## PREGNANCY & TCM - PART 3

On line course provided by



Acupro Taught by Clara Cohen







## **PREGNANCY & TCM**

### **Assisting Pregnancy**

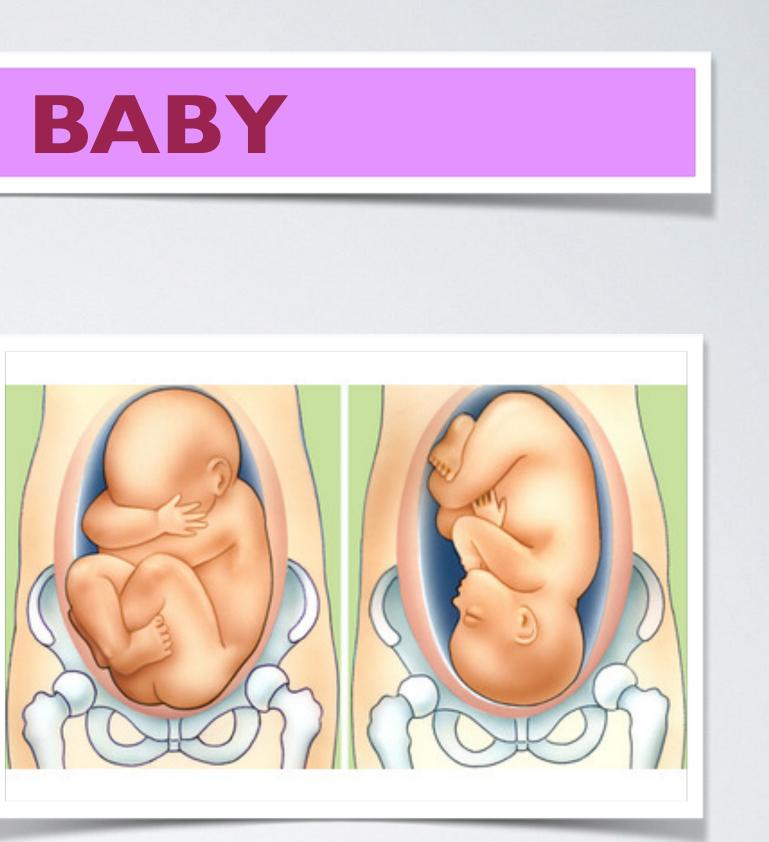
• BREECH BABY • CERVICAL RIPENING • LABOUR & BIRTH



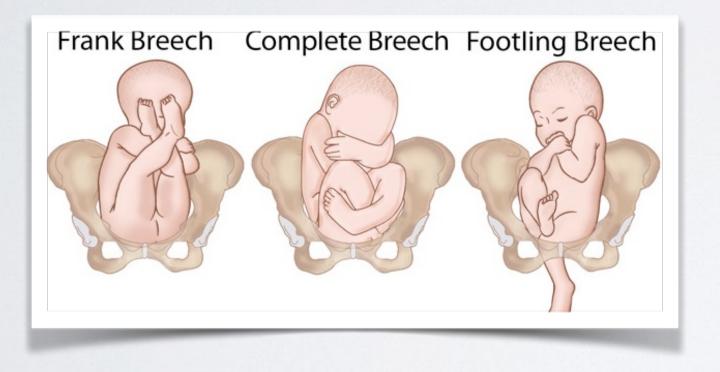


## **BREECH BABY**

**Definition:** the baby is facing the wrong direction for vaginal birth, which may end up in a C-Section.



# BREECH BABY



- A frank breech (otherwise known as an the most common type of breech. the baby appears as though it is sitting crossed-legged with its legs bent at the hips and knees.
- •A footling breech is when one or both of prematurely or before their due date.

extended breech) is where the baby's legs are up next to its abdomen, with its knees straight and its feet next to its ears. This is

•A complete breech (flexed) breech is when

the baby's feet are born first instead of the pelvis. This is more common in babies born

