***Legionella* and Water Birth: Frequently Asked Questions**

1. How common is water birth and what are some of the risks in general?

* Water birth is a process in which the mother is immersed in water during some stage of labor or delivery. Water birth has gained popularity recently as it is thought to possibly reduce pain and stress on the mother as well as stress on the child.
* The prevalence of water birth is unknown in the United States but per a clinical review released by the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists in 2014, at least 143 birthing centers in the United States offer water birthing as an option and in the United Kingdom approximately 1% of births involve water immersion at some stage labor or delivery[[1]](#footnote-1).
* General risks include infection, inability of the child to properly regulate its temperature, and respiratory distress due to aspiration of water, including drowning or near drowning.

1. How can *Legionella* be transmitted to an infant during water birth?

* *Legionella* are transmitted by breathing in small droplets of water containing the bacteria. A child may aspirate or breathe in very small amounts of water containing the bacteria during or after a water birth.

1. What special hazards do *Legionella* bacteria pose to an infant? How difficult is it to treat Legionnaires’ disease?

* Bacterial infections—including infections with *Legionella*—may pose serious risks to infants and especially newborns. Infants’ developing immunity and physiology (e.g., continued lung development) places them at increased susceptibility and severity of disease. Respiratory infections are a major cause of illness, hospitalizations and mortality in infants worldwide.
* Many individuals can be treated effectively for *Legionella* infection with antibiotics. However, treatment effectiveness may be limited by a person’s overall health status (e.g., presence of underlying health conditions) as well as how quickly the person is diagnosed and treated after becoming ill. *Legionella* infection may quickly develop into more severe disease that spreads from the lungs into the blood and vital organs.

1. How big of a risk do water births pose if they aren’t conducted with proper sanitary precautions?

* The risk of infection varies based on many factors such as the stage of labor in which water birth is utilized. Any process or procedure that has the potential to introduce a microorganism into a person can lead to infection and pose a serious health risk. Water births should be conducted under conditions that eliminate or reduce the risk of infection, to the best of a healthcare provider’s ability.

1. What can women who decide on a water birth do to protect themselves?

* Women should avoid birthing tubs that have circulating water and heating elements (whirlpool style tubs). These tubs may be difficult to clean and raise the temperature of the water which may be conducive to growth of microorganisms. After filling, water should not be left in the tub for more than six hours as this increases the likelihood of bacterial growth and raises the risk of infection. Lastly, consider water immersion during the first phase of labor and not during delivery. Although data are limited, studies have shown some possible benefits of water birth to the mother during the first phase of labor but increased risk to the infant during delivery[[2]](#footnote-2).
* Regardless of healthcare provider or facility type, infection prevention plans and procedures should be in place and properly implemented. To the extent possible, women should research birth providers and facilities to ensure such plans are in place and actively in use to protect patients.

1. What other recommendations are provided for water birth?

* Become knowledgeable of water birth, carefully considering the documented benefits and risks of water birth at different stages of labor (first stage of labor vs. delivery).
* If a woman decides to proceed with a water birth, she should ask her healthcare provider about his or her training and experience in water birth and what infection prevention measures he or she has in place for water births.

For more information about current recommendations on water birth infection control practices, see the DSHS Midwifery Board’s Waterbirth Guidelines at: <https://www.dshs.state.tx.us/midwife/waterbirth/>

1. Papile, Lu-Ann, Jill E. Baley, William Benitz, Waldemar A. Carlo, James Cummings, Praveen Kumar, Richard A. Polin et al. "Immersion in Water During Labor and Delivery." *Pediatrics* 133, no. 4 (2014): 758-761. [↑](#footnote-ref-1)
2. Papile, Lu-Ann, Jill E. Baley, William Benitz, Waldemar A. Carlo, James Cummings, Praveen Kumar, Richard A. Polin et al. "Immersion in Water During Labor and Delivery." *Pediatrics* 133, no. 4 (2014): 758-761. [↑](#footnote-ref-2)