ACSH’s Dr. Jamie Wells Debunks Myths About The ‘Fourth Trimester’ On Fox TV

By Jamie Wells, M.D. — December 30, 2018

The so-called “fourth trimester” is a catchy name being used to focus on the first three months of a baby’s life after birth and mom’s postpartum period. Branding normal phases of development and transitions have become a thing, mainly to sell books more than identify any newly found physiologic process or discovery - to learn more about how branding infant stages really pathologizes childhood read here [2]. Nevertheless, this stretch of time is certainly unique and I had the opportunity to sit down and discuss it for my recent interview on Fox 5 NY TV (click on video link here [3]).
For first-time parents especially, this phase can be a daunting and challenging one. It is filled with sleep deprivation, adjustments to this new weight of worry they had not previously known, dramatic lifestyle changes and mostly the realization that what they saw in movies or had in their mind before the baby isn’t necessarily what happens. And that control they thought they had in life was altogether a false perception. I always say having a baby is the grand humbler, grand equalizer no matter your age, socioeconomic status or otherwise.

There is no more pristine or significant a suspension system in the world than the pregnant woman. What a baby requires to sustain life in utero is vastly different from what he needs after he is born - or to go through the experience of birth. For instance, a fetus is nourished when in the womb via the umbilical cord and supported further by the complex and extraordinary maternal-fetal circulation and its fascinating physiology. Once born, the pressure differential between the fetal heart and lungs changes precipitously upon first breath and, as time passes along known intervals, holes in the heart that were needed to keep the infant healthy before are no longer necessary in the air and outside environment. All the while mom is also going through extensive physical transformation (eg consider the uterus’ need to contract down to pre-pregnancy size, conversions for milk production).

Don’t forget, the infant basically existed in a swimming pool for nine months and then expeditiously entered our world. It is no wonder mom and baby are a bit traumatized by birth. And how delivery occurred and the timing in the pregnancy, along with the mother’s (and baby's) clinical status etc also impacts the first months of a child’s life. The relationships are symbiotic in nature. During this major life shift, a mother could be caring for a premature infant who needs to catch up to his term peers or be recovering from a C-section. These nuances profoundly influence the baby’s and mother’s needs.

A baby under typical, full-term, expected conditions still warrants an adjustment phase. Each week that young is like a year of development to us. They start off sleeping most of the time, often in the
middle of feeds. As the weeks progress, they get more and more alert, vigorous and their suck and swallow matures and becomes more coordinated. To a mother, in particular a breastfeeding one, most women find feeding early on frustrating and overwhelming. Most say they really hit their stride around 4-6 weeks of life of the baby. Initially, an infant's vision is terribly poor seeing no further than breast to chin. This takes a long time to get more and more advanced. They don't track immediately or in a coordinated fashion.

The wonderful news is this is all par for the course of becoming a parent - it is why all of the babies are made so cute to get you through the tougher phases (ha!). Parents undoubtedly think the second child is easier because they survived the first one, so their confidence in managing it and this stage, in particular, rises. Being adaptable to the consistently unexpected will make it a more enjoyable ride for the whole family.

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[3] https://www.youtube.com/watch?v=tVAswgi2HhQ