BROCHURE
Prenatal, Antenatal and Postnatal Massage & Care
By
HEALTH AROMA

Introduction
Most pregnant women experience discomforts and added stresses in their bodies at various times during their pregnancy. This may be why more and more women are discovering the benefits of having pregnancy massage – prenatal, antenatal and postnatal!

In this leaflet we will be talking mostly about antenatal massage:
what it looks like
what to expect
what benefit massage will bring you
changes during your pregnancy
and how to enjoy being pregnant

What is prenatal massage (massage before pregnancy)?
This is massage therapy before pregnancy, when the woman is ready to become pregnant - this is a precious moment and massage takes a very important place. Aromatherapy, Reflexology, Acupuncture are proven methods for good relaxation and reaching maximum fitness before conceiving. All these different massage types are a brilliant compliment to Western Medicine methods of infertility treatment if the woman experiences difficulties of getting pregnant naturally.

What is antenatal massage (massage during pregnancy)?

• Massage during pregnancy that combines therapeutic bodywork with great attention to the special needs of the mother-to-be, as her body undergoes to dramatic changes of the childbirth experience.

• Antenatal massage has become a fast-growing field of bodywork therapy in the UK and United States. Studies at the Touch Research Institute have found that women who were participating in prenatal massage had less anxiety, lower stress hormone levels, less sleep disturbance, less low back and leg pain as well as lower premature labour rates.

• Massage therapy enhances the function of muscles and joints, improves circulation and body tone and relieves mental and physical fatigue.

Touch is so important for the mother-to-be, vital for her physical and emotional well being as she adapts to her new body image. With this special attention, the treatments will create additional nurturing to the new life that grows within her.

Benefits of antenatal massage:
• deep relaxation
• stress reduction
• increased nutrient absorption
• increased immune functioning
• assists lymphatic system
• assists circulatory system
• reduces muscle strain
• balances glandular system
• reduces varicosities
• reduces stretch marks
• decreases oedema
• decreases levels of melanin
• increases flexibility in muscles and joints
• relieves spasms and cramps
• provides emotional support and physical nurture

What is postnatal massage (massage after the baby is born)?

It is an important time for mother and baby to spend together by Mummy receiving massage. Massage after birth is equally important as a massage during pregnancy:
• In the early days work needs to be done more gentle and support the abdominal muscles to regain there tone
• It helps Mums to come to the normal life
• Touch is very important to reduce the physical and emotional stress after the birth and new Life Being Mum
• Mother being in prone position is beneficial in the early days as it helps the uterus to contract
• It also helps to support good posture when Mum is holding and carrying the baby encouraging good postural habits

Physical and emotional changes during pregnancy:

First Trimester (0 - 13 weeks)
• Emotionally adjusting to being pregnant
• Mixed feelings about the pregnancy
• Fear of miscarriage causing anxiety
• Fatigue and depression
• Breast swelling, tenderness and tingling
• Nausea and vomiting
• Frequent urination
• Concerns for existing children
• Change in taste and food choice

Second Trimester (14 - 28 weeks)
• Fatigue, nausea and other physical discomforts are greatly diminished
• Feelings of radiant health
• Quickening (begin to feel the baby move)
• Bonding with the baby begins
• Most of her focus will be on pregnancy, childbearing and preparation for the new role
• Linea nigra may appear (a dark line from the pubic bone to the navel)
• Mask of pregnancy (brown patches on forehead and cheeks)

**Third Trimester (29 – 40 weeks)**
- Fetal movements increase
- Kicking becomes stronger
- Woman grows impatient for baby's arrival
- Fear of labour, health of baby, loss of figure, stretch marks
- Increasing physical discomfort (eg shortness of breath)
- May feel awkward, ugly, fat, etc.
- Tired of being pregnant
- Uterus expands to just below the breastbone
- Indigestion and heartburn
- Varicose veins and haemorrhoids
- Vascular naevi (spiders)
- Oedema
- Stretch marks
- Round ligament pain
- Low back pain
- Carpal tunnel syndrome

