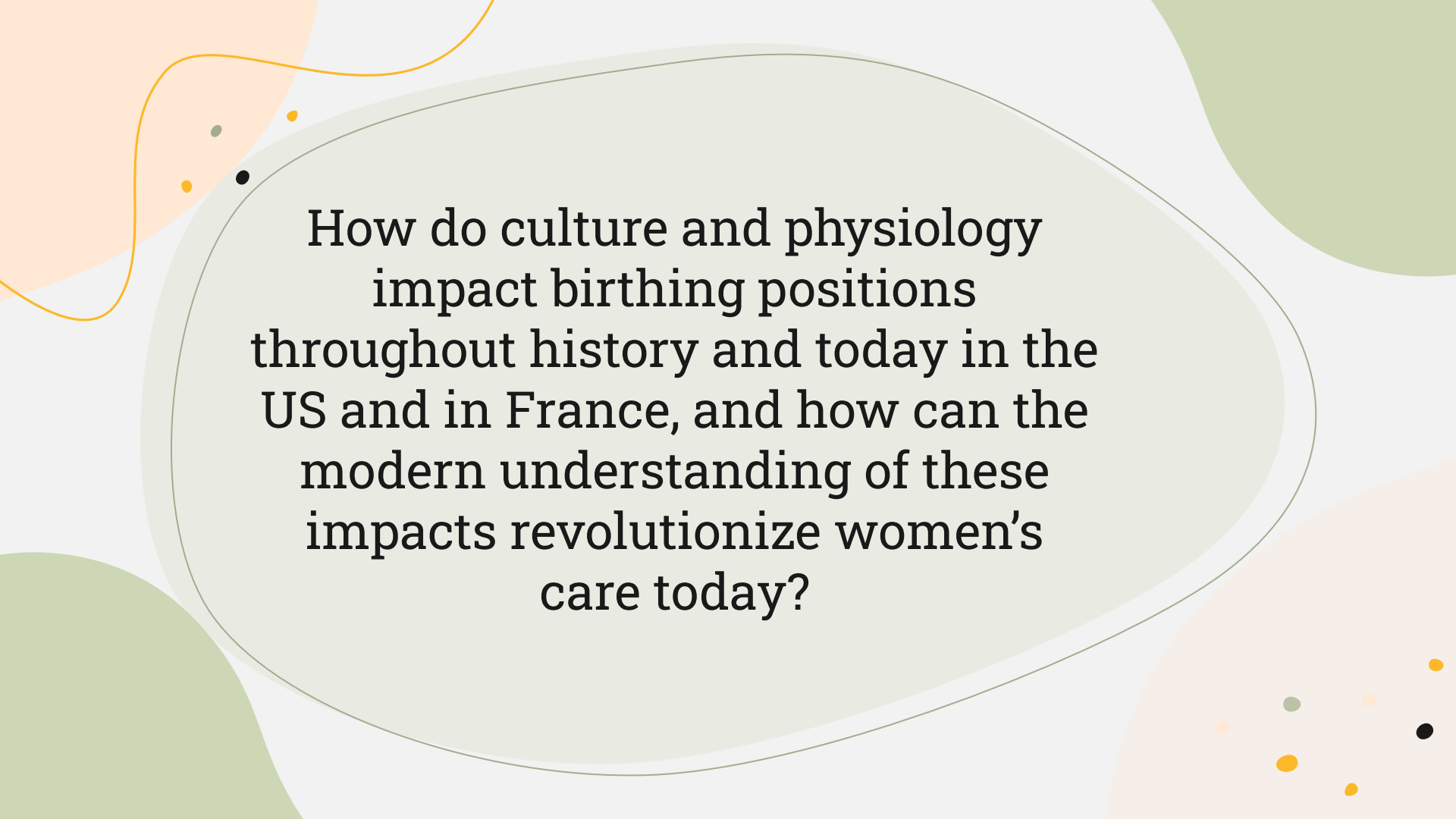




Don't Just Lie There: Analyzing the Systemic Roots and Standards of the Lateral Birthing Position, Impacting Mothers' Health in US and France

By Julia Johnson
Advised by Dr. Marion Duval, PhD



How do culture and physiology
impact birthing positions
throughout history and today in the
US and in France, and how can the
modern understanding of these
impacts revolutionize women's
care today?

Why this topic?

