

The Health Series: #8 Reflexology Therapy During the Childbearing Year

It gives me great pleasure to introduce Linda Baril, RCRT/Instructor/Teacher Trainer (RAC), Childbirth Educator/Doula, to you this month.

Linda was both my Foot Reflexology Instructor and my Foot Reflexology Teacher Trainer. She has been a practicing reflexologist since 1992, a teacher of foot reflexology and a childbirth educator since 1996. Linda has been a practicing doula for over thirty years. You can reach her at: (250) 726-5300 or casita.linda@hotmail.com.

Reflexology Therapy during the Childbearing Year

I can't think of anything more calming and supportive during pregnancy than receiving a professional reflexology treatment! Pregnancy is a time of profound transformation, both in body and in spirit. Many emotions will be experienced during this time; joy, excitement, fear, trepidation and, perhaps, stress. Along with the joy of welcoming a baby into the family there may be financial or relationship challenges. If you have an opportunity to work with a childbearing woman, you could bring a great deal of comfort and support to her.

I am often asked if there are **contraindications** to working with a woman during her pregnancy. I would like to offer you some guidelines that will be helpful to you and to your client.

First, I would suggest that you do not give treatment to a woman during the first trimester of pregnancy. This is a tenuous time typically, if there is a problem with the pregnancy this is the time period in which a spontaneous abortion (miscarriage) could occur. There has been a great deal of discussion over whether or not reflexology could trigger a miscarriage without a definitive conclusion. There is, however, a very real risk of it being **perceived** as having contributed to a miscarriage. I don't wish to put myself or the pregnant woman in the very difficult position of questioning whether or not something I did may have caused this very sad event. I always inform my pregnant clients that I will begin their treatments once they have passed 12 weeks of gestation.

As therapists, we never work on a client with suspected DVT (Deep Vein Thrombosis). The danger is that a thrombus (clot) could dislodge and travel to the lungs causing a pulmonary embolism. This is a life-threatening condition. DVT is painful and the woman will likely have a diagnosis from her doctor. If you encounter swelling, redness and deep pain in the lower leg, send her to her caregiver immediately. Do not work on her.

With the growing number of women undergoing IVF (in vitro fertilization) it is likely you will encounter this issue in one of your clients. While undergoing IVF treatment, the woman will be under a strict hormone-altering protocol that is necessary to 'prime' the uterus for receiving the implanted embryo. As we know, reflexology is an excellent therapy to restore hormonal balance... this is one situation where this is NOT the goal. I don't work on IVF patients as I don't want to disrupt the very delicate artificially induced balance that has been created by the medical personnel.

Finally, when giving reflexology therapy to a pregnant woman, avoid working the pituitary and reproductive reflexes. It is acceptable to gently pass over these reflexes but avoid focused pressure on these areas. The pituitary is responsible for releasing the hormone oxytocin which may cause uterine contractions. This will become appropriate as she reaches full term but not prior to that.

These guidelines are meant to encourage you to work with pregnant women under most circumstances. The relaxation and hormonal balancing that are the result of a treatment can make a great difference in her experience of pregnancy and better prepare her for the transformation into motherhood.

If you wish to learn more about assisting women through the childbearing year, please consider attending my 18-hour workshop **Assisting Women Through the Childbearing Year**. We look at techniques (reflex and acupressure point plus much more) that are beneficial to women during pregnancy, labour & delivery and postpartum.

Please feel free to contact me if you have questions or comments.

Linda Baril

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