## **BREECH BABY**

#### **Treatment Options**

- External Cephalic Version: the doctor manipulate the baby manually, it can be painful & only has 50% success rate.
- Chiropractic care: to help loosen ligaments & make more room for the baby to naturally turn.
- Acupuncture & Moxibustion: safe, non invasive. 75% success rate in European studies



## **BREECH BABY**

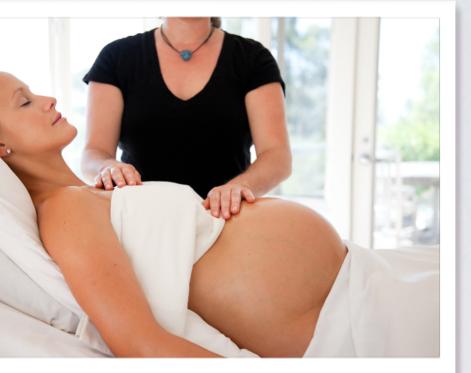
### **TCM Protocol**

- Moxibustion on BL 67 for 15 min each day for up to 5 days. If the baby hasn't turned, wait 3 to 5 days, then repeat for 5 more days.
- To be applied from week 32 to 36/37 of pregnancy.
- Demonstrate and send patient home with a moxa stick, instruction and a video.



**Definition:** As the end of pregnancy nears, the cervix normally becomes soft (ripe) and begins to open (dilate) and thin (efface), preparing for the birth. Baby also starts to move further into the pelvis and into position. The better the baby's position and the more effaced the cervix is when the woman goes into labour, the faster and easier the labour tends to be. A ripe cervix facilitates a better birth, reduces the need for pain medication and lowers the risk of needing a caesarean section.





## **Reasons for Medical Induction**

- Pregnancy has gone 1 to 2 weeks past the estimated due date.
- The woman has a condition (such as High blood pressure, preeclampsia, diabetes) that may threaten her health or the health of her baby if the pregnancy continues.
- The woman's water (amniotic sac) has broken but active labour contractions have not started.
- The baby has a condition that needs treatment, and the risks of vaginal delivery are low. Induction and vaginal delivery are not attempted if the baby may be harmed or is in immediate danger. In such cases, a caesarean delivery (Csection) is usually done.

### **Methods of Medical Induction**

- Medicine may be used to soften the cervix and help it thin (efface). Usually **Oxytocin**.
- A balloon **catheter** may be used to help the cervix open.
- If the cervix is soft and slightly open, sweeping the membranes or rupturing the amniotic sac may start or increase contractions.





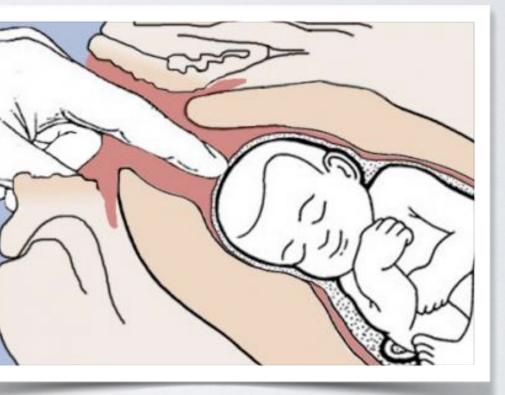
## **Method of Medical Induction**

A membrane sweep often helps to both ripen the cervix and to stimulate labour and is now offered routinely to women between 38 weeks to 41 weeks.

The membranes that surround the baby are gently separated from the cervix. A midwife or doctor can carry out this procedure during an internal examination. The woman may be offered two or three membrane sweeps before moving onto other methods of induction.

This is the **best medical option** without major risk of complications.





#### Controversy

A clinical study in New Zealand (Betts & Lennox, 2006) showed that giving women pre-birth acupuncture resulted in:

- 35% reduction in medical inductions (43% reduction in women having their first baby)
- 31% reduction in the epidurals
- 32% reduction in emergency caesarean
- 9 % increase in normal vaginal births

### **TCM Protocols For Cervical Ripening**

# To ripen or not to ripen?

#### **Practitioner's role**

- Softening the cervix in preparation for labour.
- Being sure the baby's head is down and not breech, before starting the protocol.
- Not inducing a patient at week 40, if the cervix is not softened.

