

Title: Acupressure Techniques for Use during Childbirth and Pregnancy

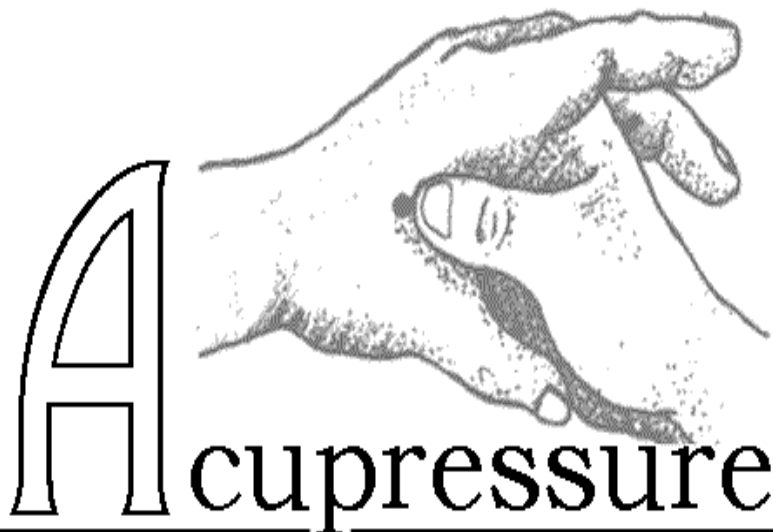
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Acupressure Techniques for Use during Childbirth and Pregnancy

by Debra Betts, NZRN, MBAA, NZRA

Illustrations by Tina Young

Natural pain relief techniques for childbirth using



Promoting a Natural Labour and Partner Involvement

Introduction

My initial intention in showing these points to couples was to provide them with a useful tool for labour. It wasn't until using them myself, with the birth of my second child, that I fully understood the feedback I had been receiving. They weren't just "useful", they were essential! When my partner was not using the points the contractions definitely intensified! During the birth of our first child, I was timing the contractions as lasting 15 seconds, while without acupressure, they were lasting a full minute. This effect continued until shortly before transition.

As an acupuncturist, I was surprised to find such a powerful effect using acupressure. (There are studies demonstrating the effect of acupuncture during labour but none that I know of for acupressure).

In traditional Chinese medicine terms, I see them as prompting the body to work more efficiently. From a medical model, they can be viewed as promoting the release of endorphins, blocking the pain receptors to the brain, dilating the cervix, and increasing the efficiency of the contractions.

What is important is that they are easy to use, can be used at the beginning of labour by the support people, and that there are consistent effects. From my own clinical follow up, 83% of people using them found them useful. Of

those people, 60% described them as “excellent”, “brilliant” and “amazing”.

This booklet outlines eight points and details their use in a “hands on” approach. They are labeled as acupuncture points – the letters indicate the name of the meridian, and the number corresponds to the position on that meridian. Extra points have been labeled according to the body part.

In Traditional Chinese Medicine, meridians are a series of channels that carry chi (energy) through the body. These meridians are a separate system from nerves, blood vessels and lymphatic ducts. They contain over 600 points. It is through restoring and balancing the body’s energy that changes can be made to the way the body functions.

There are points labeled “Forbidden to use during pregnancy”. These are points that can be used to induce labour. Due to this effect they should not be used with any strong pressure during pregnancy. It is possible to practice locating these points prior to labour.

How much practice is needed I leave up to the individuals to decide. I would suggest that the support people need to feel comfortable locating the points on the woman’s body, remembering that the points will often feel quiet different for the woman during labour.

As these points are easy to use, empower women during labour, and encourage close partner involvement, it is my hope that they will be made available to all interested couples as part of their antenatal education.

Using Acupressure

These points are not to be used with gritted teeth! Prior to labour they may feel strange or uncomfortable while practicing the location, however they should feel useful to you when you are using them during labour. Setting up a pain relieving effect, a sense of well-being, or a feeling of control that wears off when your support people stop using points. When using them correctly, there should be a distinct feeling around or at the site of pressure. This may be felt as either a numbness, warmth, tingling, aching or buzzing sensation. If they feel uncomfortable or painful try repositioning or select another point. These points are a selection of acupuncture points, different points will suit different people, and there are different points for the changing stages of labour.

Apart from the section labeled “When labour does not go as planned” there are no right times for using certain points. The right points to be using are those that you feel to be effective. It is important to try them all to find the points that best suit you.

