Pregnancy Massage 101:
Practice-Based Decision Making

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Pregnancy Massage 101: Practice-Based Decision Making

Webinar Intention

To offer massage therapists:
- Summary of precautions and effectiveness guidelines
- Summary by trimester of positioning recommendations
- Summary of the advantages of sidelying positioning
- Summary of signs of medical complications
- Client scenarios to practice applying the series’ main principles

Note: This webinar does not certify you to practice prenatal massage.
Preview Test Questions

1. Why might you want to consider waiting until the second trimester to work with pregnant women?
2. What position(s) prevent supine hypotensive syndrome and are safe throughout pregnancy?
3. What are some of the major signs of a complication related to the maintaining of a pregnancy to term, i.e. miscarriage or preterm labor?
4. What is a high risk pregnancy?
5. When is it important for even a highly trained prenatal therapist to consult with a woman’s doctor or midwife before prenatal massage therapy?
6. With the level of training you received in this webinar series, what categories of pregnant women is it recommended that include in your practice?

Abdominal Massage Summary

Request client consent

First trimester: consider eliminating as liability precaution

Second and third: superficial only

Superficial within all borders

Special care at fundus and midline
Who and When Summary

- Women with normal, low-risk pregnancies, unless certified and highly trained
- “The bigger the belly, the better” concept
- Consider waiting until second trimester if uncomfortable about liability issues related to miscarriage risks in first trimester.

First Trimester Massage Therapy

Safe and beneficial when under the following conditions:
- Working superficially within the abdominal borders
- Avoiding all reflexive stimulation of points associated with uterine contractions
- Maintaining and increasing parasympathetic not sympathetic arousal
- Working within scope of practice
- Working within your knowledge and experience limits (with this webinar series only, limited to uncomplicated and low-risk pregnancies)
Swedish Massage Summary

- Direct work toward heart.
- Drain proximal first.
- Work superficially for edema relief; deeper for musculoskeletal pain
- Lighten pressure over vascular weaknesses, depending on severity
- Contraindicated on legs for those with higher clot risks unless medically supervised

Summary of Leg Precautions

- Use broad, superficial strokes medially, avoiding:
  - Cross-fiber friction
  - Deep-tissue massage
  - Acupressure
  - Ischemic compression
- Other techniques contraindicated throughout the leg:
  - Percussion
  - Deep vibration
  - Rocking
  - Wringing
  - Wrapping
- Lighten touch over varicose and spider veins
- Landmarks for areas of greatest precaution:
  - Popliteal fossa
  - Medial tibial border
  - Saphenous area
- Veins where thrombi are most likely to form:
  - Saphenous veins
  - Femoral vein
- Leg discomforts indicating possible thrombus:
  - Edema
  - Heat
  - Painful
  - Ache or tenderness that worsens when standing or sitting
  - Pulsatile thrombus
- Some thrombi are asymptomatic
Reflexive Therapies Summary

• No bone-to-bone pressure to uterus and ovary zones; precaution with endocrine gland zones and on those with unhealthy lifestyles or poor health
• No bone-to-bone pressure to Spleen 6, Kidney 3, Bladder 60, 31-34, Liver 3, Large Intestine 4, Gall bladder 21

Movement Summary

• Rocking contraindicated with nausea
• Caution on hips and legs and with positioning when symphysis pubis dysfunction
• Avoid hyperextension of all joints
• Remain within normal ROM
Positioning Summary

First Trimester (1-13 wks)
• All positions, depending on client comfort
• Adapt for breast tenderness and other comfort & safety concerns, especially if prone

Second Trimester (14-26 wks)
• Prone not recommended
• Supine- use pillow under right pelvis, usually up to week 22.
• After 22 weeks, semireclining and sidelying; chair okay backwards

Third Trimester (27-40 + wks)
• Sidelying and semireclining only; chair okay backwards
• Adjust for safety and comfort issues of breathing, heartburn, pain

Advantages of Sidelying Positioning

• Maximizes maternal cardiac function and fetal oxygenation
• Avoids increased intrauterine pressure and supine hypotension
• Improves access to pectoral and pelvic girdle for therapist
• Decreases edema
• Avoids sinus congestion, breast compression
• Psychologically comforts and soothes
• Facilitates sharing
### Summary  Prenatal Complications Warning Signs

