

DESPERATE MEASURES  
(A baby's delivery gone wrong!)

"Dr. Riley, come quick, my baby is in trouble." Dr. "Tambo" had suddenly appeared in front of my desk outside of the operating rooms at RFM Hospital in Swaziland, where I was working as a missionary surgeon. Dr. Tambo had graduated from Medical School at the University of Natal in Durban, South Africa. He had excelled as an intern at our hospital. His brain had already absorbed an amazing amount of medical knowledge. He was an avid reader, always trying to learn more. Then he had been hired to work with our missionary doctors since we were so short staffed. Not only was he an excellent GP, but he was also a good Anesthetist and was very good at Obstetrics. While he was an intern, Dr. Theron, an Anesthesiologist from South Africa, had spent a year at our hospital and had given extra training to our two interns. Dr. Tambo's wife "Mary" was an excellent OB nurse. She had trained in Durban. They had been married while her husband was in Medical School. They had a very smart three year old daughter. Our whole hospital staff was a tight knit family who really cared for each other.

I knew that Mary was pregnant with her second child and that she had reached her due date. Two weeks previously Mary had been checked in South Africa by the OB specialist who had delivered her first baby. He said the ultrasound showed the baby to be in the head down position and looked perfect. Since Mary had no problems with the first delivery, the doctor said Mary would have no problems with her second delivery. Mary chose to have her husband deliver her baby at RFM hospital. Meanwhile Mary had started her Maternity leave two weeks previously. She was now in labor, her vital signs were good, and a routine delivery was expected. Since her husband was our best OB doctor, at that time, no one was concerned about him delivering his own baby. Now something had gone wrong. Dr. Tambo was calling on me, one who was less experienced than he. I did most of the Caesarean Sections, plus a few symphysiotomies and vacuum extractions, but had done much fewer vaginal deliveries.

Obstetrics has been described as hours of boredom punctuated by periods of sheer terror. I did not know that my time of terror had arrived! I dropped the notebook where I had just recorded my last operation, and rushed to the delivery room in the building next door. Dr. Tambo had been ready for a routine delivery when, suddenly, the membranes ruptured and both of the baby's feet emerged. It was too late to do a C-section! He was able to deliver the arms and shoulders, but he was unable to deliver the head. The cervix had clamped too tight around the neck of the baby! He then felt the pulsations stop in the exposed umbilical cord. He panicked and asked for my help. He was in a state of collapse; he couldn't continue with the delivery. I had no experience with breech deliveries, except for doing craniotomies on dead babies with hydrocephalus.

I quickly put on a sterile gown and gloves. The baby was a girl! I noticed that the baby's skin was very blue, even though Mary was wearing an oxygen mask. I looked at the oxygen tank. The gauge said it was empty. No one had noticed it. Matron Hlope, the nurse in charge was on vacation. With Mary on maternity leave, the rest of the nurses had been unable to keep up with the work! Mary had not got any extra oxygen. A student nurse ran to the storage room to get a full tank. The baby looked dead. It was not moving. It had to be delivered immediately. I failed to deliver the baby's head using the usual maneuvers! Then I remembered reading about the "Prague Snatch". This was my last hope! I twisted the baby so she was facing

downward. Then I inserted my right index finger in her mouth and hooked it inside the lower jaw and pulled. Meanwhile I grabbed the baby's two feet in my left hand and brought them up onto the mother's abdomen pulling as hard as I dared toward the mother's chin. This arched the baby's neck and spine backward to an alarming degree. This way I was using the baby's body as a lever to pry its head out of the uterus! If I pulled too hard on the baby's lower jaw I would tear her mouth apart! If I pulled too hard on the feet I would break her neck and damage the spinal cord! A strong nurse pushed hard on the lower abdomen. I noted that all the nurses were praying! Just when it looked like I had failed the head popped out of the uterus. The baby was blue and limp. It had no reflexes or heartbeat. It was a little girl, APGAR SCORE- ZERO! I had three girls and could not even think of losing any of them. I grabbed the infant laryngoscope, but there was no light! The oxygen tank on the crash cart was turned on but it was also empty. The Baby Ambu bag respirator was not in the cart. Meanwhile I had started mouth to mouth respiration, while others were scurrying around trying to find new batteries for the scope! The baby's face was so swollen that it was hard to get air into her lungs. I could not feel a pulse nor hear a heartbeat, so I started gentle chest compressions. New batteries were put in the scope but then we found that the bulb was burned out. Someone went to Surgery see if they could find a new bulb. Meanwhile a full oxygen tank was delivered and the Ambu bag had been found. It had not been cleaned from the last time it had been used! Finally the baby's trachea was intubated. Gradually the skin became pink; then I could hear a faint heartbeat. Still the baby would not breathe on her own! All I could do was keep the baby warm, give intravenous glucose with bicarbonate through the umbilical vein and keep ventilating with oxygen. I was sure the baby's spinal cord had been damaged! After about thirty minutes the baby gave a gasp, then, gradually the gasps became more frequent. After another hour the baby was breathing on her own. Still, she was not moving her arms or legs. After another hour in the incubator, the baby started moving her arms and legs a little bit. The breathing tube was then removed. Still the baby would not cry! I had to tell the parents that the baby's brain had gone too long without oxygen. I expected severe permanent brain damage. The parents thanked me profusely for my effort and told me that they believed in miracles.

