



Photo Credit Renee Jael+ Co

Hello my name is Niah Willis and this is my pregnancy journey. I have had multiple health issues since October 2018 which led me to be put on bedrest early on in my pregnancy. However, this is not where my journey began. From 2017 to 2018 I had a silent battle with infertility, I was told by one doctor that my options would only be surrogacy or adoption but by God's grace and the support of the wonderful reproductive specialist, my husband and I became pregnant after our first IVF trial. Little did we know; this was just the beginning of trials we would face to bring our miracle son into the world. After going in and out



(Top: 24 weeks gestation, this ended up being the last pregnancy timeline picture I took, since the rest of my pregnancy was spent in the hospital.)

of the hospital from October 2018 to January 2019 for various medical reasons including Gestational Hypertension my doctors decided to

keep me until delivery, which was supposed to be March 9, 2019. I was a high-risk pregnancy, because of a shortened cervix, gestational hypertension and adhesive disorder. I was followed by several specialist, including maternal fetal specialist. I did my due diligence to go to all of my appointments, even if it meant taking an uber or getting a ride from a friend, since I was unable to drive myself. My doctors put together a specific birthing plan in which I would go down regularly for ultrasounds to make sure my son was doing well, and progressing as expected with the understanding that we would plan to induce around 37 weeks.

After weeks of being in the hospital, the doctors came to me and said they felt it would be best if I was transferred via ambulance to the main hospital because they would be more equipped with not only staff but resources for my delivery. I was a little hesitant due to the increase in patient load at the main hospital, compared to the satellite hospital in which I desired to deliver at. Not only did they have low patient volume to staff ratios verses going to the very busy main hospital, I previous experienced much better care here throughout my various visit during my pregnancy, which I had expressed to my primary OB doctor and was my rational for only wanting to deliver there. After further discussing it with my husband, we agreed to do what the doctors felt would be best not only for our son, but myself. After a short period of being at the main hospital, the doctors opted to induce me for a vaginal delivery before reaching 37 weeks; the induction failed. Even though I am a nurse, I was not very familiar with the obstetrics aspect of the medical field, hence I was not sure whether my induction failed due to it falling out in the middle of the night. After getting up with the staff to go to the bathroom, the doctors decided it would be best to begin prepping the OR for an emergency c-section, since my son was not having as many accelerations on the monitor. As an epidural was started during my induction process but before taking me to the OR (Operating Room) they checked it and realized that the tubing had not been connected all the way so it was leaking, but they had to get me to the OR. There were two doctors that performed my C-section. In a normal procedure and an epidural, you would not feel much except perhaps pressure but as I reached over, I informed my husband that I felt the scalpel cutting through my stomach as tears rolled down my face. I said "please, I don't think I am supposed to be feeling all of this", looked back to

the person in charge of my anesthesia and asked is there anything you can as I can feel everything. He said I needed to wait till my son was out, so I just started to pray. I read a book called Supernatural Childbirth during my pregnancy that talked about how pain only got worse with fear. At 5 weeks early, I delivered my son Michael Jr. 2/7/19 at 10:01 am. He was taken to the NICU because he was so drowsy. My husband ended up doing chest to chest with him.



(Top: 2/7/19 at 10:01 am, Mike and I welcomed Michael Jr into the world)

For continued monitoring, I was taken first back to an L&D room to be monitored then to High Risk Prenatal and stayed until 2/15/19. I expressed something was not right during my time there and despite being seen by many of my same specialist, there was not exact conclusion made on why my white blood cell levels, heart rate and blood pressure were going up and down, as well as weight loss, except that I must just have an infection and should go away with the antibiotics. My blood pressure was elevated (I did have Gestational Hypertension but this was expected to resolve), at times the levels were dangerously high. Eventually I was diagnosed with inappropriate sinus tachycardia, because my heart rate would shoot up when I was doing non-strenuous activity, as high as 150 beats per min. I did not have an appetite and I was spiking fevers every other night, making it hard to make it back and forth to the NICU. At times I was so weak that I would have to be taken up via wheelchair by my nurse or tech, it wasn't until that later part of my stay that I attempted to make it up without a wheelchair because I was encouraged to walk more since that was a part of what is encouraged after a C-section. By this point I started to look sickly from everything going on and the weight



(Top: Michael Jr. from the NICU to present day)

loss, my pre pregnancy weight was 160lbs and after I delivered, I was around 124lbs. Because of my heart rate and fevers, I was unable to visit my son often in the NICU, so my husband spent a lot of time with him. He would share with me pictures or videos. One day my C-section wounds opened up on the left side when I was in the bathroom, it was almost like it exploded off from some kind of pressure built up, so I pulled the call bell string to get my nurse. The nurse came to look at it and she helped me back to bed and asked me to stay in the bed till the doctor came. Well several hours later when the doctor arrived, they determined it was nothing to worry about and just repacked the small wound with gauze. When I was discharged home that Friday night, they sent me home on antibiotics three times a day, because I still had some type of infection. They also prescribed home health to manage my wound.