<table>
<thead>
<tr>
<th>Bleeding, vaginal discharge, gush or slow leakage of amniotic fluid, low back and/or pelvic pain, cramping, contractions, pelvic or thigh pressure</th>
<th>Severe nausea, weight loss, dehydration</th>
<th>Heat, swelling or pain the calves, particularly unilateral</th>
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<tbody>
<tr>
<td>Excessive hunger and thirst, frequent urination, sugar in urine tests</td>
<td>Low weight gain, decreased fetal movement</td>
<td>High blood pressure, protein in urine test, rapid weight gain, systemic and pitting edema, violent headaches, severe vomiting, visual disturbances, upper mid-back pain especially on right, convulsions</td>
</tr>
<tr>
<td>Any abnormal results of blood or other laboratory tests, fetal and maternal monitoring procedures</td>
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### Major High-Risk Factors

- Mother’s age < 20 & >35
- Previous problem pregnancy or uterine anomalies
- Multiple pregnancies (twins, triplets, etc.)
- Diabetes mellitus, cardiac, liver, or renal/bladder disorders, chronic hypertension
- Asthma, other pulmonary disorders, DVTs, connective tissue & collagen diseases
- Rh-negative mother or maternal genetic problems, including diethylstilbestrol
- Drug or other hazardous materials exposure; risk of fetal genetic disorders; other sociodemographic & psychosocial factors

*(Ricci 2009)*
Client Scenario #1

A prospective client calls you for an appointment. She is 33 weeks into her first pregnancy and has been having back pain this past week, primarily in her lumbar and sacral areas. Her prenatal exercise teacher has referred her to you for this and to help with her very tight thigh muscles, especially her inner thigh muscles. She’s also beginning to notice her shoes are very tight and her ankles swell in the afternoon and evenings.

Questions Client #1

1. What additional information would you need from asking or observing her to make knowledgeable decisions about her care?

2. Which of her presenting complaints might be associated with a prenatal complication?

3. How will you assess for that possibility?

4. What technique precautions should you take when addressing her edema and medial thigh tension?
Questions Client #1

1. What additional information would you need from asking or observing her to make knowledgeable decisions about her care?

Questions Client #1

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3. How will you assess for that possibility?
4. What technique precautions should you take when addressing her edema and medial thigh tension?
Client Scenario #2

An established, very athletic client of yours comes for her quarterly massage and happily announces that she is 14 weeks pregnant! She usually enjoys a very deep, cleansing Swedish and deep tissue massage, particularly addressing her tendency toward constipation and extreme lumbar lordosis. She has also recently increased her preparation for a 5K race next month that she still intends to run, as long as her fairly intense nausea eases up by then. Her midwife expects this will be a low-risk, uncomplicated pregnancy as her prior ones were.

Questions Client #2

1. What changes in your usual positioning and techniques to address her constipation and lumbar lordosis are advisable at this point in her pregnancy?

2. What might you teach her that could help her to stay more comfortable as her pregnancy progresses?

3. On what areas of her body will you likely need to work in order for her to be more comfortable now and as the pregnancy progresses?
Questions Client #2

1. What changes in your usual positioning and techniques to address her constipation and lumbar lordosis are advisable at this point in her pregnancy?

Questions Client #2

2. What might you teach her that could help her to stay more comfortable as her pregnancy progresses?
3. On what areas of her body will you likely need to work to be effective in helping her be more comfortable now and as the pregnancy progresses?
Client Scenario #3

You are scheduled to work with a 30 year-old woman having her first pregnancy that is normal and healthy so far. A full-time accountant, she has a history of upper back and headache pain. She reports that this recently worsened when she assumed further responsibilities with longer hours at her computer. At 35 weeks, she is beginning to also experience heartburn, lumbar and right thigh pain. The thigh pain seems to vary from posterior pain to lateral numbness, and sometimes both.

Questions Client #3

1. What further information do you need to ask or observe in order to make knowledgeable decisions about working with her?
2. What prenatal complications might she be experiencing, and how will you assess to determine the likelihood of that?
3. What structures are likely to need your attention to address her musculoskeletal pain?
4. What positioning is likely to be most effective and comfortable for her to receive massage?
Questions Client #3

1. What further information do you need to ask or observe in order to make knowledgeable decisions about working with her?