**Anatomical & Physiological Changes**

**Uterus**
The uterus has the capacity to increase rapidly in size and then return to normal within a few weeks after delivery. Its weight will increase by 300% and its volume can increase up to 1000%. However, this dramatic growth does not involve an increase in the number of muscle cells. The muscle cells themselves grow larger. There is an increase in the amount of collagen and elastic material and an accumulation of fibrous tissue. This network of muscle and fibrous tissue adds to the strength of the uterine wall. There is a great increase in the size and number of blood vessels and lymphatic tissue. In the non-pregnant woman the uterus is almost solid. It weighs 70 grams (3 oz.) and is pear shaped. It has a cavity that holds 10 ml. The cavity is not hollow, but folds in upon itself.

**Metabolic Changes and Homeostasis**
In pregnancy, all the systems of the body work up to 40% harder. The heart, the lungs, the kidneys and the liver are all working much harder. This requires more nutrition – and there is less reserve if problems arise. Massage can help make the best use of the available reserves. Metabolic changes refer to those changes that govern how the body processes food nutrients once they have been digested into the blood stream. The pregnant woman undergoes numerous changes in metabolism which manifest themselves in the form of weight gain. Weight gain is very important in pregnancy. Most of the weight gain is a result of the growing uterus, fetus and breasts. But also includes an increase in blood, extra vascular and extra cellular fluid volumes. It is normal for a woman to gain anywhere from 30-35 lbs. during her pregnancy.

**Weight distribution in pregnancy**
The extra fat stores necessary for the energy demands in labour, during which the woman may go hours without the desire or ability to eat.
• **Water retention** is normal and is a result of a resetting of osmotic thresholds for thirst and hormone secretions affecting the kidneys. Approximately 6.5 litres of water is being retained in a full-term pregnant woman. Studies have shown that women with some swelling will have healthier babies than the woman who has none.

• **Normal oedema** accumulates in the woman’s feet, legs, and hands as the day progresses and in the morning, most of the edema is gone. This oedema is the result of increased venous pressure below the uterus as a result of partial obstruction of the vena cava by the enlarging uterus and the pull of gravity. Because some oedema is normal and healthy in pregnancy, attempting to remove all oedema with massage is probably not desirable.

• **Abnormal oedema** is found upon rising in the morning. This type of dangerous oedema is manifested by swelling in the face and rest of the body as well. High blood pressure (and protein in the urine) usually accompanies the abnormal oedema of pre-eclampsia. A safe way to handle clients with oedema is to ask if their swelling has been noted by their GP. If it has not been noted, they should be referred back to their GP urgently.

---

**Common Discomforts in Pregnancy**

**Morning Sickness**

Treatment might include: Seabands or QueasyAide are elastic wristbands with a plastic button attached that applies constant pressure to (P6 - Pericardium Meridian) which is located in the middle of the inner side of the forearm two and one-half finger widths above the wrist crease. (Also good for chemotherapy patients)

Other suggestions include:

• At bedtime, drink a glass of juice with 2 tsp. of sugar
• Place dry crackers by the bedside and upon awakening in the morning, eat several dry crackers before getting out of bed
• Get up slowly. Go immediately to the kitchen and eat something.
• Eat something every two hours throughout the day and finish the eating regime with the glass of juice and sugar at bedtime
• Any canned fruit in heavy syrup—take spoonfuls of syrup slowly and this will usually get rid of nausea

**Fatigue**

During the first trimester, the pregnant woman often experiences fatigue and needs longer periods of sleep. Encourage her to listen to the wisdom of her body.

**Round Ligament Pain**

The tissue of the round ligament is made up of the same tissue as the uterus and has the ability to contract. Sudden movements can trigger a painful spasm of this ligament. The spasm is usually experienced as a sudden onset of sharp pain in the lower abdomen on one side or the other (or both), and at times will radiate down into the groin area. It can last five minutes or more. If a doctor has determined that the discomfort is due to round ligament pain what is helpful to do:

• Flex the knees toward her abdomen until the pain subsides
• Suggest soaking in a warm bath
• Support the abdomen with a pillow and place a pillow between the legs when lying on her side.
• Attempt to avoid sudden movements. Rise and sit slowly.
• Turn to side-lying and push up slowly with the arms and elbows from a lying position.