When my home health nurse came the next day, Saturday night, she said this was not what she had expected to see. Earlier that day my husband and I changed my dressing several times because I was having so much drainage. What was coming out just didn't make sense. The odor was so potent that my husband was sick from the smell and he is not the kind of guy to have a weak stomach at all. He doesn't have a weak stomach. My home health nurse packed the wound with gauze dressing that night and hours later it was saturated and had to be changed. Sunday we were in and out of the bathroom with drainage and dressing change continuously. I

contacted my home health nurse and explained something was not right. I was sweating, my heart rate was high and the output was increasing from my wound. My nurse advised me to call my doctor or go to urgent care. She wouldn't be able to come back because this was not what she anticipated for her case. I tried to contact urgent care but they were all closed. So, I called my OB doctor on call and she assured me this was normal with C-section wounds but to come in Monday morning. That night my husband was in the NICU seeing our son and I called my parents and said mom, dad, I feel like I am dying. My mom flew down from VA to GA that night and the next morning we were at the OB. As I lay on the table the doctor said "Oh my gosh, do you know what this is coming out of you." I said "doctor I believe it is stool?" As a nurse I felt this was more than just wound drainage. He said "it is and that he was so sorry he wouldn't have discharged me Friday if he saw this, but I did call my nurse Friday and a doctor did come. However, it was all written off as normal C-section stuff and hormones causing me to sweat and that I just needed to eat more for energy and weight gain. In fact, come Monday morning the doctor was rushing me off to the ER saying I was leaking stool and calling a surgeon to meet me there.

Despite my medical history and the importance of having a vaginal delivery or at least have a Gastroenterologist surgeon in the OR if I had a C-section as a part of my birthing plan,



(Top: Michael Jr. and I about a week after my emergency bowel surgery)

these things were overlooked. A week or more after having my son, it was not only my instinct but skill of being a nurse that I feel saved my life. I had a perforated bowel that was missed after my C-section, causing me to become very ill and require urgent bowel surgery. At that point the



(Top: My T-incision to attempt to repair my bowel complication post C-section)

surgeons were not sure it was going to be successful and they even marked me for having the possible need for an ostomy. Now months later after that procedure, I'm still not healthy and I hit a downhill spiral. I am working hard to get better but I have not been 100% well since last year. It has been an uphill battle to recovery since I had my emergency C-section on 2/7/19 which left me with serious internal injury left untreated. Since then, I have had 3 more surgeries. I had to relocate so that my mother could continue to provide care at home in Virginia. Still, I was not healing and I knew something was wrong. There was the drastic weight loss that many people immediately noticed, and the in and out of the hospital. I reached out to my surgeon twice, once to ask for antibiotics because I believed my wound was infected and once to ask for a wound care specialist referral because I just was not healing. I was advised that it was just going to be a slow healing process and that I was not a good candidate for another surgery unless it was absolutely necessary. He said it was best that the body heal itself. I got connected with a great wound care team and they started to put a plan in place. The plan did include having another surgery, since my CT scan showed a pocket of infection, which was not ideal for my health or wound healing.

I went in on June 7th for my third surgery to clean out my wound infection and from there it was just one thing after another. The prognosis was still pending, until now, on how long I would continue to need more repair surgeries and when I would be back to myself again. Now I have a



(Top: Michael Jr., Mike and I video chatting during my admission to the hospital in June for Irrigation and debridement of my C-section wound)

son, who often was not being able to be with his mother, since I had been in and out of the hospital with complications and my family. No matter what happens I am not giving up because I desire to one day again be a wife to my husband and a mother to my son that is not limited by my medical condition which does not allow me to provide basic maternal bonding such as carrying him or breastfeeding, due to restrictions. I am not giving up because I have already come this far and I know that it is not just about my life anymore, but about the life of women that are going through this or the mothers that maybe did not make it or the children now growing up in single family homes due to overlooked complications during or after pregnancy. I am never going to stop fighting for my life. I hope that my story can bring awareness to C-section complications, the importance of advocating for your health, and most importantly to encourage you as a mother to not give up. God bless and best wishes on your pregnancy journey.

fistula, which is a hole in my small intestines that leads out to the surface and an ostomy pouch. I haven't eating anything by mouth since early June. All I want is to be able to be a mother to my son and wife to my husband again. All this from a C-section, which based on my knowledge does have a risk of complications, but what happens if those complications are not recognized and what if you are not a nurse and you didn't make that phone call because you felt like you were so sick you could die. My doctor in Virginia said, in any other country with just one of the infections I had I'd be dead, I've been been fighting for my life since February. I now have home health, physical therapy, home infusions nurses weekly, and more appointments than I can count. I have TPN (intravenous nutrition feeding 15 hours a day) and IV fluids the rest of the day, nutritionally living off of IVs only and nothing by mouth since early June. Truly I would have been in a skilled nursing facility but because I have a new baby my doctors, case management, and my family worked out everything to create a home nursing facility in my parent's basement. It is partially because I am a nurse that they believed it would be possible to manage the complexities of my health case at home and genuine remorse for how much my health has already impacted my