2. What prenatal complications might she be experiencing, and how will you assess to determine the likelihood of that?
3. What structures are likely to need your attention to address her musculoskeletal pain?

4. What positioning is likely to be most effective and comfortable for her to receive massage?
Your Questions About Client #3

The Rewards of Working with Pregnant Women

Offering nurturing that helps women to feel more comfortable, more relaxed and less pain

Empowering women by helping them to become more aware of, connected to, and trusting of their bodies

Contributing to the development of the mother’s relationship with her baby, family, and the family of humanity
Certification in Pre- and Perinatal Massage Therapy

Become a maternity massage therapy specialist. Move far beyond general adaptations for maternity massage in this learner friendly, hands-on certification workshop. Practice and receive personalized feedback in:
- deep tissue
- passive movement
- neuromuscular
- reflexive
- positional release
- Plus other somatic methods modified for emotional, structural, and physiological challenges of the childbearing year.

“When my employer suggested that I take this course, even though I had been certified 7 years earlier, I was concerned that I’d be bored. Boy, was I wrong! It was updated to reflect new research and techniques that I find myself using daily. Thank you!”
J. Russell, XPM Inc.

For schedule & more info: www.bodytherapyassociates.com
Facebook: Carole Osborne's Prenatal and Deep Tissue Massage Training

Further Information and Training

1. Benefits of Prenatal and Perinatal Massage Therapy
2. General Guidelines, Precautions, and Contraindications
3. Client Positioning, Draping, Body Mechanics, and Other Practical Considerations
4. Trimester Recommendations and Techniques
5. Massage Therapy as Labor Support
6. Postpartum Perspectives and Techniques
7. Clients with Special Needs
8. Business Considerations
9. Profiles of Maternity Massage Therapists

214 pgs; 90 minutes of technique videos
Free Educational Videos

Carole’s videos at www.bodytherapyassociates.com/videos.php
• Peripartum Pelvic Pain
• Advantages of Sidelying
• Tips for Sidelying Positioning
• Secure SL Draping
• SL Body Mechanics
• Massage of the Legs
• Rhythmic Deep Tissue

Oakworks Educational Videos at www.massagetables.com/videos/educational-series.asp

Terms of Participation for Pregnancy Massage 101 Webinars

• I realize that the health and well-being of my clients and their offspring are influenced by my understanding and application of this material; therefore, I am committed to the conscientious study and thorough absorption of the information presented in this webinar.
• I understand that this webinar offers reliable, yet limited education in prenatal massage therapy. I understand that it does NOT include labor, postpartum, or any clinical or hands-on instruction or evaluation; therefore, this is NOT a certification program.
• I agree not to represent myself directly or by implication in marketing activities or any communications to clients or others that I am certified, endorsed, or authorized by the Benjamin Institute or by Carole Osborne, Body Therapy Associates, or any other agency to practice or teach prenatal massage therapy on the basis of participation in this webinar.
• I recognize that, on the basis of this webinar, I am especially not prepared to work with those women whose pregnancies are complicated by medical conditions or a higher risk of complications developing; therefore, I will refer these individuals to others more thoroughly educated and certified in this specialization.
• The safety and health of the expectant woman and her child (children) are my foremost concern; therefore, I will seek guidance from her prenatal healthcare provider prior to providing services.
• If I have any doubt as to the prudence of any somatic practices for my pregnant client, I will refrain from such procedures and seek guidance from her prenatal healthcare provider regarding her care.
• I agree to conduct my practice of prenatal massage therapy in accordance with the ethical and legal guidelines of the organizations to which I belong or by which I am licensed or registered.
Recommended Reading

- Angier. Woman: An Intimate Geography.
- Buckley S. Gentle Birth, Gentle Mothering: A Doctor’s Guide to Natural Childbirth and Gentle Early Parenting Choices
- Calais-Germain B. The Female Pelvis
- Cassidy T. Birth: The Surprising History of How We are Born.
- Cohen M. Deliver This!
- Curties D. Breast Massage.
- Ezner S. Reflexology: A Tool for Midwives.
- Franklin E. Pelvic Power.
- Goldsmith J. Childbirth Wisdom.
- Howard. Pelvic Pain.
- Jin Y. Obstetrics and Gynecology in Chinese Medicine
- Jones C. Visualizations for an Easier Childbirth.
- Kitzinger S. The Complete Book of Pregnancy and Childbirth
- Lett A. Reflex Zone Therapy for Health Professionals.

