

Space pregnancy leads to hard labor: Analyzing the challenges and solutions

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International Journal of Science and Research Archive, 2024, 13(02), 1620–1623

Publication history: Received on 15 October 2024; revised on 24 November 2024; accepted on 26 November 2024

Article DOI: <https://doi.org/10.30574/ijrsra.2024.13.2.2298>

Abstract

Human childbirth in space presents unique challenges due to the low gravity environment, which complicates labor and delivery. This article explores the physiological and environmental factors affecting childbirth in space and proposes solutions to mitigate these challenges. Key challenges include the difficulty of pushing the fetus out due to microgravity, increased risk of bone fractures from decreased bone density, and the unknown effects of high gravitational forces during ascent on pregnant individuals. The importance of the mother's position during childbirth is emphasized, with the squatting position deemed most suitable. Additionally, considerations for fetal gender, pregnancy timing, and radiation exposure are discussed. Insights from animal research on space births provide valuable perspectives, highlighting the adaptability of life in space. The article concludes that, with careful planning and preparation, the obstacles of space childbirth can be overcome, paving the way for successful human reproduction beyond Earth.

Keywords: Space; Childbirth; Multi-planet; Pioneering; Midwifery; Ethics

1. Introduction

The concept of human childbirth in space presents a unique set of challenges, primarily due to the low gravity environment which complicates labor and delivery. This article delves into the physiological and environmental factors that affect childbirth in space and proposes innovative solutions to mitigate these challenges. By understanding these complex issues, we can pave the way for successful human reproduction beyond Earth.

2. The Challenges of Space Pregnancy

- **Low Gravity and Labor Complications:** In the microgravity environment of space, the absence of gravitational force can hinder the mother's ability to push during labor. Animal studies have shown that births in space are particularly challenging for mothers. For example, rat mothers have been observed to lose up to 25% of their body weight and experience significant changes in their hormonal and nutritional systems. Despite these difficulties, they were able to give birth to normal-sized babies and care for them naturally. This suggests that with proper preparation, humans might also adapt to space childbirth.
- **Increased Risk of Bone Fractures:** Microgravity leads to decreased bone density, increasing the risk of hip fractures during labor. This is a significant concern for mothers who need to exert considerable force during childbirth. Ensuring bone health through diet, exercise, and medical interventions is crucial.
- **Effects of Gravity on Pregnant Women:** Astronauts experience approximately three times the gravitational force during ascent to orbit, and the impact of this pressure on a pregnant person is unknown since no pregnant woman has traveled to space yet. Adapting to microgravity and high-gravity environments before and during pregnancy is essential. Training with zero-gravity flights, fall towers, and neutral buoyancy facilities can help improve compatibility and reduce risks.

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3. Mother's Position During Childbirth in Space

- **The Importance of Position:** The position of the mother during childbirth is critically important, even on Earth. Based on midwifery experience and the unique conditions of space and microgravity, the squatting method, which dates back to 5000 BC, is considered the most appropriate option.



1995. Available from: [https://medical-dictionary.thefreedictionary.com/batrachian position](https://medical-dictionary.thefreedictionary.com/batrachian+position)

Figure 1 Squatting position

3.1. Advantages of the Squatting Position

- **Straight and Vertical Birth Canal:** Helps the fetus descend more easily.
- **Increased Pressure on Cervix:** Aids in cervical dilatation.
- **Stronger Uterine Contractions:** Reduces the need for astringent drugs.
- **Better Breathing:** Facilitates easier breathing for the mother.
- **Reduced Pressure on Veins and Arteries:** Decreases cardiovascular disorders and improves uterine-placental blood circulation.
- **Utilization of Body's Gravity:** Despite the lack of gravity, the mother's force can be used effectively.
- **Expanded Pelvic Outlet:** Increases the size of the pelvis by about two centimeters.
- **Assists in Descending and Pushing the Fetus:** Provides enough force to eject the fetus.
- **Shorter Second Stage of Labor:** Speeds up the delivery process.

3.2. Disadvantages of the Squatting Position

Increased possibility of tearing the vagina and perineum.

- **Other Considerations:** Experts suggest that positions other than lying on the back and side, such as sitting or walking, can significantly improve the delivery process. Providing an in-situ walking mode (like a treadmill) for the mother in space could be very helpful. Additionally, the supine position is prohibited due to the pressure of the uterus on the inferior vena cava and the possibility of supine hypotension syndrome.

3.3. Fetal Gender and Other Considerations

- **Impact on Fetus During Ascent:** High accelerations during launch and gravitational stress may cause placental detachment or amniotic sac rupture. Ensuring a cephalic presentation (vertex position) before launch is essential to reduce the risk of complications.
- **Cervical Dilatation and Engagement:** The cervix should be dilated to 3-4 cm before launch, and engagement (passage of the largest transverse diameter of the fetal head through the pelvic inlet) should occur. This ensures that the fetal head remains fixed in the pelvis, reducing the likelihood of changing the organ of presentation, umbilical cord prolapse, and pressure on the cord due to membrane rupture from acceleration.
- **Gender Considerations:** Research indicates that women have lower tolerance to gravitational stress (G-tolerance). Therefore, selecting male fetuses for space birth may reduce the possibility of fetal death.
- **Pregnancy Timing and Fetal Weight:** To ensure full-term development, the fetus should be between 37 to 42 weeks gestation. Induction of labor on Earth after 37 weeks and one day to 38 weeks allows for planned labor and mission coordination. A fetal weight of 2900 to 3100 grams is ideal to minimize delivery complications, such as the need for maternal episiotomy and postpartum uterine hypotonia.

3.4. Radiation Exposure

- **Effects of Radiation:** Exposure to ionizing radiation in space can cause genetic and chromosomal deviations, nausea, vomiting, and reduced bone strength. Radiation may destroy the egg cells of a female fetus inside a pregnant woman. It is crucial to limit radiation exposure to protect both mother and fetus.
- **Recommendations for Radiation Exposure:** The United States Federal Aviation Administration recommends a maximum radiation exposure limit of 1 mSv for a pregnancy, with no more than 0.5 mSv per month.

3.5. Animal Research and Human Reproduction in Space

Very little research has been done on the ability of humans to reproduce in environments with altered gravity. However, animal experiments on birth in space have been conducted, primarily on mice. While it may seem that these results cannot be directly applied to human births in space, they provide valuable insights. Comparing the anatomy, tissue, and cells (including the heart, skeletal system, respiratory system, vascular structure, and uterus anatomy) of mice with humans, as well as pregnancy and placenta formation, offers critical information for mission planning.

From a brief observation of the comparisons of the anatomy and histology of some organs of mice with humans, it becomes apparent that mice, with their simpler versions of cells and organs, managed pregnancy and childbirth in space, and their infants also adapted to the space environment with slight differences. This raises the question: if mice can do it, why can't humans, with their more complex and advanced cells and organs? It is time to confront this challenge and find definitive answers. Perhaps the notion that giving birth in space is impossible or difficult exists only in the minds of those who have not attempted it, not in practice and reality.

4. Conclusion

While the concept of childbirth in space presents numerous challenges, these can be managed through careful planning and preparation. Understanding the physiological changes and risks associated with space pregnancy is essential for ensuring the safety of both mother and child. Training in simulated microgravity environments, controlling fetal weight through diet, and minimizing radiation exposure are critical steps in addressing these challenges. By facing these obstacles head-on, we can pave the way for safe and successful human childbirth in space, transforming what once seemed impossible into reality.

Compliance with ethical standards

Disclosure of conflict of interest

No conflict of interest to be disclosed.

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