- Pre-Medicine & Shadowing Experience
- Birthing Practice Importance culturally and medically
- French culture and history



Plan

01

The Lateral Position and Increased Intervention

An evolution of the historical shift in birthing position in high middle ages France

02

Physiological Effects

Modern Medical Perspectives on Birthing Positions

03

US' Individual Autonomy versus French Institutional Trust

Cultural Outlook on Women's perspectives behind the birthing position



1500-1800s France

Vertical → Lateral
Birthing

Birth as an upright, communal, woman-led process

Entry of barber-surgeons → medicalization

Louis XIV + Mauriceau → cultural + medical push towards lithotomy

Du Coudray: national diffusion of the new standard

1500s

1600s

1700s

1780s

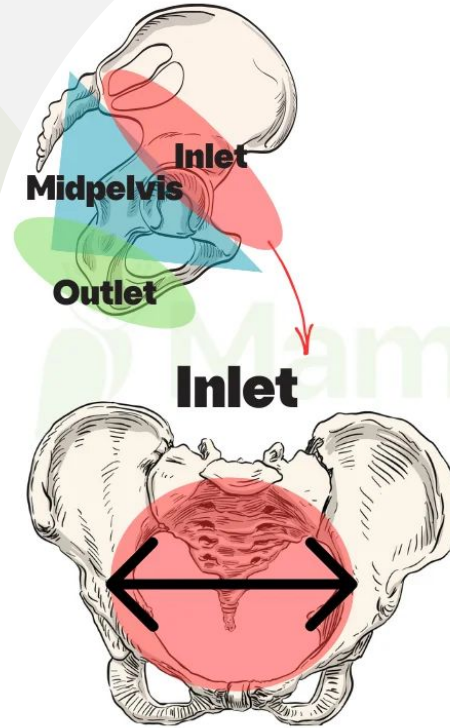


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“Birth is inherently an illness and abnormal...a tumor of the belly...[and] the vertical position is like an animal...leaving no room for a midwife.”
—François Mauriceau

Physiology & Outcomes

Modern statistics based on research of women across France and the US and their measured health outcomes



Comparison of Physiological Impacts

Upright

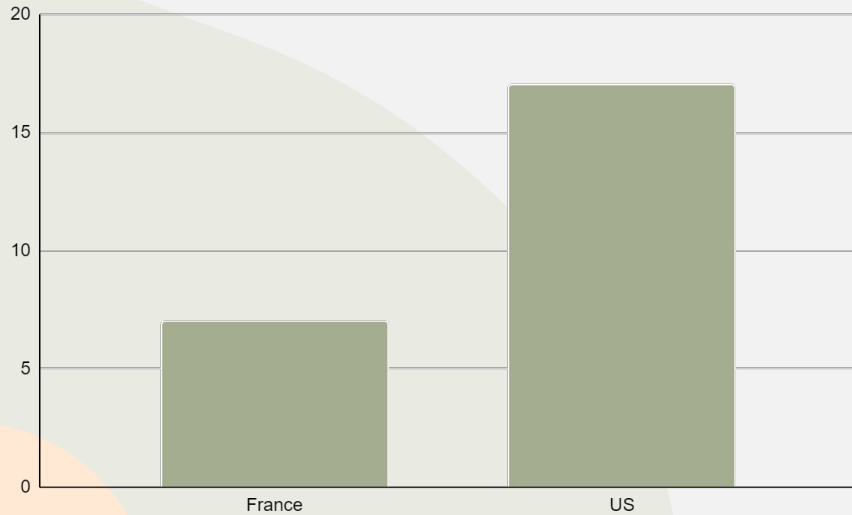
- Gravity
- Pelvic Alignment, favoring pushing efforts
- Better fetal and maternal oxygenation
- Decreased heart abnormalities
- Fewer third- and fourth-degree tears
 - More control
- Decreased postpartum depression

Lithotomy

- Decreased risk for postpartum hemorrhage
- Decreased first- and second-degree tears
- Easier for providers

Maternal Mortality

Maternal deaths per 100,000



US' mortality rate: 2.43x higher

Causes of Mortality

Country	Cause of death
France	Suicide
US	Cardiovascular Disease

Suicide is 14th in the US



03

Cultural Comparison

Outlook on “natural” births in France and
US, particularly home births

Why does this gap persist?



Institutional norms



Cultural attitudes towards risk



Provider convenience



US

France

Autonomy



Institutional Trust

Skepticism of Medicalization



Effects of education



Legal barriers in centralized system


Implications for obstetric practice



Re-evaluation of
default care



My future as a
physician



Thank you Any Questions?

CREDITS: This presentation template was created by **Slidesgo**, and includes icons, infographics & images by **Freepik**

Sources

Images

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