

## **The Struggle for and Joys of Motherhood**

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The Lord carried me through numerous difficult and challenging years of infertility and a dozen high-risk pregnancies... all but one ending in miscarriage. What joy I had to be carrying the child I had prayed for so fervently and earnestly, for so long. My story is reminiscent of the historical accounting we have in the Bible of Hannah, the mother of Samuel, (for whom my daughter was named to commemorate my struggles to conceive), particularly in that long before my daughter was born, I had dedicated her to the Lord. Little did I know that my faith and desire to bring this child into the world would come face to face with the “life of the mother decision”.

In my youth I was a competitive athlete, competing in various track and field events on a state, regional, and national level. As such, I was in excellent physical health and condition. This presented a problem however, as according to numerous studies over the past few decades having an exceptionally low body mass index (BMI), body fat percentage, and/or being underweight can compromise reproductive fertility in women. I unfortunately possessed all three during my reproductive years. For all my high performance “fitness”, my body could not perform in the area for which it had been create by God...to be fruitful and multiply. I spent nearly a year on a modified workout routine and diet - drinking high protein meal supplements, consuming extra meals, snacks, excess calories, and yes excess fat – all to become healthy enough for my body to create and sustain life.

As a result of my “*reproductive*” health issues, for over two years I was followed by an OB/GYN, in our insurance plan, that specialized in fertility and was subjected to incessant physical exams, and ultrasounds, numerous procedures, lab work, hormone and other medication therapy, and more ultrasounds. The frequency and detail of the ultrasounds performed were such that I actually saw the ovarian follicle through its entire maturation cycle and the collapsing follicle, following ovulation, and the ovum (egg). *Can you imagine? Ultrasound truly allows us to see what only God saw for thousands and thousands of years.*

September 1994, I received the long-awaited news that I had a positive pregnancy test. That was a Tuesday. Wednesday, I began experiencing issues but was assured by the doctor that I was progressing normally and not to worry. Thursday I was experiencing different issues and was told that this was not uncommon and not to worry. By Friday of that week I had multiple issues and was presenting as a threatened miscarriage. Before I was even six weeks along, I was placed on bed rest and remained out of work on disability for the duration of my pregnancy.

Due to morning sickness, within a matter of weeks, I lost the 4lbs I had gained the first month of pregnancy and that developed into hyperemesis gravidarum (which for me was all day every day sickness) and I proceeded to lose an additional 12lbs - weight I had spent more than a year gaining in order to conceive. I spent the remainder of my pregnancy wishing I could eat for two, but generally unable to hold down much of what I had consumed, and it took several months to get back to my pre-pregnancy weight. At one of my early prenatal appointments, I mentioned to the doctor that I had noticed my blood pressure readings were gradually increasing. I was told that it's normal for the blood pressure to rise during pregnancy. Additionally, I developed an unexplained tachycardia and shortly thereafter I was identified as a high-risk obstetrical (HROB) patient.

It was a Friday evening in February 1995, I was a couple of months into the second trimester of my pregnancy and was scheduled to begin prepared childbirth classes the next morning, when I began experiencing an extremely uncomfortable somewhat rhythmic sensation in my uterus. The intensity was getting progressively stronger and lasting longer and there was a definite pattern to it. This was not consistent with the descriptions I had read for Braxton Hicks, so I asked to be taken to the emergency room. Once there, I told them that I was only 25-weeks along in my pregnancy and that I thought I was having contractions. I also informed them that I had been seen by a doctor at the clinic across the street and that I had been on bedrest since the beginning of my pregnancy. Since it was my first confirmed pregnancy, some assumed that I was experiencing false labor and had overreacted, but after four hours of testing and monitoring, they decided to admit me overnight for observation.

I awakened early Saturday morning to hear the end of the meeting as the nurses were changing shifts. One nurse said, "Mrs. Nicely's still here? We didn't expect her or the baby to make it through the night." I prayed silently as I tried to concentrate on slowing my heart rate and willing my body back to sleep. This was the beginning of my 8-week stay in the hospital.