**Difficult breathing**
Anatomical changes associated with the growing uterus pushing upward into the abdomen from the pelvis result in the level of the diaphragm rising up to 4 cm. The thoracic circumference increases - 6 cm. These increases allow for the increased oxygen needs of the mother and fetus.
Resetting of oxygen needs in the body by the hormone progesterone changes the rate of respiration very little. However, early in the pregnancy, there is an increased awareness of the need to breathe. She may experience shortness of breath or sigh frequently.

**Progressive lordosis**
This is a characteristic feature of a normal pregnancy due to the anterior position of the pregnant uterus. This sometimes more exaggerated in women from a Negro background they have an exaggerated pelvic tilt, in addition. There is also increased mobility of the sacroiliac and pubic joints due to hormonal changes which may cause low back pain and instability in the hips. During the last trimester or pregnancy, aching, numbness and weakness in the upper body are occasionally experienced.

**Conclusion:**
This is probably due to extreme lordosis with anterior flexion of the neck and slumping of the shoulders which produces traction on the ulnar and median nerves in the upper extremity. Both massage and pelvis tilts can help alleviate low back pain.

**Contraindications in Pregnancy**
Some contraindications are absolute i.e. means massage is not advisable. If client experiences any problems during the pregnancy doctor’s advice should be taken before treatment, if necessary.

**Absolute Contraindications to Pregnancy Massage**

- *Bleeding in 2nd and 3rd trimester (Placenta praevia)* – placenta is low in the uterus and any physical manipulation may start more bleeding, which might provoke miscarriage. And any previous experience of bleeding in 2nd and 3rd trimester would be an absolute contraindication to abdominal massage.
- *Unexplained low pelvic pain in any trimester* – low pelvic pain in pregnancy may be due to placenta separation – Ante Partum Haemorrhage (APH) — **if the client is diagnosed with APH abdominal massage is contraindicated.**
- *Placenta praevia (low lying placenta)* – whether there has been bleeding or not – if placenta previa has been demonstrated on ultra sound scan, whether there has been bleeding or not, abdominal massage is contraindicated.
- *Preeclampsia* -this is a very serious condition which needs immediate medical attention. Symptoms include /pitting oedema, high blood pressure and protein in the urine/and usually develop between the 20 weeks and one week after
Preeclampsia occurs in 5% of pregnant women and it is more common in first pregnancies and women who already have high blood pressure. If a woman has mild preeclampsia, bed rest at home may be sufficient, but she should see her doctor every 2 days. For severe preeclampsia the woman is hospitalized. **Avoid massage in this condition! Must contact her Doctor.**

- **Eclampsia** - this is a more severe form of preeclampsia which results in seizures or a coma. Eclampsia develops in 1 out of 200 women, who have preeclampsia and is usually fatal unless it is treated promptly. **Avoid massage in this condition! Must contact her Doctor.**

- **Deep Vein Thrombosis (DVT)** - DVT is the formation of a blood clot inside a blood vessel. The biggest predisposing factor of DVT is stasis, a stopping of flow, usually associated with prolonged inactivity. Massage can cause these clots to break loose and lodge in the lungs causing a pulmonary embolism which is a life threatening situation.

  There is probably an incidence of only 1 or 2 in every 1000 pregnancies. Women who have used oral contraceptives or work at a job that requires sitting for long periods are at greater risk. The symptoms are severe pain, unilateral oedema, and heat and redness of the leg and thigh. However, some woman experience little to no symptoms even when they have a dangerous amount of deep vein clots.

  If your client has DVT or the therapist noticed symptoms of DVT massage should be postponed and refer the client to her physician.

- **Varicose Veins** - if severe (swollen, blue, and raised), avoid the area completely. You may drain above them with effleurage strokes to the heart. Spider veins may be lightly stroked toward the heart. Exercising in water or support hose may help. Clothing around the waist and legs should be loose and comfortable

- **Severe symptomatic heart disease** – if client can not lie flat or on side with not being short of breath, **then massage should not be attempted.**

**Relative Contraindications to Pregnancy Massage**

- **Bleeding in the first trimester** is often a reflection of normal establishment of the pregnancy and does not represent ill health. If accompanied by pain, then massage is to be avoided and medical advice taken

- **Any coincidental disease in pregnancy** requiring prescribed medicines may be a contraindication to therapy – therapist need to make sure that Diabetec client has eaten and taken there prescribed medicine, Epilepsy – make sure client doesn’t have frequent fits, in that case massage is safe. Medical advice should be taken if necessary.