That night I had trouble sleeping, visualizing a child growing up with mental retardation and cerebral palsy. Doctors in USA were being sued by parents even if the delivery had gone perfectly! The children had twenty one years to sue the doctors who delivered them! Students wanted to sue the doctor who delivered them if they didn't become valedictorians of their high school. The doctor who delivered them had to be blamed! It could not possibly be their poor study habits! Million dollar settlements were not unusual! Doctors were leaving some States or refusing to deliver babies because so many of them were being sued. Now this mentality had been exported so even doctors in Swaziland were being sued. One of our doctors was blamed because a baby had not learned all his ABCs by the time he was one year old! Could God work a miracle when it looked like all of us had failed?

The next morning I had to force myself to go to the nursery. My heart sank when I saw the incubator was empty. It had been sterilized, covered with plastic, and readied for the next baby. Why hadn't I been notified that the baby had died? I was then informed the baby was with her mother. When I walked into the room, there was Mary nursing the baby. She was smiling. The baby was sucking eagerly! Dr. Tambo was sitting there smiling. The baby girl was named Tandi [Love]. I examined the baby. She had normal movements and reflexes. Still I was

skeptical. I had seen brain damage show up years later. I removed the umbilical IV line since the baby was able to breathe and suck normally.

Dr. Tambo had been born and raised in Zululand. His mother lived in Piet Retief, in Zululand, near the Swaziland border. He would often take his family to visit his mother when he had time off. He became friends with the Afrikaans South African border agent who gave Dr. Tambo his personal home phone number. He was impressed with Dr. Tambo's medical knowledge. He told Dr. Tambo to call ahead and he would open the border just for him at any time, day or night. The man always made sure Dr. Tambo got through the border with no unnecessary delays. He also encouraged Dr. Tambo to return and work among his Zulu people who needed good doctors who could speak their language. He said he had ulterior motives because he and several family members also lived in Zululand! Mary went back to work in our hospital. Tandi seemed to be developing normally.

Dr. Tambo then felt called to return to serve his people. When the people in a small town in Zululand heard about Dr. Tambo they were ecstatic. They were tired of having foreign doctors coming and going. They promised to build him a clinic and hire appropriate nurses. Some of them had gone to school with him. When he accepted the position the whole town went to work building the clinic. Experts from Durban volunteered to make sure the new Clinic met all the medical building codes. A loan was provided so that a suitable house could be built. There was a big celebration when the new doctor arrived. The people no longer would need to travel long distances to find a good doctor! Much of the money came from the Apartheid Government that was eager to show the world that Africans were being trained to take leadership roles in their communities. We were all sad to see the Tambo family leave Swaziland. But we were glad they would be serving their people. They could have gone to a big city and made a lot more money!

Six years later there was a knock at my office door and a little girl walked in. "Hello Dr. Riley"; she said in perfect English. "I am Tandi; thank you for saving my life when I was born." Then the rest of the Tambo family walked in. We had a joyous reunion. They told me that Tandi's teachers said she was the smartest student they had ever taught. She was in the second grade and was far ahead of the rest of her class. She was also very coordinated. And very athletic! A big lump came up in my throat. My heart was filled with gratitude when I remembered all that went wrong during the delivery. We adults couldn't speak. All we could do was to point straight up. Tandi was absolute proof that a Higher Power had been in charge when we mortals had failed! This was Divine Intervention for sure! When the hospital staff heard that the Tambos were visiting they crowded around them checking Tandi and shouting praises to God. All along they had been sure that God would intervene!

Other miracles happened in our lives, and in the lives of our families and friends, making us aware of God's Love, Mercy, and Protection. I have described some of them in other documents I have written.

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