

## **Acupuncture in the third trimester of pregnancy, labour preparation and the postnatal period**

So far, I have looked at the use of acupuncture for enhancing fertility and for helping with first and second trimester discomforts. In this article, I'll look at the role acupuncture has to play within the final trimester, labour preparation and the postnatal period.

In this last trimester it is normal that women will feel more tired as not only are they physically carrying more weight around, but getting a good night's sleep can become more elusive due to the usual difficulties: finding a comfortable position, possibly having leg cramps and having a much reduced bladder capacity. In addition to this, many women continue working late into their pregnancy and therefore do not get the relaxation and rest they need to prepare them for childbirth. As discussed in my previous article, acupuncture can certainly help with back aches, cramps, heartburn, calming the mind and helping to promote relaxation, although unfortunately it cannot help with the reduced bladder capacity!

The position of your baby in the pelvis will be discussed by your midwife; normally, s/he will move into a head-down position between weeks 34 to 36; however, if the baby is in a breech position (bottom-down) at 34 weeks, a specific treatment known as moxibustion can be offered as a viable alternative to an External Cephalic Version. The procedure involves applying heat to an acupuncture point on the little toe by means of a moxa stick (a cigar-shaped tube of compressed herbs lit at one end to give off heat). This treatment stimulates the baby's movements, and at 34 weeks, the baby should still have room to turn. Several studies have indicated the success and safety of this technique; a systematic review looking at 6 randomised controlled trials with a total of 1,087 pregnant women found that the rate of babies turning head down among the moxibustion group was 72.5% versus 53.2% in the control group (observation or postural methods)<sup>1</sup>. I normally see a lady with her partner in order to perform the initial session, and teach the partner how to continue the treatment at home for a set period of days.

Many of the pregnant ladies I treat in my practice have come to me for acupuncture support whilst trying to conceive, and the continuation of treatment into their pregnancy is seen as 'the norm' for them, although sessions are generally less frequent. I will have already advised them to come back for regular treatment at the 36/37 week stage, in order that we start to prepare them and their baby for the birth, but even if you haven't had acupuncture previously, benefit can still be gained from these late pregnancy sessions known as 'pre-birth' acupuncture. This series of 3 or 4 weekly acupuncture treatments are designed to encourage softening of the cervix and the relaxation and softening of pelvic ligaments, as well as encouraging baby to move into the optimal position for birth. One study indicated that the labour time of 70 women given pre-birth acupuncture from 37 weeks, was reduced from a mean of 8 hours, 2 minutes (control group of 70 women) to a mean of 6 hours, 36 minutes. Cervical dilation was also quicker in the acupuncture group<sup>2</sup>. Similarly, an observational study carried out in New Zealand of 169 women over 4 months indicated that those receiving pre-birth acupuncture consistently experienced shorter labours with less medical intervention – compared to the local regional rate, there was a 43% reduction for first time mothers

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<sup>1</sup> Vas J et al. Correction of non-vertex presentation with moxibustion: a systematic review and meta-analysis. *Am J Obstet Gynecol* 2009;201:241-59

<sup>2</sup> Kubista E, Kucera H *Geburtshilfe Perinatol* 1974; 178 224-9

<sup>3</sup> Betts D, Lenox S Acupuncture for pre-birth treatment: An observational study of its use in midwifery practice. *Medical Acupuncture* 2006;17:3

needing an induction, and a 31% reduction in the epidural rate<sup>3</sup>. I believe these studies show clear physiological benefits to be gained from acupuncture at this stage of pregnancy, but there are also emotional advantages too as we chat through and plan strategies for any fears and anxieties that might be present, such as previous birth experience or worries about managing potential well-meaning but intrusive family visitors!

These sessions are also the ideal time for me to teach mum-to-be and partner/husband several acupressure points which may be used at home from the due date onwards to encourage spontaneous labour, and throughout the labour. For some ladies, just having the pre-birth series of treatments is enough to stimulate natural labour on or close to their due date, but others may require a little extra encouragement to help get labour going and these points, which can be worked on at home, can be very valuable.