- **Any infectious illness causing the client to be feverish.** Treatment should be avoided if the temperature exceeds 38°C.

- **Pre-existing bone disease and osteoporosis** – due to possibilities of bone fracture in general which might reflect to the therapist later.

- **Stretching** - Due to the hormone relaxin, the muscles and ligaments are much more mobile. Caution must be used when performing ROM and stretching movements on clients so as not to overstretch an area.
• **Severe swelling** - If your client shows signs of severe pitting oedema with sudden onset and is late in her pregnancy, advise her to contact her doctor immediately! These are symptoms of preeclampsia, a life threatening condition unique to pregnancy. However, some swelling and water retention is normal, and massage will greatly help.

• **Pre-Term Labour** - If client has experienced pre-term labour, she will probably be on complete bed-rest. Massage should be very gentle and soothing since this will be a very stressful time for her. NO abdominal massage. AVOID ankle area completely. Massage will benefit her circulation due to her inactivity while on bed rest.

**Always, get approval from primary care provider.**

• **High blood pressure/hypertension** - Fist at all check for Preeclampsia, if every think ells is normal perform the entire massage with the client on her left side. This allows optimal venous return because the vena cava is slightly compressed when the client lies on her right side. Use pillows to roll her slightly forward or backward. All strokes should be gentle and moving toward the heart.

• **Have the client bring a doctor’s note.**

**NB!** There is no known connection between massage and miscarriage. Massage does not cause spontaneous miscarriage.

**However,** the guilt and sadness associated with the loss of pregnancy may cause families to look for someone to blame.

**If this is a concern is better (from psychological point)** do not accept clients in the first trimester which will completely avoid the possibility of a client associating massage with pregnancy loss.

**If an established client becomes pregnant,** there is already a bond established between client and therapist. This trust greatly diminishes the chance of blame in the event of a miscarriage.

Massage in Pregnancy is directly beneficial to the pregnant mother-to-be and indirectly beneficial to the baby. Provided all sensible precautions are taken, outlined in this brochure, your treatments will be **safe and fulfilling.**

**Nutrition during pregnancy**

Good Nutrition can greatly improve the chance of having a healthy baby.
Increase water intake to prevent dehydration. Avoid fizzy drinks and can, boxes juice and vinegar to prevent heartburn.

• see the appendix on the end for more information

**Exercises during pregnancy and Labour**

No doubt about it, exercise is a big plus for both Mum and baby.
• Make you feel better
• Look better
• Prepare you and your body for the birth
• Regain your pre-pregnancy body more quickly
• See the appendix on the end – Well Mother advises & Elana Pearl
Postnatal Period

**First six weeks after birth**

Majority of women are advised to avoid starting any exercise programme for the first six weeks following pregnancy, particularly if you have had a c-section. So please get the all clear from your doctor before embarking on anything.

Gentle pelvic floor exercises are safe to do can be done immediately and should be encouraged as part of your daily routine.

Also walking is great an abdominal breathing and simple neck and shoulder exercises are good.

Those who have kept up a regular routine and may have been training at a fairly high standard prior to given birth, may feel ready to start training as soon as 3 weeks after giving birth. Just taper your training and listen to your body.

**Monitoring**

The exercise should be done few times a week and feel good and enhance feelings of well-being.

There should be no exercise associated pain or heavy bleeding.

Personal well being should be self-assessed every two or three days.

Fluid intake should be high.

Adequate rest is a must.

**From six weeks on:**

Most things are under control now. The abdominal work needs to start with the simplest exercise and work over time to harder exercise.

- See the appendix on the end

**Main goals**

A return to pre-pregnancy weight

A rapid improvement in abdominal tone

An improved body image