Saturday afternoon, I was told that I had been diagnosed with a life-threatening condition that could only be resolved by delivering my baby prematurely. It was then and there that *I unexpectedly found myself faced with the "life of the mother" decision. Due to her prematurity, I literally had to decide between the life of my unborn child or my own.* I had pregnancy induced hypertension (PIH), which apparently restricted the nutrients and oxygen that my body was providing for baby. During my consultation, I learned that babies in utero gain weight more rapidly than babies outside the womb. I told the doctor that I loved my baby more than I loved my own life and asked the doctors what prevented me from serving as her human incubator. And that became the treatment plan... I would be the one connected to the IV tubes, taking multiple different meds, receiving oxygen, connected to an electronic blood pressure cuff (taken every hour 24/7), and contraction monitor (24/7), to be weighed daily, and have my blood drawn three to four times a day for various tests, and on a high calorie to bland and eventually only "clears diet... and baby would be allowed to stay where she was for as long as possible. This is when I realized that I would live in the hospital (a room with no windows) until I gave birth to my child. I had chosen to give my baby the best possible chance at life that I could, and I was trusting the Lord with mine and asked Him to give the medical team wisdom and to give me peace.

While changing shifts Monday afternoon, a team of doctors came into my room. They looked very concerned and indicated that they had obtained my medical records that morning once the clinic across the street had opened (this was before electronic medical/health records). They had just had a meeting regarding my case and had made note of a discrepancy with the dating of my pregnancy which directly impacted the medical treatment I should have received. They stated that since I had been seen by a fertility doctor, who had been managing my reproductive hormones, they would measure my pregnancy by the indicated date of conception, rather than the first day of the last menstrual cycle, as is the commonly accepted medical practice. This team of doctors was willing to acknowledge an additional week on the front end of my cycle, prior to conception, but as far as they were concerned, I was only 24-weeks along in the "actual" pregnancy. They then proceeded to tell me that if they had been in possession of my medical records the previous Friday evening, they would've informed me that there was nothing that could be done medically and that they would've sent me home. The thought that I most vividly remember is that they determined the value of my child's life based upon a date in my medical records. A mere seven days determined *whether there would be any medical intervention and attempts to save both lives or not.*

They didn't know that I had overheard the nurses speaking Saturday morning, but I knew that meant that I may well have either delivered a stillborn baby or one that was extremely premature and that I could've died in the process. Though I had not told an untruth, nor had I attempted to deceive, I recalled the story of the two midwives (Exodus 1:15-22) and thanked the Lord for sparing our lives... again.

While hospitalized, there were many scares (e.g. fire drills) and much transpired (arguing with the nurse who tried to give to give me the wrong meds one night). Early in April (about 7-weeks into my hospitalization), I asked the nurse if she had noticed that I had gained 6lbs in 1-week. She looked at my records and stated that it was good that I was finally gaining back the weight I had lost early on. I then asked her if she realized that 2lbs had come overnight. After an exam, I was moved to another area of the ward. I was now diagnosed with pre-eclampsia. My father was visiting with me on the evening of 10 April when the medical team came running into my room with the crash cart. They all went to different areas doing their assigned tasks and one asked how I was feeling. I stated that I felt fine and asked why they had come into the room in that manner.

My father and I were told that my blood pressure had spiked at 161/128 and that I should be having convulsions and slipping into a coma. We were told that labor needed to be induced immediately. Pitocin was introduced to my IV and plans were made to deliver my baby the next day. Since I was a HROB patient, the delivery was to take place in the operating room with two medical teams –one for me and one for the baby. I was told that judging by the measurements obtained from my daily ultrasounds that my baby appeared to have Intrauterine Growth Retardation (IUGR) and that she would need to stay in the NICU until she reached 5lbs or 3 months of age.

Early the next morning, the on-duty doctor came in and told me her shift was ending, but assured me she would return for the delivery, which was scheduled for later in the evening, and that there would be at least 7 other doctors there... even if she wasn't. I had originally planned to have a natural delivery but was encouraged to accept the offer for an epidural since I had already been in labor for 8-weeks and had endured every contraction. I agreed, and arrangements were made for an anesthesiologist to administer the epidural later that afternoon. We settled in for the day watching television, eating Jelly Bellies, monitoring contractions even more closely, waiting for the Anesthesiologist to administer the epidural, and eagerly anticipating the arrival of the baby.