Taking 4 weeks to ripen the cervix makes it a slow and easy process for the future mother and can make childbirth a little easier.

#### **TCM Protocols For Cervical Ripening**

#### **TCM Protocols For Cervical Ripening**

- Week 36 & 37: St 36, Sp 6, Lv 3, Gb 34, Lu 7 (R), Kd 6 (L), Du 20. Ear points: Shen Men, Endocrine, Uterus (2 session/week).
- Week 38: Add BL 60 (2 session/week).
- Week 39: Add Li 4 (L), Kd 3 (R). Electro-acupuncture for 20 min on Sp 6 & Gb 34. (2/week).
- Week 40: Induction phase. Add Gb 21. Electro-Acupuncture for 25 min on Sp 6 & Gb 34 (2/week).
- Week 40 & onward: add quick 30 second to 1 min stimulation on BL 32

#### **TCM Protocols For Cervical Ripening**





It is NOT recommend to induce a patient at week 40 or past week 40 if the cervix is closed and there was no cervical ripening prior to.

#### **TCM Protocols For Cervical Ripening**

### Recommendations

### Red Raspberry Leaf Tea



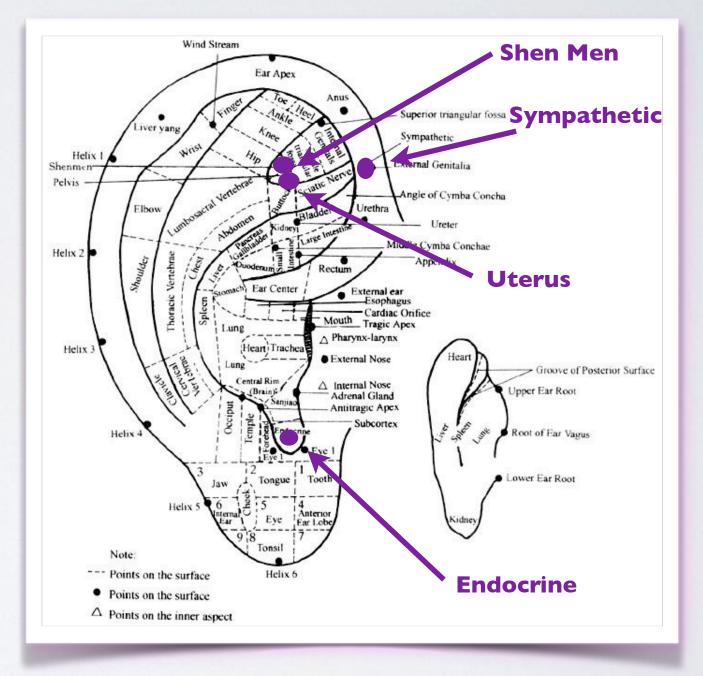




## **Evening Primrose Oil**

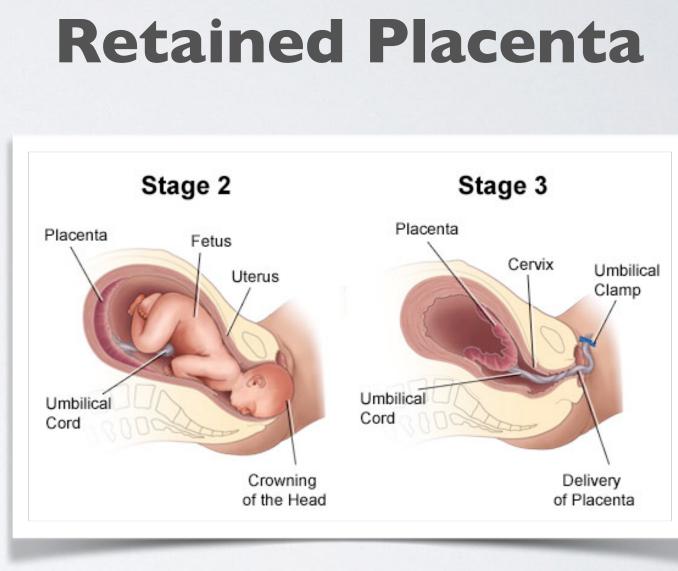
### **ACUPUNCTURE SUPPORT DURING LABOUR**

