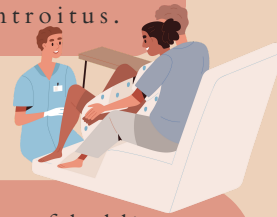


## CLINICAL SIGNS OF THE 2ND STAGE OF LABOUR

Changes in the woman's behaviour, changes in fetal heart rate, rupture of membranes, anal cleft line, Rhombus of Michealis, expulsive uterine contractions and urge to push, visible external signs at the perineal floor, appearance of the presenting part at the introitus.



## HANDS ON /HANDS OFF

### DEFINITION OF KEY TERME

the "hands-off" method consists of observing the release of the fetal head, without placing our hands on the woman's perineum or on the head of the fetus. We also distinguish the method called "hands-poised" which differs from "hands off" by its vigilance in the face of the exit of the fetus.(HAS, 2018).

The "hands on" method consists of holding the fetal pole with one hand, and holding the perineum with the other. Control of the fetal head, kept thus flexed, avoids sudden deflection, with the aim of limiting the risk of perineal lesions (HAS, 2018).

## DISCUSSION

### SCOTLAND

- "With hands off technique, instead of guarding the perineum and applying pressure, we have our hands poised to receive the newborn without coming into contact with the perineum."
- "We learned that the hands off technique does result in fewer episiotomies (Aasheim et al, 2017), overall hands on technique will result in fewer anal sphincter injuries, and thus lowers the occurrence of third and fourth degree tears (Smith et al, 2013).
- "In Scotland, hands off technique is disregarded for the more efficient, and in general safer, hands on technique."

### SWITZERLAND

- "The use of "hands off" or "hands on" in practice does not prevent perineal injuries."
- "According to NICE recommendations (2014), both techniques can be used."
- "The WHO (2018) recommends the use of the hand's on technique during the 2nd phase of labor."
- "In practice, for the midwife it is recommended to use the practice with which the professional feels most comfortable while being able to warn women of the risks and benefits of the two techniques."
- "In our practices, we only observe the hand's on method during our internships"

## CONCLUSION

From our research, we found that Swiss practices are similar to Scottish practices. It is therefore interesting to know how to practice the two techniques of hands on and hands off or hands poised in order to be able to adapt the treatment according to the woman's wishes and the situation. Two qualitative research papers on women's attitudes and feelings towards intervention in the UK showed similar themes throughout.

Both countries have slight differences in practice, however they agree that the care given is based on the woman's informed choice.

In conclusion, Scotland and Switzerland have a differing approach to hands on, hands off technique but midwifery is a term which brings the two countries together.



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