

Case Study: Effects of SP6 Acupressure on Labor Pain and Length of Delivery Time in Women During Labor

“Effects of SP6 Acupressure on Labor Pain and Length of Delivery Time in Women During Labor”

Abstract:

Objective:

The purpose of this study was to evaluate the effects of SP6 acupressure on labor pain and delivery time in women in labor...

Intervention:

The 30-minute acupressure or touch on SP6 acupoint was performed.

Outcome measures:

Labor pain was measured four times using a structured questionnaire, a subjective labor pain scale (visual-analogue scale [VAS]): before intervention, immediately after the intervention, and 30 and 60 minutes after the intervention. Length of delivery time was calculated in two stages: from 3 cm cervical dilation to full cervical dilatation, and full cervical dilatation to the delivery.

Results:

There were significant differences between the groups in subjective labor pain scores at all time points following the intervention: immediately after the intervention ($p = 0.012$); 30 minutes after the intervention ($p = 0.021$); and 60 minutes after the intervention ($p = 0.012$). The total labor time (3 cm dilatation to delivery) was significantly shorter in the SP6 acupressure intervention group than in the control group ($p = 0.006$).

Conclusions:

These findings showed that SP6 acupressure was effective for decreasing labor pain and shortening the length of delivery time. SP6 acupressure can be an effective nursing management for women in labor.

Introduction:

Childbirth is one of the most joyous events in women's lives. In an effort to make childbirth a positive experience for women, there is an increasing

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emphasis on intrapartum pain management (Wildman et al., 1997). However, because of potential side-effects on mothers and fetuses, the use of analgesics and anesthetic agents may not be the first choice for pain management for women in labor. Rather, it is important for nurses to use nonpharmacologic pain-relieving measures, such as touch, exercise, aromatherapy, and acupressure... In Traditional Chinese Medicine (TCM), several techniques have been used effectively not only to facilitate labor but also to manage labor pain. The primary principle of TCM, which includes acupuncture, acupressure, and herbs, among others, is to balance and harmonize a person's two opposing energy entities, yin and yang, in order to maintain health. Furthermore, TCM explains that there are multiple channels of energy running through the body. These channels, sometimes called meridians, flow through the body like rivers, enhancing the blood flow, nourishing tissues, and facilitating normal bodily functions. Any obstructions in these

energy flows can cause deficiencies or excesses of energy in different parts of the body, leading to various illnesses and diseases (Cook and Wilcox, 1997). Labor pain is viewed as a consequence of imbalance between two energy entities... Acupressure is a variation of acupuncture and involves an application of constant pressure to specific acupoints of selective anatomic sites in contrast to the use of needles. Acupressure is a noninvasive technique and is believed to restore the levels of vital energy of the body, qi, thus harmonizing the free flow of qi in women in labor (Beal, 1998). Based on this belief, acupressure has been used frequently to enhance labor, manage labor pain, and shorten delivery time. Furthermore, acupressure is an appealing strategy, given that it is safe, cost effective, and easy to implement to use to manage labor pain. Several acupoints have been used in induction of labor: BL67, SP6, LV3, LI4, BL31, BL32, GB21, and SP9. Acupressure on these acupoints is believed to stimulate the release of

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oxytocin from the pituitary gland, which, in turn, stimulates uterine contractions to enhance the labor process or to manage labor pain. When labor slows down and contractions become weak, acupressure of BL60, BL67, GB21, and SP6 restores the energy balance and subsequent uterine contractions (Cook and Wilcox, 1997). In particular, the stimulation of the SP6 acupoint is found to have a strong influence on reproductive organs. Acupressure on SP6 may help to induce labor and manage various gynecological and obstetric dysfunctions (Lian et al., 2000)... the purpose of this study was to test the effects of SP6 acupressure on labor pain and duration of labor, controlling for the effects of anxiety, analgesics, and human touch in women in labor...

Materials and Methods:

...The experimental group received SP6 acupressure, whereas the control group received touch at the SP6 acupoint. The touch group was designed as placebo group to explain if the pure SP6 acupressure effects

were different from the emotional supportive effect of acupressure using human hands. For the experimental group, the research intervener stood at the feet of women in labor and applied acupressure at the SP6 acupoint to both sides during each uterine contraction during a 30-minute time period during each uterine contraction...

Results:

...The anxiety levels did not differ between the two groups prior to the intervention. However, the anxiety levels were significantly lower in the SP6 acupressure group than in the SP6 touch group following the intervention ($t = 2.214, p = 0.030$). While the anxiety levels remained with minimal increase in the SP6 acupressure group (4.5 to 4.9), the anxiety levels were increased considerably by 1.8 (4.5 to 6.3) from preintervention to postintervention time point in the SP6 touch control group. The SP6 acupressure for 30 minutes would be a moderately helpful intervention...

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The duration of labor was measured from the time of 3-cm cervical dilatation to full dilatation and from full cervical dilatation to delivery. There was a significant difference between the groups in the duration of labor. The acupressure group had a significantly shorter duration from the time of 3-cm cervical dilatation to full dilatation than did the control group...Findings showed that women in the SP6 acupressure group had a significantly shorter duration of the first stage of labor (from 3-cm cervical dilatation to full dilatation) and total labor time than did women in the SP6 touch group, although the duration of the second stage of labor (from full dilatation to delivery) did not differ between the two groups...

Discussion:

This study was conducted to examine the lasting effects of SP6 acupressure

on labor pain and duration of labor for 60 minutes after the intervention. The results indicate that compared to SP6 touch, SP6 acupressure is an effective means of controlling labor pain and shortening the duration of labor in women...Findings of this study clearly indicate that 30 minutes of SP6 acupressure is an effective complementary means for inducing a relief from pain during labor and a shortening of the duration of first stage labor without undue harm to the mother. SP6 acupressure can be readily implemented in clinical situations. It was shown to be an effective measure and could be used in clinical practice in order to improve the quality of care in labor and delivery.

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