

REFLEXOLOGY AND THE PREGNANT CLIENT

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Pregnancy, especially the first time, is a fantastic experience. Astounding changes happen to women during pregnancy. Every body system is involved- so are the emotions and feelings. Usually pregnant women adapt well to the changes in body and mind and make the most of the experience.¹

Reflexologist's who have been working in this field know that reflexology increases health and well-being and gives an excellent environment for both mother and the Incoming Soul. Reflexology can be used to ease or relieve the many 'minor' discomforts of pregnancy. Reflexology can also reduce stress and anxiety, which can cause conditions in pregnancy, labour and in the postnatal period.

I have briefly discussed considerations and cautions when providing reflexology with your pregnant clients.

CONSIDERATIONS at start and during a session with a pregnant client

- **History taking and Documentation**

It is always important at the beginning of the first session with a pregnant client to gain a comprehensive and accurate history including previous health concerns: medical, surgical or gynaecology/obstetric problems.

- Legible, dated and accurate recording taking is important. It is also suggested that records are kept for 21 years (for the baby's sake). If you have the information on your computer, you can burn documentation onto CD and store away. Otherwise, keep records somewhere safe.

- **Positioning client**

For both massage table and Chair: From approximately 30 weeks gestation – use small pillow or rolled-up towel under the right hip. This will prevent the growing uterus compressing the abdominal inferior vena cava, thereby restricting the blood supply to the baby and the client. If the woman is pregnant with twins, and enlarged uterus at an earlier gestation, you may need to consider positioning earlier.

- **Length of session.**

In the last 12 weeks, due to the size of the uterus, and pressure on the bladder, the sessions may need to be of shorter but more frequent duration.

CAUTIONS

- Occasionally minor ailments develop into complications, disorders and major obstetric problems that must have expert medical attention. All problems during pregnancy MUST have expert medical attention.
- It is wise that whilst learning reflexology, students are recommended to NOT work with pregnant clients during the 1st trimester (first 12 weeks).
Rationale: there is so much to learn during reflexology training and extra knowledge is needed for working with pregnant clients.¹

- Some women are not aware they are pregnant in the first few weeks and the reflexologist may also be unaware and work the uterine/pelvic reflex zones. Remember: Reflexology can not and will not cause a viable fetus to be miscarried nor delivered early.
- Fear that Reflexology may cause miscarriage: Reflexology can not and will not cause a viable fetus to be miscarried nor delivered early. Many reflexologists and midwives who have tried to 'induce labour' are aware that if the mother and baby are not ready, nothing will happen!
- An unexplained sense of no-to-do-it-ness: If the reflexologist has an inner feeling "not today" or , "don't " , then don't! Go with the gut feeling, there is a reason why.

At the end of session

- **Be aware of Postural Hypotension**
As the woman has been lying or sitting for a length of time, suggest that she stands slowly to prevent postural hypertension and the possibility of her fainting!

CONTRAINDICATION

There are some occasions where reflexology is contraindicated

- **Acupressure points**
- **Deep venous thrombosis**

Acupressure points

There are 3 acupressure points that are traditionally forbidden to use during pregnancy as they may cause an interruption of pregnancy. They are located within the foot reflexology area: Spleen 6, Bladder 60 and Bladder 67. Also for hand reflexology: LI 4

Spleen 6: 3-4 finger widths above maleolas ankle bone inner aspect
Bladder 60: Behind ankle- outer aspect
Bladder 67: Little toe- outer, lower aspect of nail

DEEP VEIN THROMBOSIS (DVT)

DVT is a blood clot that forms inside a vein. IT may partially or completely block the blood flow. There is a risk that blood fragments may detach and travel to another part of the body causing an embolus eg pulmonary embolus. The thrombosis can occur in any deep vein: the vein most often affected is the deep vein in the calf- DEEP SAPHENOUS.

Pregnant women are more prone to have DVT than are any other group of people. During pregnancy the high levels of oestrogens are associated with DVT. As reflexology increases the vitality of the vascular system there is a possibility that the thrombosis may move with dire consequences. ¹

Maternity reflexology is wonderful work. Enjoy the experience

Reference

1. Enzer S. 2004. Maternity Reflexology Manual