These points appear to be of greater benefit if commenced at the onset of labour, rather than waiting until there is strong pain. From the feedback I receive, it appears using them early is important. As women report not only a reduction in the level of their pain but also a sense of well being, (that they are coping well, feel calm and relaxed), that disappears when their support people discontinue the acupressure.

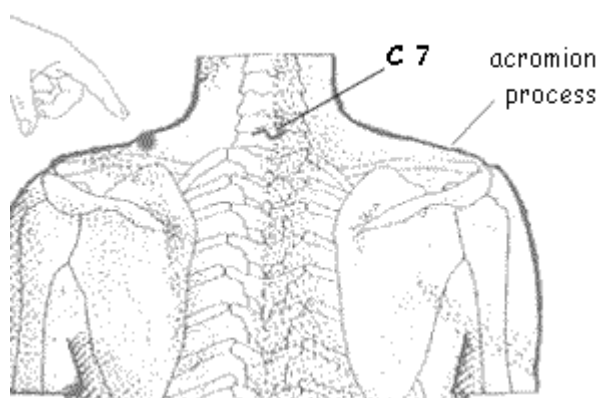
You can use any of these points at any time during labour. They are a tool that can be used in conjunction with any other therapies you would like to try. When using a Tens machine, I recommend you try using the pressure points first. People have commented that they prefer them, and they have the advantage of being portable – there is no reason why your support people

cannot be in contorted positions while you enjoy the benefits of a bath or the water pool!

My aim has been to provide an easy to understand layout for locating the points. For the majority of people, these points will be simple to locate, however due to the diversity of the human body, and the changes that occur during pregnancy, I strongly recommend that you check out location with your midwife, doctor, or acupuncturist who will be able to show you in more detail if necessary.

As an acupuncturist, I cannot resist adding that there exists a wide range of treatments to aid and prepare a woman's body through pregnancy, labour, and post-nataly. I would recommend that you locate an acupuncturist that has completed a course that involves a minimum of three years of training.

I welcome any feedback you may have concerning the use of the points and the layout of this booklet.



GB 21

Point Location

When you draw an imaginary curved line between the bony prominence of the neck (C7), and the top of the shoulder joint (the Acromion Process) the point lies midway along this

curved line, at the highest point of the shoulder muscle. It will feel tender with a numbing, buzzing or warming sensation (this sensation varies with individuals). The sensation is stronger on this point than any other points along this line. You can find this point on yourself by bringing your hand diagonally across your chest and palpating with your index finger along this "imaginary line".

This point will always be on this line with "C7". C7 is usually the first prominent bone you see on the back of the neck, when you tilt the face towards the ground. If there appear to be two prominent bones, place a finger on each bone and ask your partner to slowly turn their head from side to side. C7 will move slightly as the head is turned.

This point has a descending action to aid the first and second stages of labour, and can stimulate uterine contractions. This is an excellent point to use when breastfeeding, it relaxes the shoulder and promotes milk supply.

It is forbidden to use during pregnancy

Acupressure Technique

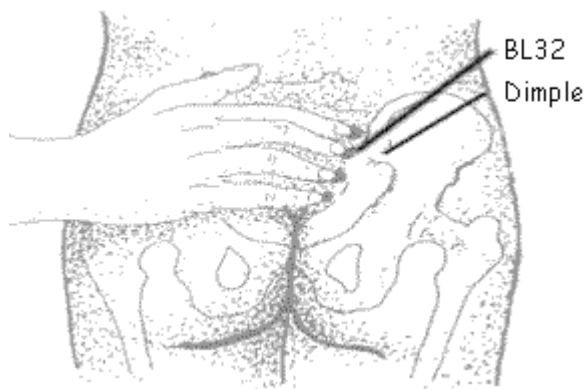
It is important not to just rub the skin over the area but to apply firm downwards pressure with your thumb, knuckle or elbow.

When using your thumbs, the pressure needs to come from your arm rather than the thumb joint, otherwise the support person will end up with sore thumbs. I heard of one partner who actually resorted to using the ends

of two wooden spoons!

The points are usually used with the support person applying pressure on both shoulders together, but I know of women who have successfully used this on themselves using only one shoulder at a time.

The pressure can be applied at the beginning of each contraction or continual gentle pressure can be applied that is intensified during contractions.



