

Natural Birth The Preferred Way

Transient Tachypnoea of Newborn (TTNB) or "Wet lung syndrome" is caused by failure to clear the fluid from the lungs after birth.

While inside the mother, the baby's lungs are normally filled with fluid. After birth, the fluid is expelled and the lungs are filled with air. For babies with wet lung, they either have too much fluid in the lungs or absorb the fluid too slowly. The fluid makes the lungs stiff, causing the babies to breathe faster and harder than normal. It is called "Transient" because it usually runs a self-limiting course with spontaneously improvement after a few days. However, some may have increasing breathing difficulty, progressing to respiratory failure and hypoxia requiring intensive care.

A study jointly conducted by the Department of Paediatrics & Adolescent Medicine and the Department of Obstetrics and Gynaecology at HKU Li Ka Shing Faculty of Medicine showed that the number of cases of TTNB requiring admission to neonatal intensive care unit (NICU) in Queen Mary Hospital has doubled from 20 in 2002 to 43 in 2006. Babies with wet lung were over-represented by those born by Caesarian section and did not run a self-limiting course as classically described. All these babies required various form of respiratory support. Potential life threatening complications might be found including pneumothorax or pneumomediastinum and shock etc.

Hence, natural birth through vaginal route is the preferred method of normal delivery. If elective Caesarian section is indicated, it is best preformed after 39 weeks, so that the baby lung are better prepared for the smooth transition to air breathing. In additional, babies at risk of wet lung should be carefully monitored after birth.