- Ear Acupuncture during contractions: Shen Men, Endocrine, Sympathetic & Uterus
- Strong Contractions: add e-stim to Shen Men & Sympathetic
- In between contractions: massage the lower back and quick stimulation of B1 32, while leaving Li 4 inserted for 10 min



### **ACUPUNCTURE SUPPORT DURING LABOUR**

The Placenta usually come out just a few minute after the baby, but if it hasn't been expelled after 20 minutes it is considered retained. Tx: Li 4, Lv 3, Sp 6, Gb 21, Sp 8, Bl 60.



### **ACUPUNCTURE SUPPORT DURING LABOUR**

## **Placenta Consumption - TCM Tradition**

- Traditionally, cooking the placenta into a soup, is part of the ritual of a family after a new birth.
- Placenta Encapsulation: steamed, dehydrated, ground, and placed into capsules. To be taken by the mother after birth for faster healing & recovery. It nourishes blood & KD Essence.

- Increase stress-reducing hormone

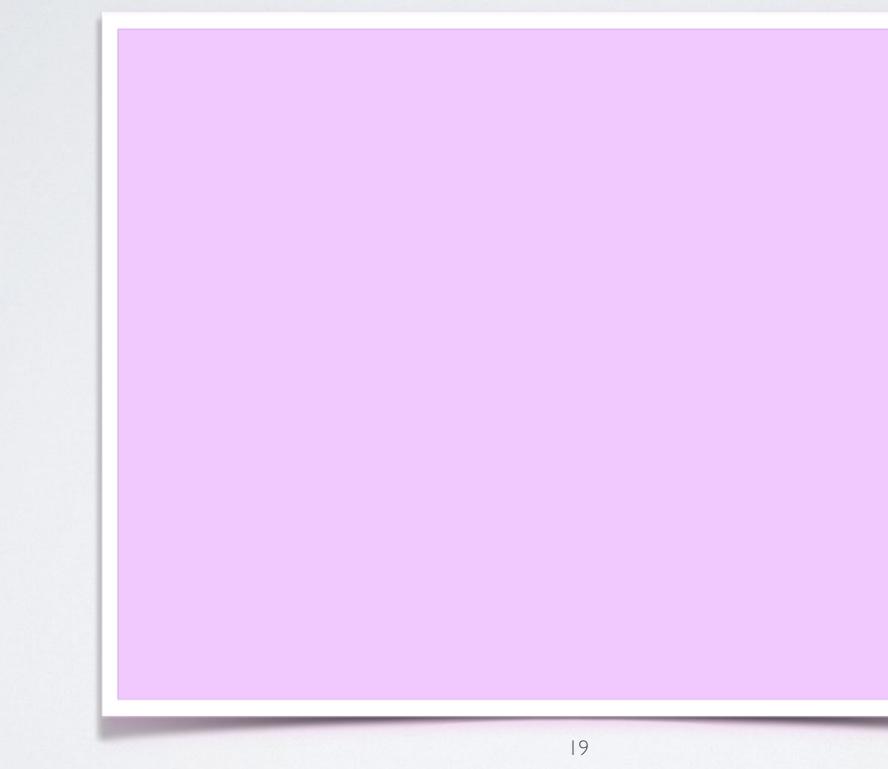
- Increase in **milk production**

• Increased release of the hormone oxytocin, which helps the uterus return to normal size and encourages bonding with the infant

• Decrease in post-partum depression levels

• Restoration of iron levels in the blood









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