The points are easily learnt, and are the same for both getting labour going initially, keeping contractions stimulated effectively throughout labour and helping with pain relief. I usually encourage dad-to-be or birthing partner to come along to one of the standard acupuncture treatment appointments to have a hands-on teaching session; this is an ideal way for dads to get involved and actively be able to help, as men often complain that they feel they are a helpless observer of the birthing process. Sometimes I will mark on the skin the points to be pressed so that, once home, it is easier to practice and be sure of accuracy whilst referring to the leaflet that I will give. I may also teach an additional point or two specific to the individual lady if I feel it is necessary to help things along. Unfortunately, there is the occasional lady who despite acupuncture/acupressure will still require a medical induction, but even in this scenario, the use of these points can work alongside the medication supportively and effectively.

The feedback I have had from couples who have used these points both to help encourage labour and during labour has been very positive:

From a VBAC patient having her second baby "Within a few hours of being admitted I was contracting regularly and managed to labour/deliver without any induction agents or pain relief other than gas and air. I cannot thank you enough ... for giving us some really good self-management options which we really used, especially during the early parts of labour. I was a particular fan of the lower back massage!"

From a patient having her first baby "The induction acupressure was a bit of a success! Within a few hours labour had begun ... nice straight forward water birth in the end too! We both felt the acupressure points were useful. The points on the back and sacrum were particularly good during the long phase of early labour while we were at home ... it was helpful to have as many coping strategies to hand as possible and to both be able to get involved. Thanks so much for your help."

From a patient having her 4<sup>th</sup> baby "I would like to thank you greatly as an hour after my treatment I went into labour and had my quickest birth and spontaneous labour with my fourth child."

Some of the same acupressure points used for labour can also be useful after delivery, for example, in promoting delivery of the placenta, helping to alleviate after-pains when the uterus is returning to its normal position and helping to get reluctant milk flow established.

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Postnatally, Chinese medicine acknowledges that new mothers are likely to be deficient in terms of their *qi* (energy) and blood due to the months of pregnancy and then the birthing process, sleep deprivation and adjustment to the emotional demands of motherhood. In the West we seem to have lost sight of the importance of the first weeks after birth being a time for retreating, nourishment and replenishment; Western society now assumes that women will bounce back quickly, be ready for visitors, update their social media pages with stories and photos and be straight back trying to regain their figures. In contrast, within societies such as India, China, Malaysia, Latin America the postpartum period is a time to cocoon the new mother treating her with warm oil massages and belly wraps, and special nourishing, warming foods, not only to promote healing but also to preserve her reproductive health for future pregnancies.

Four or five days after the birth, Chinese medicine will treat the new mum to a 'mother-warming' session in which a moxa stick (mentioned previously when I discussed breech position) is used to warm the abdomen and back over particular energy channels. This may be performed not only for those who have had a natural delivery, but also after a caesarean if there are no complications with the scar. This treatment may be repeated within a few days with the addition of acupuncture for helping to nourish blood and *qi*. Advice on foods to help the healing process such as warming congees, stews and soups and the avoidance of cold drinks and food, will also be given.

There may be some specific issues which arise postnatally such as night sweats, breast engorgement, lack of breast milk or mastitis, and although midwifery/health visitor advice should always be sought, acupuncture can offer effective supporting treatment. The emotional impact of being a new mother cannot be underestimated and it is not unusual for women to feel low in mood or anxious; again, acupuncture can provide gentle, effective supplementary treatment alongside mainstream remedies. One of the many advantages of seeing an acupuncturist that so many patients have commented on is having time and space to share: to have an hour which is completely dedicated to them, to talk through concerns and have a relaxing, therapeutic treatment is, according to them, worth its weight in gold.

I hope these articles have highlighted acupuncture treatment as a gentle, safe, drug-free alternative within pregnancy. It is always recommended that if you plan to have acupuncture, you mention it to your midwife and you visit a British Acupuncture Council registered practitioner (MBACC), preferably one who has post-graduate training in pregnancy acupuncture.