

## **Prenatal Massage During the First Trimester**

By Elaine Stillerman, LMT

Among some of the myths and old wives' tales surrounding prenatal massage is the misguided belief that massage should be avoided during the first trimester. It's fair to say that under the skilled hands of a certified prenatal practitioner, massage during the first trimester is not only safe, but can be especially supportive during the transitional first months.

One of the reasons many practitioners and spas refuse to massage first-trimester clients is the fear of causing a miscarriage.

Miscarriage is defined as a spontaneous loss of a pregnancy before the fetus is viable, which generally means before 20 weeks gestation. (An early spontaneous abortion occurs within the first 12 weeks; a late spontaneous abortion happens within weeks 12-20.) Almost 90 percent of miscarriages occur within the first eight weeks, so the reasoning concludes that if you avoid the massage, you will avoid the miscarriage.

Unfortunately, this logic is not based on science, but rather on litigious concerns.

Miscarriages occur very frequently, perhaps in as often as half of confirmed pregnancies, and most miscarriages can't be avoided. They rarely are caused by anything expectant women do or don't do. In nearly half of all known losses, the embryo was chromosomally abnormal and not viable or able to sustain life. Other possible risk factors include genital and reproductive structural abnormalities (retroversion of the uterus, bicornuate uterus, fibroid tumors, etc.), infections (chlamydia, rubella, listeria, ureaplasma, mycoplasma), maternal disease (diabetes, renal disease, thyroid conditions, nutritional deficiencies), ectopic pregnancies, hormonal imbalances, immunological rejection, maternal age (the older the *gravida*, the greater the risk of miscarriage), and environmental factors such as first- or second-hand smoke, excessive alcohol consumption, exposure to organic solvents, and excessive radiation. Massage is not a contributing factor in any of these physical or environmental circumstances, and is not causative in a miscarriage.

In early pregnancy, symptoms of a miscarriage include bleeding, abdominal pain or cramping, and lower back, thigh or pelvic pain. In late pregnancy, a miscarriage is accompanied by heavy bleeding, including the passage of blood clots and intense uterine contractions. If a client presents any of these symptoms, massage obviously is contraindicated.

The other explanation practitioners use to avoid first-trimester massage is the issue of morning sickness. Nearly 85 percent to 90 percent of pregnant women experience morning sickness and nausea in early pregnancy; for 10 percent of them, the problem persists beyond the first trimester. While it's clearly accepted that massage for anyone nauseous or vomiting is contraindicated, you can make appointments to massage your pregnant clients when they are not experiencing symptoms. These treatments effectively can reduce the severity of symptoms.

There are other suggestions you can make to your pregnant clients to reduce morning sickness. They should eat small but frequent meals throughout the day. Eating a protein-rich meal or snack before bed will reduce morning nausea. Protein takes a long time to digest, and they won't wake up with an empty, gnawing feeling in their stomachs. Cut up a fresh lemon into wedges and put the wedges in a plastic bag. They can inhale the lemon as needed. One drop of peppermint oil in honey water every hour helps some women. Other women find ginger tea, ginger ale and ginger candies very soothing. Drinking red raspberry-leaf tea or sucking on the pit of an *umeboshi* plum (found in health food stores or Oriental groceries) can settle the stomach. Stimulation of acupuncture point Pericardium 6 by wearing motion sickness "sea bands" or with digital stimulation is extremely effective in eradicating or minimizing nausea. This point is located on each forearm, 1 1/2 inches below the wrist, in the middle of the inner forearm.

Press for a count of 6-10 and repeat a total of 6-10 times.

Another concern regarding first-trimester massage includes avoidance of abdominal massage due to the fear of dislodging the placenta. This is another unfounded fear. It's strongly advised to ask the client's permission before massaging her abdomen at any stage of the pregnancy, and the abdominal massage always should be done with an open palm, light pressure and gentle effleurage following a clockwise direction, but the placenta is attached firmly to the uterus and appropriate massage will not damage or dislodge this strong attachment.

Properly trained prenatal massage practitioners can safely and effectively address first-trimester concerns. For those of you who work in establishments where first-trimester massage is avoided, liability is a major contributing factor to this decision. Since this business policy has been set by the management, you have to adhere to what management decrees. In private practice, however, you can base your decision on science and appropriate training, not fear or misconceptions.

### *Resources*

1. Enkin M, Keirse MJ, et al. *A Guide to Effective Care in Pregnancy and Childbirth*, 3<sup>rd</sup> ed. Oxford: Oxford University Press, 2000, pp 108-109.
  2. Feldman P, Covington SN. Facts about miscarriages and the grief it causes. *ICEA*, Minneapolis, MN, 1994.
  3. Fraser Diane, Cooper M (eds.) *Myles Textbook for Midwives*, 14<sup>th</sup> ed. Edinburgh: Churchill Livingstone, 2003, p. 279.
  4. Leifer G, *Maternity Nursing: An Introductory Text*. St. Louis: Saunders, 2005, p. 213.
  5. Lowdermilk DL, Perry SE. *Maternity and Women's Health Care*, 8<sup>th</sup> ed, St. Louis: Mosby, 2004, p. 1150.
  6. Sears W, Sears M. *The Pregnancy Book*. Boston: Little, Brown, 1997, p. 79.
  7. Simkin P, Whalley J, Keppler A. *Pregnancy, Childbirth and the Newborn*. New York: Meadowbrook Press, 1991, pp. 27-28.
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