BI 32

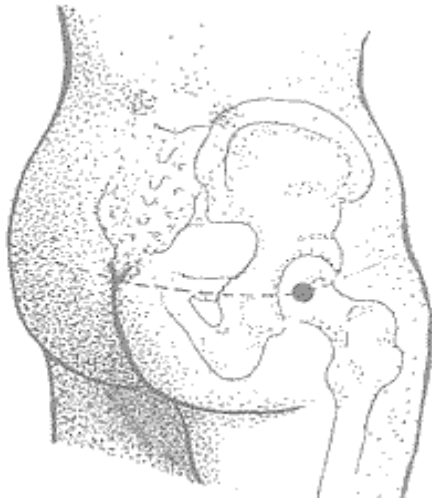
Point location

This point lies midway between the dimples above the buttocks and the spine. (Note - BL 32 is not the dimple!). If you cannot see the dimples clearly, it is approximately one of the

woman's index finger lengths above the top of the buttock crease, one thumb width either side of the spine. When you place your finger on BL 32 you can feel the small depression of the Sacral Foramen where the point lies. As labour begins you can start here and as the labour progresses move down the spine (approximately one thumb width at a time, moving slightly closer to the spine until as you arrive at the top of the buttock crease, your knuckles will be touching). The timing of this movement downwards will depend on the woman who will usually instinctually tell the support person to move lower as the baby moves during the labour.

Acupressure Technique

- The support person places their knuckles into the points and applies firm pressure. This can be increased by the woman rocking backwards into the support person at the beginning of a contraction, obtaining maximum pressure.
- From feedback, these appear to be the most frequently used points. Producing a pleasant "anaesthetising" effect on the strength of the contractions, noticeably "wearing off" when pressure is stopped and building up again when recommenced.
- There is a distinct sensation produced when you are pressing into the Sacral Foramen. This may be felt as a numbness, warmth, tingling, aching or buzzing. If there is sharp pain, you are pressing on the surrounding bone.
- It is important to note that for some women the Sacral Foramen are not exactly in a straight line. Be guided by your partner's feedback!
- This is most frequently used with the woman leaning or kneeling against a wall, table, bed etc. It can also be effectively used in water, it just requires a little flexibility on behalf of the support people!



Buttock Point

Point Location

This point is in a direct horizontal line from the top of the buttock crease. If you press along this line there will be a tender point approximately two thirds of the distance between the buttock crease and the hip bone.

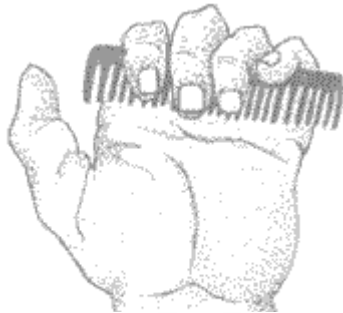
Acupressure Technique

- When you place your hands on the woman's hips you can push your thumbs into this point, helping the woman to move in rotating movements during contractions.
- This point can also be used during transition, especially when combined with massage strokes, beginning at BL 32 and radiating out to this point.

Labour Preparation

Two to three days prior to the due date, BL 32 and this buttock point can be used along with some sacral massage, utilizing strong downwards strokes to and around the buttocks. The aim of this is to help free up the pelvic energy to encourage an optimal labour.

Hand Points Location



These points lie along the creases of the hands where the fingers join the palm. These are said to help release endorphins (the body's natural painkillers) into the body.

Acupressure Technique

- Hold a small comb so that the teeth are touching the points. You can then grip the comb during contractions, applying the pressure that you feel is useful.
- Some women find these points very helpful, to others they are merely a distraction!



K1 Point Location

This point lies in the depression found on the top one third of the sole of the foot, when the foot is in planter flexion (pulling the toes towards the sole of the foot).

Acupressure Technique

Place strong pressure in this depression pushing inwards and upwards towards the big toe.

This point has a useful relaxing effect and can be used at any time during labour. It has been noted as being especially effective during the second stage of labour. (It is easily accessed if the woman is positioned on her knees.)

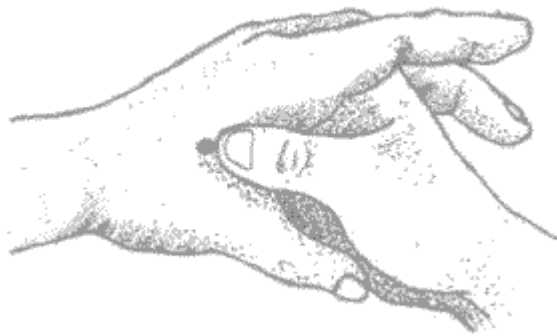
Also useful during labour where there are feelings of panic (for example, going into a labour with an unpleasant previous birth experience.)

