPPOSE**

I am writing you as a concerned mother of four, a professional in the human services field for a decade, and a provider of care throughout the childbearing year. Being a birthing woman in Maryland who also serves birthing families **HB1563/SB0879** directly impacts me as birth is always unpredictable. As a human services professional I have seen the lifelong financial impact of birth injuries.

I began my work in the human services field as a direct care respite provider. I worked with families who had children, siblings, and relatives etc. who were developmentally disabled and intellectually impaired. Some of the people I worked with had impairments due to genetic and chromosomal abnormalities. Others were injured during the birth process which caused them to need lifelong care. Their injuries included hypoxia, internal decapitation, cerebral palsy, Hypoxic Ischemic Encephalopathy, and varying degrees of brachial plexus to name a few. Daily care and programs needing to be provided for a lifetime impacts families financially.

The five leading causes of infant death in 2017 were (in order) birth defects, preterm birth/low birth weight, maternal pregnancy complications, SIDS, and injuries. The leading brain-related injury in relation to birth trauma is cerebral palsy. CP is estimated to affect around 800,000 children, with 8,000-10,000 new cases diagnosed each year. In many instances, CP could have been eliminated with the corrective preventative measures by physician. For example, if a physician fails to monitor fetal distress and take the appropriate actions, the infant may develop CP. So we are going to now tell families that their provider's negligence isn't something they or the hospital will be accountable for?

Pitocin is used in the majority of hospital births to induce or augment labor and nearly all to "manage" the third stage. There are risks to using Pitocin. It can cause hyper stimulation of the uterus which causes contractions to be longer, stronger, and closer together. This causes added stress to the baby because it restricts placental flow of oxygenated blood. Restriction of oxygenated blood leads to fetal distress and hypoxia, to name a few. Mismanagement of medication is a common error in hospital births and is a direct contributor to many birth injuries. Providers and the hospitals that employ them should be financially accountable for the injuries they cause.

Birth injuries that arise during delivery is a common occurrence. These types of injuries occur from the use of vacuum extractor or forceps, tools invented to assist in delivery. Other injuries from delivery may include administering the wrong medication, mishandling the infant, resulting in broken bones, lacerations, or skull fractures. When a high level of oxygen is introduced, it interrupts the growth of the vessels and voila – you have Retinopathy of Prematurity. Stevie Wonder was born with sight, but because he received an excessive amount of oxygen, he developed ROP, his retinas detached and he became blind.

Lacerations occur during cesarean sections. I served a family recently whose baby had a laceration to their face. When they spoke with the provider about the injury they were told "The laceration occurred because he was being squeezed so hard in utero during contractions." It doesn't take an expert in birth to know that is completely false. Parents are adjusting to the newness of welcoming life into the world. Then to be hit with the reality of having a child injured during or after the birth process they shouldn't have to struggle with the idea of having a limited cap on a fund of how/when to care for their child. Parents should have a course of action for injuries to their children during or after the birth process. The providers and institutions that caused said injuries should be financially responsible for restitution. To minimize the severity of these injuries by having a limited fund that cannot begin to encompass the financial demands of a lifetime of care is insulting to those parents who are living this daily. It is insulting to parents who will, sadly, be in this position. With infant and maternal mortality rates in the United States climbing annually the providers and institutions where the majority of birth occurs should be financially responsible when their actions cause an injury to an infant in their care.

Meredith Lovell  
211 N Lee St  
Cumberland MD 21502