Recommended Reading

- Maupin E. A Dynamic Relation to Gravity. Vol. 1 and II.
- Menelli S. Journey Into Motherhood: Inspirational Stories of Natural Birth
- Moberg K. The Oxytocin Factor
- Montagu A. Touching: The Human Significance of the Skin.
- Mothering Magazine. www.mothering.com/
- Noble E. Essential Exercises for the Childbearing Year
- Osborne C. Pre- and Perinatal Massage Therapy. Second Edition
- Ricci S. Essentials of Maternity, Newborn, and Women's Health Nursing
- Shea M. Biodynamic Craniosacral Therapy Vol. 1 and 2.
- Simkin P and Klaus P. When Survivors Give Birth
- Stager L. Nurturing Massage for Pregnancy.
- Steege, Metzger, and Levy. Chronic Pelvic Pain: An Integrated Approach
- Walton T. Medical Conditions and Massage Therapy: A Decision Tree Approach.
- Wylie L. Essential Anatomy and Physiology in Maternity Care.
- Yates S. Pregnancy and Childbirth.
Recommended Online Resources

- The Coalition for Improving Maternity Services: Evidence Basis for the Ten Steps of Mother-Friendly Care [www.motherfriendly.org](http://www.motherfriendly.org)
- Survey on women’s birth experiences. [www.thebirthsurvey.com/](http://www.thebirthsurvey.com/)
- Midwives’ Alliance of North America- [www.mana.org](http://www.mana.org)
- Doulas of North America (DONA) [www.dona.org](http://www.dona.org)
- Information and referrals to physical therapy for women’s health issues, including pelvic floor and peripartum pelvic pain dysfunctions. [http://www.womenshealthapta.org/](http://www.womenshealthapta.org/)
- Dr. Michel Odent’s perspective on the intrauterine and prenatal environment’s impact on maximizing health and emotional well-being. [www.wombecology.com/index.html](http://www.wombecology.com/index.html)
- General information and resources [http://www.americanpregnancy.org/pregnancyhealth/](http://www.americanpregnancy.org/pregnancyhealth/)
- The Association for Safe Alternatives in Childbirth (Alberta based organization) and their publication, Birth issues. [www.asac.ca](http://www.asac.ca)
- Symphys pubis dysfunction and pelvic instability [www.pelvicinstability.org.uk](http://www.pelvicinstability.org.uk)
- International Pelvic Pain Society [www.pelvicpain.org](http://www.pelvicpain.org),
- National Women’s Health Information Center [www.4woman.gov](http://www.4woman.gov)
- Royal Collage of Midwives [www.rcm.org.uk](http://www.rcm.org.uk)
- National Childbirth Trust [www.pregnancyandbabycare.com](http://www.pregnancyandbabycare.com)

Recommended Prenatal Massage Products

- Belly pillows [www.bodytherapyassociates.com](http://www.bodytherapyassociates.com) or Spinal Care Systems [www.spinalcareproducts.com](http://www.spinalcareproducts.com)
- Oils and lotions PurePro [www.purepro.com](http://www.purepro.com)
- Tilt top massage table models: Oakworks. [www.oakworks.com](http://www.oakworks.com)
  Living Earth Crafts. [www.livingearthcrafts.com](http://www.livingearthcrafts.com).
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Thank You! Any Questions?
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• You’re eligible for one entry per webinar

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• Shoulder Pain
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• Hip & Thigh Pain

Whitney Lowe
• Orthopedic Approaches to Upper Body Disorders
• New Series Title

Tom Myers
• Anatomy Trains: Clinical Applications of Myofascial Meridians
• New Series Name

Carole Osborne
• Pregnancy Massage 101

Tracy Walton
• Massage in Cancer Care
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First Name: [Name] Last Name: [Name]
How would you rate the workshop overall?
- Excellent

How would rate the instructor?
- Excellent

Did this workshop achieve its stated goals?
- Yes
- Somewhat
- No

Did the workshop meet the expectations stated in the flyer?
- Yes
- Somewhat
- No

How was the pacing?
- Too Fast
- Just Right
- Too Slow

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Question 1: [Possible Answer Options]

Question 2: [Possible Answer Options]
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