A useful point to use to help the perineum relax during second stage.

There is a tendency for the support people to stand back during the second stage. Please try these points, they can be very useful.

LI 4

Point Location



This point is found between the first and second metacarpal bones (thumb and first finger) at the distal end of the crease on both hands.

Acupressure Technique

- Simply apply pressure with the thumb as shown in the diagram.
- This has the effect of intensifying contractions, useful if contractions are of irregular intensity
- This point can be used during the second stage of labour. It aids the body's efforts to move the baby down through the birth canal. It may be especially useful if the woman is tired and not pushing effectively.

This point is forbidden to use during pregnancy



When labour does not go as planned
Un-established Labour or failure to progress.

Sp 6



This is an important point to help the cervix dilate, and can be used when the cervix is not effectively dilating during labour.

Point Location

This point is located using four of the woman's finger widths above the tip of the medial malleolus, (the shin bone on the inside of the ankle). The point will be very tender and is found when you slide your finger off the edge of the tibia bone, towards the inside of the leg. It is useful on initially locating this point to press on the tibia; it produces a very different sensation from the point.

Acupressure Technique

- Direct pressure is applied with the index finger or thumb.
- I recommend using this point on one leg at a time for approximately one minute (count slowly to 60 !) then using it on the opposite leg 20 - 30 minutes later.
- This point will be very tender and after using it some women will feel their cervix stretching and contractions strengthening.
- I would not recommend using this point once labour is established. From my own experience, labour is not about how many hours a birth takes, but how you feel during the birth.

This point is forbidden to use during pregnancy.

Cervical Lip

This is when, although the woman wants to push, the cervix has not dilated enough. She will be told not to push by her Midwife or Doctor. If this becomes a problem during labour, apply strong pressure with your knuckles to BI 32.

Waters Breaking

If your waters have broken and labour is not progressing, you can use BI 32 and Sp 6 to help establish labour.

Inducing Labour

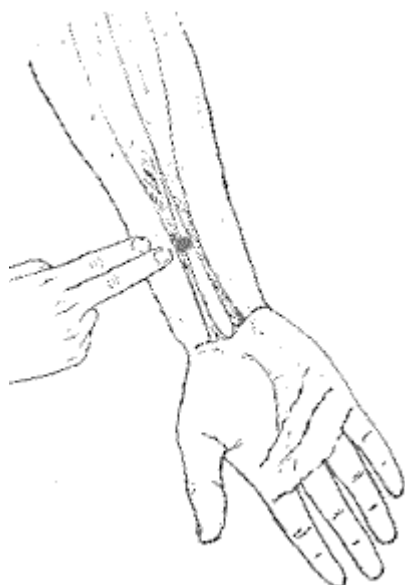
It is probably obvious that there are points included in this pamphlet that could be used to aid the induction of labour. I do not want to cover the specifics of these. If an induction is necessary I recommend an individual assessment by a qualified practitioner. If this is not possible I would be happy

to discuss some points with your Midwife or Doctor.

Nausea and Vomiting (P6)

Point Location

This point is three of the woman's finger widths above the transverse crease of the inner wrist. It lies directly between the two tendons felt here. (The tendons of palmaris longus and flexor carpi radialis.)



Acupressure Technique

This can be used for mild feelings of nausea through to vomiting. Place pressure on the point and hold until effective, usually within five minutes. You can use pressure on both wrists or only one, whatever is more practical at the time. It is possible to buy a wrist band to apply pressure to this point. They are available through chemists and are called "Sea Bands."

Alternately you can make your own. Form a wrist band with Elastic, and sew onto it a rounded button. Take care that when in place there is firm, but not uncomfortable pressure

exerted on the point.

It would be useful to have one of these bands with you during labour, just in case you need to wear it. When wearing it continue to apply pressure when it feels necessary.

Debra Betts is a New Zealand Registered Nurse with several years of Neonatal and Paediatric experience. She is a member of the British Acupuncture Association, having graduated from the British College of Acupuncture in 1989.

Upon returning to New Zealand, she has become a member of the New Zealand Register of Acupuncturists. She has combined her nursing background and Chinese Medical skills to conduct an acupuncture practice specialising in Fu-Ke (Women's Health Problems).

In 1995 she joined the teaching staff at the New Zealand School of Acupuncture and Traditional Chinese Medicine. Where she teaches the foundation subjects of traditional Chinese medicine and directs the Student Clinic.

Debra and her husband have three children. The youngest two were natural deliveries, using the techniques outlined in this booklet.

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