



Medical Misunderstandings

Topics, thoughts, or concerns may arise while speaking with your doctor or other medical staff at your birth. Having a good understanding of these common subjects can help you feel confident in making informed choices and advocating for your wishes.

Meconium:

Meconium is the first intestinal discharge of a newborn. Unlike feces, it only contains epithelial cells, lanugo, mucus, amniotic fluid, and bile. The bacteria found in meconium are the beginning of your baby's gut flora and not considered harmful. Meconium is widely recognized as not dangerous when newborns swallow the substance during birth. It is only considered harmful when a baby aspirates, or inhales, the substance where it can cause lung/breathing issues.



Preeclampsia

Preeclampsia is a condition in pregnancy characterized by high blood pressure that is often treated by delivery of the baby. One of the known causes is narrower vessels in the placenta that restrict blood flow through them. Structural differences in the placenta tissue do not alter the nutritional benefit of placenta consumption. How the placenta interacts with your body as a functioning organ is vastly different to how it interacts in your body as a food source. (*Note: this statement is also true when considering the role of a placenta in a mother who experiences gestational diabetes, in turn consuming the placenta would not cause these conditions to reoccur.) Because not much is known about this condition your birth provider may request the placenta be sent to pathology for research, it would be a personal choice if you would prefer to provide your placenta for this purpose.

C-sections

Some babies arrive via cesarean section, and so does their placenta! The surgery itself does not pose any interaction with the placenta that would deem consumption unsafe. The nerve blockers used so mothers may stay awake are the same or similar to those used during vaginal births for pain relief. If you receive general anesthesia or the reason for the surgery is a concern not listed, save the placenta and contact LifeTree Placenta.





Group B Strep

Recently, there have been many news articles published after a report was posted about GBS and placenta encapsulation by the Centers for Disease Control and Prevention (CDC). Unfortunately, some of the content of these articles has been sensationalized and is not factual, causing fear among new mothers and the birth community, including medical professionals.

The Basics:

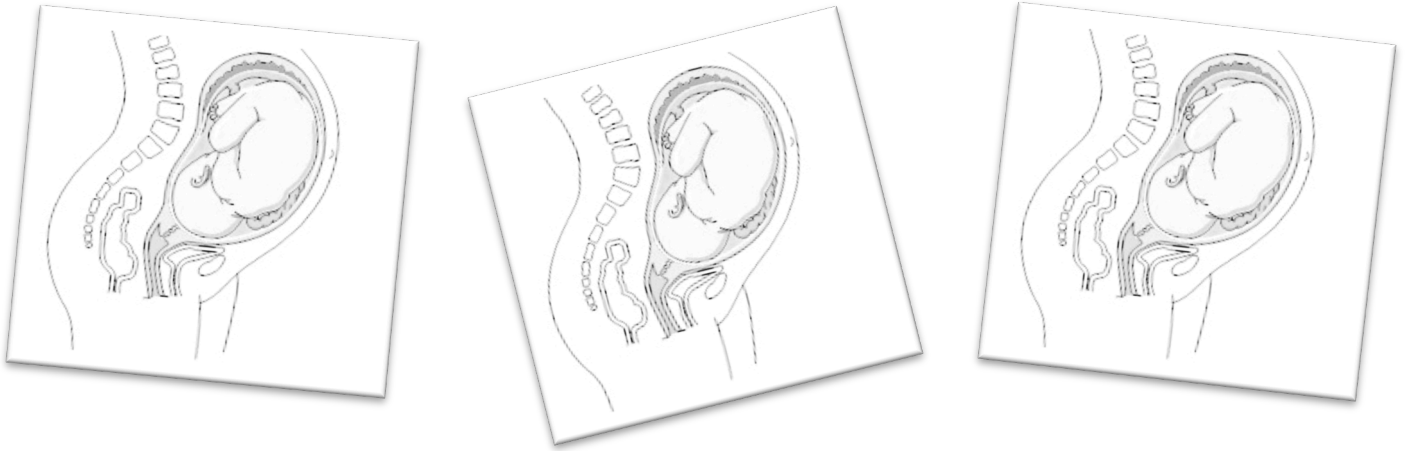
- Group B Streptococcus (GBS) is a type of bacteria that lives within the digestive system of many humans as well as some animals. It can be transmitted from contaminated humans, surfaces, and food sources. In the United States, GBS testing is conducted during pregnancy to see “how much” of this bacterium is present within the birth canal of the mother. A mother is said to be GBS+ when the number of bacteria have reached or surpassed a certain threshold, the mother is then said to be colonized. GBS colonization is not considered harmful and colonization is not the same as GBS infection. If a baby contracts GBS from its mother and its threshold reaches a certain level, the baby is considered colonized. Again, according to the CDC most colonized babies stay healthy and risks do not arise unless a GBS infection develops. If a GBS infection develops in a newborn it can be dangerous and for this reason mothers who test positive are advised to receive antibiotics during labor to potentially lessen the amount of GBS bacteria present in the birth canal at the time of birth. Since this is a bacterium that commonly lives within the body, the level can change prior to the birth resulting in unknowingly changing the status of the birth mother. A mother may be able to request a rapid test, known as NAAT, at the birth for possible current status if preferred.

Key talking points:

- GBS positive mothers are not advised with any instructions for “keeping baby safe” from their positive status postpartum, such as frequent hand washing, or forgoing kissing or breast-feeding the baby.
- For an untreated mother it is not considered dangerous enough to advise a c-section to reduce exposure to baby or to treat the baby at birth with antibiotics as a preventative.
- Sexual activity, including oral, is considered safe for a partner when the mother tests positive for GBS.
- GBS has been identified by the PHA of Canada to be eliminated during processing over 131 degrees.
- GBS was not found in the breast milk (or during her pregnancy) in the reported case study.

For more:

For more information about the CDC report and how it relates to placenta consumption:
<https://lifetreeservices.com/placenta-encapsulation-and-group-b-strep>



Chorioamnionitis

Chorioamnionitis is an inter-uterine infection caused when bacteria infects the chorion and amnion as well as the amniotic fluid. It can occur before or during birth. Although there are several reasons why a mother can spike a fever during labor, doctors may treat the mother as if she has chorioamnionitis to err on the safe side if concerned. Diagnosis is confirmed by maternal blood test or by testing the placenta after the birth.

It is not advised for a mother to move forward with any type of placenta consumption with confirmed chorioamnionitis. While heating the placenta at or above 160 degrees for

encapsulation would destroy bacteria present, the placenta tissue itself may have begun to decompose from the infection. It would be unknown how much “damage” was caused to the placenta by the bacterial infection.

If your doctor or birth provider suspects you may have an inter-uterine infection there are the steps you can take. After the birth handle and store the placenta as if you plan to move forward with consumption. Have the doctor or pathologist remove a small section of the placenta in-room to bring for testing. Keep placenta on ice or refrigerated until results are complete.



Food Safe Temperatures

At LifeTree Placenta the same temperatures for handling and preparing animal products deemed safe by the USDA and CDC for eliminating bacteria and health concerns are used to process your placenta.

All methods of processing offered reach a minimum of 160 degrees. Prior to processing the placenta is stored under 40 degrees in dedicated refrigerator. *Note: One client is processed at a time and all supplies/equipment are disposed of or fully sanitized between clients.