

Childbirth Drug Pitocin is Lawsuit Target

Widely Used Drug's Safety Challenged In Class Action Suit

A class action lawsuit has been filed in Tennessee against the manufacturer of a drug that has been used on millions of pregnant women to stimulate contractions during childbirth.

The drug is Pitocin, and the lawsuit alleges that it is "dangerously defective" and may be linked to the deaths of several mothers during childbirth and health problems with some babies. One doctor said he was "shocked" at the news of the lawsuit. "I'm sure someone has a legitimate concern, but this is really surprising to me," Dr. Peter Mark said. "All the hospitals, obstetricians and gynecologists use it almost every day. I wouldn't know how to practice without it, it's that useful." Marks did say that the drug can sometimes be overused.

The lawsuit alleges that the drug itself isn't causing the problems; rather it is a preservative in the mixture called chlorobutanol that lawyers are alleging causes the dangerous side effects.

In addition to possibly causing deaths of mothers during childbirth, some suggest its use may be linked to autism in some babies and low oxygen levels in others. Manufacturers of the drug say there are some health risks for some women given the drug, but defends both the drug and its labeling.

Some Things To Know About Pitocin

Are there problems associated with the use of Pitocin? Yes!

Oxytocin, your body's natural hormone, is secreted in bursts. However, when you are given pitocin you are placed on a regulated intravenous pump, to regulate the amount of pitocin to a steady flow. Therefore, pitocin induced contractions are entirely different from your body's natural contractions, in both strength and effect.

With pitocin, the induced force of the contraction may decrease uterine blood flow (This is also done during a natural contraction, but not for as long of a period and not as close together.). Therefore, reducing the oxygen to the baby. You will also receive continuous electronic fetal monitoring with pitocin. This is because fetal distress is more common with pitocin use and needs to be detected if it occurs.

We have also witnessed that pitocin can be the first domino in the domino effect. The IV, the infusion pump, and the continuous monitoring will confine most mothers to bed, decreasing her ability to deal with the contractions naturally. With the more painful contractions a mother is more likely to need pain medication, such as an epidural anesthesia.

Pitocin can present other hazards. For the mother these include: turbulent labor and tetanic contractions, which may cause early separation of the placenta (placenta previa), rupture of the uterus, laceration of the cervix or post birth hemorrhage. Fetal hazards include: fetal asphyxia and neonatal hypoxia from too frequent and prolonged uterine contractions, physical injury and prematurely if the due date is not accurate.

CHIROPRACTIC USE GROWS AMONG PREGNANT WOMEN

A growing number of pregnant women are turning to holistic therapies, including chiropractic. Researchers at Robert Wood Johnson Medical School pooled data on 463 women who had recently given birth.

In total, 31.3% of subjects used at least one type of complementary care during their pregnancies. Specifically, 5.2% visited a chiropractor; 2.8% had acupuncture or acupressure and 2.8% took vitamin supplements. 5.8% tried alternative techniques (biofeedback, meditation, yoga, tai chi, mental healing, imagery, Reiki, therapeutic touch or polar, dance, reflex, art and aroma therapies); 24.2% used natural therapies (teas, herbs, oils and foods used for medicinal purposes)

Ranzini A, Allen A, Lai Y. Use of complementary medicines and therapies among obstetric patients. *Obstet Gynecol.* 2001; 97(4 Suppl 1): S46.