



WOMEN'S HEALTH

## Cesarean Delivery & Acupuncture: Evidence-Based Report on Prevention, Recovery, VBACs and Trauma Treatment (Pt. 2)

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*This two-part series [[click here for pt. 1](#)] summarizes the current use and rationale for cesarean section; and the applicable uses for acupuncture within the prevention and recovery of cesarean birth. I've included research on the use of acupuncture for scar healing, malpositioned fetus, induction of labor, and common complaints post-surgery. I also review treatment of birth trauma and gentle cesarean section as a birthing option, as well as barriers to care for acupuncturists.*

### Recovery From Cesarean: Needing Help to Heal

Like any surgery, a cesarean delivery needs help to heal. C-section recovery may vary from other surgeries because a back-surgery patient likely did not exercise the equivalent of marathon running for many, many hours in the lead-up to the surgery, like some woman do in their labor prior to c-section.

The toll of exhaustion, and *qi* depletion, prior to surgery has not been measured. But as acupuncturists, we must evaluate the status of the *qi* and blood post-birth and take this into consideration. In addition to *qi* and blood stagnation at the surgical site, a recovering woman will likely be dealing with the side effects of anesthesia. Potential short-term side effects of general anesthesia include nausea and vomiting, chills and fever, itching, muscle aches, and dizziness. Until acupuncturists are welcomed into the surgical suite, we likely cannot affect these side effects.



We can, however, affect the long-term side effects of anesthesia, such as confusion and dizziness, that may last a week post-surgery, and constipation which can be very painful post-op, especially for a *qi*- and blood-deficient new mom.

Additional postpartum complaints that acupuncture can help with include postpartum exhaustion, postpartum hemorrhage, urinary retention, wound pain, muscle pain and constipation. The 2019 study, "Effect of Auricular Acupuncture on Postpartum Rehabilitation of Primipara With Cesarean," showed acupuncture can effectively relieve postpartum pain in primipara (woman giving birth for the first time) with cesarean and shorten hospitalization days, as well as reduce the incidence of postpartum complications such as postpartum hemorrhage, urinary retention and constipation. The researchers concluded, "[Acupuncture] is conducive to postpartum rehabilitation."<sup>1</sup>

### Healing Emotional Trauma

I was once asked if women experience emotional trauma post-cesarean because they are disturbed by the cosmetic scar from the surgery. I have worked with many women following a c-section and never once has a woman mentioned the surgical scar. Rather, women can be emotionally traumatized by the events leading up to cesarean section: a traumatic labor.

She could be affected by the lack of care and industrialization of birth experienced on the cold, surgical table, removed from her partner while undergoing spinal anesthesia, perhaps while having intense uterine contractions. She may have had her baby whisked away from her at the moment of birth, never experiencing skin-to-skin contact that we know is vital for bonding, maternal sensitivity

and infant self-regulation.<sup>2</sup>

There is a great deal of expectation and pressure put on women today to have a vaginal birth. They experience it in their social circles, society at large and from their providers. When a woman does not meet this expectation, she may feel she has failed her baby. No matter how many times and how intellectually she understands that "healthy baby, healthy mom" is the goal, she may also be grieving the birth she did not have. And that is OK.

We can support women who are undergoing PTSD from cesarean birth with our traditional Chinese medical tools. Auricular protocols like NADA will be helpful. Listening to the heart-kidney connection and applying acupuncture and moxibustion may be needed.

Traumatized woman may be unwilling to touch or look at their cesarean-section scar, as it can be a trigger for their trauma. Help them, with their permission, by applying moxibustion or infrared heat to the scar. Encourage them to self-massage the area. Refer out to mental health providers who understand not just post-traumatic stress disorder or postpartum depression, but both, as this can be the case with confusion emotions, drowned out by joy of a new baby and a feeling of, "I shouldn't be feeling this way."

#### Tips to Help

- Remove the word *natural* birth from your medical vocabulary. All birth is natural. A cesarean birth is natural. Try to use *vaginal* birth versus *cesarean* birth if you need to differentiate.
- Ask for permission and consent with any palpation near the surgical site.
- Give warning before touching the surgical site; "Now I'm going to use a cotton ball" after removing needles, for example.
- Refer to I-CAN (<https://www.ican-online.org>). The International Cesarean Awareness Network is "a non-profit organization whose mission is to improve maternal-child health by reducing preventable cesareans through education, supporting cesarean recovery, and advocating for vaginal birth after cesarean (VBAC)." It has chapters internationally for women to connect in person or online with experts and other mothers.
- Assuming the child was born healthy, still watch out for "healthy mother, healthy baby" talk. Likely the woman dealing with her birth trauma recognizes this is the ultimate outcome, and reinforcing this may invalidate the grief/shame/regret/anger she may be feeling.
- Try to use the word *birth* when referring to the woman's cesarean section. Reinforcing the surgery, rather than the birth, is likely unhelpful. Say *cesarean birth* or *cesarean delivery* more often than cesarean section.

#### Gentle Cesareans: The Heart-Centered Future of Cesarean Birth

The gentle cesarean technique has been popularized in recent obstetrics literature as a viable option to enhance the experience and outcomes of women and families undergoing cesarean delivery. Gentle cesareans have not been shown to reduce complications in cesarean delivery, but do improve the family's reported experience of the cesarean birth. Different birthing facilities define a gentle cesarean differently, but a 2014 investigation of the technique published in the *Journal of the American Board of Family Medicine*<sup>3</sup> included:

- Skin-to-skin placement of the infant in the operating room
- No separation of mother and infant

- Reduction of extraneous noise
- Initiation of breastfeeding in the operating room
- Collaboration among medical providers

## Our Potential to Contribute

Clearly, acupuncturists could play a significant role in the reduction of cesarean sections, recovery post-cesarean section and successful VBACs. Our barriers to care and helping women lie in patient education, hospital admittance and insurance coverage. Hopefully with the changes we are experiencing at the will of women advocating for gentle cesareans and integrative medical care, the system will see our field's contributions and welcome us more on the front lines of cesarean section management.

## References

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2. Bystrova K, Ivanova V, Edhborg M., et al. Early contact versus separation: effects on mother-infant interaction one year later. *Birth*, 2009;36:97-109.
3. Magee SR, Battle C, Morton J, et al. Promotion of family-centered birth with gentle cesarean delivery. *J Am Board Fam Med*, 2014;27(5):690-693.

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