

CAMPAIGN "Haloperidol during childbirth, never ever"

FILE

8th March 2021

Haloperidol is a potent antipsychotic administered to women during labour, together with *Dolantina*; it is an obsolete and dangerous practice with no scientific evidence backing it whatsoever. Although it is said to be given as an antiemetic, in reality it is used as a sedative. This only occurs in Spain. It can be considered as a form of **chemical submission**. The Association *El Parto es Nuestro* (ChildBirth is Ours) launches this campaign for the 8th March 2021 with the aim to eradicate said practice.

Haloperidol during childbirth, never ever!

Summary

Haloperidol is a neuroleptic or antipsychotic drug which is sometimes injected in patients with a case of psychomotor agitation during acute manic episodes, acute episodes of psychosis or cocaine intoxication. It is a great sedative or tranquilizer, a powerful "**chemical straightjacket**". Whether you believe it or not, in our country **women in labour** are administered an injection of haloperidol.

Thousands of women, the exact number being impossible to calculate, have been administered a **combination of two powerful psychoactive drugs**: pethidine or meperidine, usually known by its commercial name, **Dolantina**, and **haloperidol**. Both drugs are usually administered together in an (intramuscular or subcutaneous) injection and are usually described as a "**cocktail**", "mix", "downer", "lithic mix", "half and half", or sedation.

Dolantina is an opioid approved for the treatment of **labour contraction pains**. Nonetheless, why is haloperidol administered? The official "excuse" is that it is administered to **treat or prevent the nausea caused by Dolantina**, thus used **as an antiemetic**. Is this true? When we revise the history of this practice we discover that the original incorporation of haloperidol (or other neuroleptic drugs) in the cocktail was not to treat the nausea as is currently being implied but instead to keep women still during labour. So the **advantage of giving neuroleptics during labour was the sedation and chemical submission** that these produced on the women. This then allowed for other interventions to be carried out on women during childbirth without their consent and/or knowledge. The truth is that haloperidol associated to *Dolantina* is used as a chemical restraint and there is no scientific evidence whatsoever to support its use.

Nowadays **only women in Spain are administered haloperidol during labour**¹. The Association *El Parto es Nuestro* (Childbirth is Ours) <u>has been denouncing this practice for years now.</u> However we continue to verify, with great concern, that this famous "cocktail", also known as "mix", "half and half" (in reference to the fact it is half a vial of haloperidol and half a vial of *Dolantina*) or simply "sedation", **can still be found in the Guidelines** for Normal Childbirth in many state hospitals in Madrid, such as *12 de Octubre* and *Gregorio Marañón* as well as in the Training Programme for Midwives. Therefore, it continues to be taught as though it were a good thing to use.

We have been gathering testimonies of mothers who **felt drugged or absolutely knocked out**, having lost complete control over themselves after receiving a "painkiller" at the beginning of their labours. In some cases the consequences have been devastating.

Some women knew that they had been given Dolantina to alleviate the pain of the contractions, but they were unaware of the fact that it was administered together with haloperidol. This data does not usually appear in the discharge report. In the majority of the cases that we have studied the women were told they would be injected a

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¹ In the UK it is very rare for Stemetil (prochlorperazine) to be administered together with *Dolantina*; it is another antipsychotic drug with a higher antiemetic result but with a very similar sedative effect.

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"painkiller" or that they would be given "sedation" without any reference to haloperidol being added to that treatment.

The administration during labour of a sedative psychoactive drug such as haloperidol, without an informed consent nor medical justification, can be considered a **form of chemical submission**, understood as the administration of psychoactive substances without someone's knowledge (*administración de sustancias psicoactivas a una persona sin su conocimiento*, Cruz-Landeira, Quintela-Jorge, & López-Rivadulla, 2008).

Although, in this case, clearly there is not a criminal purpose, the administration during labour of haloperidol without consent would fall under the assumption of chemical submission carried out on the elderly and minors with the sole aim to obtain good behaviour and/or enable care giving. Its use nowadays cannot be justified by any means even when professionals who use it defend themselves by saying that they did not know it had not been approved as an antiemetic and thus had no intention of sedating or harming the women in labour. It is a severe form of obstetric violence.

The professionals involved in childbirth assistance have the obligation to know the pharmaceutical drugs that they are offering to women, and above all else, to always respect their informed consent. No consent whatsoever is possible when a woman is not even told the name of the drugs that are going to be administered.

Los profesionales de la atención al parto tienen la obligación de conocer los fármacos que proponen a las mujeres, y por encima de todo, de respetar siempre su consentimiento informado. No existe consentimiento cuando posible cuando ni siquiera se informa a la mujer del nombre de los fármacos que se le va a administrar.

The Association Childbirth is Ours launches this campaign aimed to eradicate the use of haloperidol during labour, as well as any other pharmaceutical drug without informed consent.

We expect the Spanish Medication Agency, Ministry of Health, Spanish Society of Obstetrics and Gynaecology (*SEGO*), Federation of Spanish Midwifery Associations (*FAME*) and Spanish Association of Midwifery (*Asociación Española de Matronas*) to take the necessary actions to warn, eradicate and forbid the administration of haloperidol during labour.



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BIBLIOGRAFIA

Cruz-Landeira, A., Quintela-Jorge, O., & López-Rivadulla, M. (2008).

Sumisión química: Epidemiología y claves para su diagnóstico.

Medicina Clínica, 131(20), 783-789. doi:10.1016/S0025-

7753(08)75505-2