Objectives

1. The participant will review the pertinent anatomy of the pelvis
2. The participant will review typical techniques for osteopathic manipulation during pregnancy and the contraindications for any manipulative treatment
3. The participant will practice hands on osteopathic manipulative techniques for the patient with an intrauterine pregnancy
4. As an aid for patient education, the participant will experience some Yoga stretches indicated for the pregnant patient
1. Head floating, before engagement
2. Engagement; flexion, descent.
3. Further descent, internal rotation.
4. Complete rotation, beginning extension
5. Complete extension.
7. Del. of ant. shoulder.
8. Delivery of posterior shoulder.
OMM for Obstetrics

Take advantage of the Relaxin….and follow your study of the anatomy.

Structural Examination of Obstetrical Patient

- **Standing:** Monitor gait, Evaluate A-P curves (OA, thoracolumbar, lumbosacral). Bend forward – standing flexion test

- **Seated:** Palpate for areas of strain, altered tissue texture, restriction and tenderness. Seat flexion test, compare to standing. Assess sacral motion at sulcus with rotation of upper spine

- **Supine:** Refine diagnosis of segmental and regional dysfunction. Best opportunity to assess sacral motion, hand (palm up). Check anterior counterstrain points, innominate and pubic bone dysfunctions

**INDICATIONS**

- Low Back Pain
- Abdominal Pressure
- Mastitis
- Headaches
- Shortness of Breath
- Nasal Stuffiness

Treat Other Typical Findings:

- Quadratus spasm
- Ribs 11 12
- Psoas
- L3 contributions
- Chapmans
- Fascia Lata – sciatic and constipation!
- Posterior Fibular head and its contributions to sciatic

And…Labor

**CONTRAINDICATIONS** for OMT during Pregnancy

- Undiagnosed vaginal bleeding
- Threatened or incomplete abortion
- Ectopic pregnancy
- Placental Abruption or Placenta Previa
- Premature Rupture of Membranes (preterm)
- Preterm Labor (relative contraindication)
- Prolapsed umbilical cord
- Eclampsia and severe preeclampsia
- Other surgical or medical emergencies
OMM TECHNIQUES for Obstetrical patients

- Pubic Symphysis (whether you start or end there…Mitchell Sr. and Jr.)
  - Pubic Shotgun
  - Frog Technique

- Preparatory Stage, 1-28th week
  - Rib raising
  - Sacral Rock
  - Om suture decompression to normalize vagal tone

- Congestive Stage, 28th -36 week
  - Thoracic inlet release
  - Lymphatic drainage/pump
  - CV4
  - Pectoral lift
  - Thoracoabdominal diaphragmatic doming
  - Pelvic Diaphragm Release

- Preparatory Stage, 36th week until delivery
  - (HVLA CONTRAINDICATED because of relaxin’s effect on ligaments)
  - Sacral Rock
  - CV4
  - Lumbosacral joint release
  - Pelvic Diaphragm release

- Labor and Delivery
  - Sacral Rock
  - CV4
  - Lymphatic pumps

- Recovery and Maintenance
  - Sacral Rock
  - CV4
  - Lymphatic pumps

- Don’t forget the baby!
The Delivery

As Melicien Tettambel, DO is apt to say
“It is about the relationship of the passenger and the path”

If the path has been prepared, less likely to have concerns… ie Dystocia

“Although no ideal manipulation or treatment exists, all maneuvers in the HELPERR mnemonic aid physicians in completing one of three actions: enlarging the maternal pelvis through cephalad rotation of the symphysis and flattening of the sacrum; collapsing the fetal shoulder width; or altering the orientation of the longitudinal axis of the fetus to the plane of the obstruction. In rare cases in which these interventions are unsuccessful, additional management options, such as intentional clavicle fracture, symphysiotomy, and the Zavanelli maneuver, are described”

Baxley, AFP

H Call for Help
E Evaluate for Episiotomy
L Legs (McRoberts)
P Suprapubic Pressure
E Enter maneuvers (internal rotation)
R Remove the posterior arm
R Roll the patient to all-fours

Prepare for Emergencies!
Take an ALSO class (Advanced Life Support for Obstetrics)

Invite the patient back for evaluation of pelvis prior to the post-partum visit – along with the 2 wk well child check.

Allow Obstetrics to grow your family practice to include pediatrics and the rest of the family

Relax
And
Breathe
And
Enjoy the miracle!
Prenatal Yoga

Growing Evidence Base


CONCLUSIONS: Preliminary evidence supports yoga’s potential efficacy in these areas, particularly if started early in the pregnancy.


CONCLUSIONS: The provision of booklets and videos on yoga during pregnancy may contribute to a reduction in pregnancy discomforts and improved childbirth self-efficacy


CONCLUSION: Yoga reduces perceived stress and improves adaptive autonomic response to stress in healthy pregnant women.

Sample Prenatal Yoga Class elements:

Breathing

Relaxation

Asanas…focus, centering, strengthening
  Cat Dog Stretch
  Comfort Pose – with blanket or pillow support
  Seated Postures
  Squats
  Partner Postures
  Standing Balance Postures

Closing Meditation
REFERENCES FOR TALK ON SACRUM AND LABOR

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