Shortly before noon (and before the epidural could even be administered) I had a sudden and unexpected urge to push, so I told the student nurse who was assigned to stay in my room and sitting next to me. She leaned over and reviewed the report and said, "That looks like it was a big one". I repeated, "I feel like I have to push. I think the baby's coming". The student nurse patted me on the arm, stood up and, "Let me take a look". She then said, "Oh my God! The baby's crowning. Don't push!" I replied, "I told you I thought the baby was coming. I'm not pushing, but I can't stop my body from doing what it's doing". The student nurse ran out of the room yelling, "Mrs. Nicely is having her baby". We heard someone respond, "That's nice." The student nurse screamed, "No! Now! Stat!"

We then heard the sound of feet running and the crash cart being pushed rather quickly from down the corridor. By the time the nurses and the Resident Physician (the only one of the 7 doctors that were on the premises, that actually was available to attend in my time of need) had gotten to my room, I had delivered my baby all on my own and was sitting up and looking down at her and she was looking at me. A nurse placed her in my arms and I kissed her forehead and told her that I loved her and asked the Lord to bless her. Then the neonatal team rushed in and took her away. I later discovered that she had two very low APGAR scores and that she even had to be resuscitated and one point.

After giving birth, I was placed in ICU so that my blood pressure could be monitored and eventually moved to the postpartum recovery unit with all the other new mothers. The difference was that they had their babies and I had empty arms. The nurses would come and visit me and tell me how beautiful my daughter was, which only made my heart ache all the more as I had had such a short time with her. One nurse in particular was quite kind and used a Polaroid Instamatic camera to take a single photograph of my daughter in the Neonatal Intensive Care Unit (NICU).

On it she wrote:

Baby – Girl  
Nicely, Daphne  
Born - 04/11/1995 at 1113  
Wt - 2lbs. 15.9oz  
Lt – 15 ¾ inches

It would be over 24 hours before I was stabilized and allowed to see my baby again.

I was discharged from the hospital two days after giving birth, but my daughter remained in the NICU. By the time I arrived at home I was so despondent that I was driven back to the hospital to sit with her by her NICU isolette incubator.

I spent all day, every day, in the NICU. I knew that I could not allow myself to be afraid or to fear that she was too fragile, or I wouldn't be able to take her home. I learned how to administer NG (nasogastric) feedings and insisted on changing all of her diapers (teeny-weeny preemie bikinis) myself. It didn't take long for her to graduate to bottle feedings and once she developed a good sucking reflex, she was able to nurse. She started gaining weight and maintaining her own body temperature and was moved to a regular incubator. She developed bradycardia and apnea (a period in which breathing stops for 20 seconds or more causing a slower than unexpected heart rate, generally fewer than 60 BPM). Premature babies have immature nervous systems and she had to outgrow this condition before she could come home.

On night 10, the NICU staff invited me to room with my daughter to see if she would experience a bradycardia episode. Unfortunately, she did. On night 11 they allowed me to room with her again and she went the whole night without an episode. The next morning, they congratulated me and said that I could take her home. I was overjoyed, but a little confused. "Wait! I thought she had to be 5lbs or 3 months old before you would consider discharging her?" They told me that they had been observing me and that I had been providing as good a care for her as they did and that they felt she was okay to go home with me.

My daughter came home at a mere 2lbs 11oz, after only 12-days in the Neonatal Intensive Care Unit. In the end, He showed Himself mighty and able, as not only did we both survive, but at the time, my micro-preemie, born at just 32 weeks 3 days, was the smallest baby to be discharged by the hospital. She was and still is my miracle baby.

My daughter completed 25 years of age in April of 2020. All things considered, she's relatively healthy. She loves people, is grieved by injustice and wants to make the world a better place. Her compassion and enthusiasm for life are contagious. Most importantly, she loves and serves the One True Living God. She is such a joy and blessing to me. It is my honor to be her mother and because of her, for me every day is a celebration of life and Mother's Day.