

# **Special Report**

## Basics of Pregnancy Care

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When I was in chiropractic school (many years ago) I remember the sheer terror I felt when I had to adjust my first pregnant woman. I was in 8<sup>th</sup> quarter. I wasn't given any information on the special needs of an expectant mother. There was no book; there were no classes, there was nothing. I thought to myself, "I wish I were in 12<sup>th</sup> quarter already so I can learn this stuff in pediatrics". Well, THAT was a huge disappointment. Oh sure, we had a mini-lecture on Webster's technique but that was it. In my Ob/Gyn class I was taught how to perform a pap-smear and a breast exam (on a mannequin, no less). I was NEVER taught how to adjust and actually care for a pregnant patient. Were you? That's when it all started for me. I decided to consciously make an effort to learn all that I could about pregnancy chiropractic care. I figured if there wasn't any info out there for me, I had to go get it. Carpe Diem!

After I compiled all of this information over more than a decade of working with local midwives, doulas, Ob/Gyns, pregnant women and their families I felt I had to share this knowledge so that more women could benefit from the magic of a chiropractic adjustment. After all, when can you positively impact two lives with the power of one chiropractic adjustment, except during pregnancy?

So doc, I want to share with you some information that I have discovered over the years to be extremely helpful in working with pregnant women. Let's start with the basics.

It seems the #1 reason women see a chiropractor during pregnancy is for low back pain; especially pain over the SI joints. When women are pregnant, they usually, for the first time, hesitate in popping pills for every little thing. Chiropractic is logical next step for many pregnant women. There are basically 4 main reasons why low back is so prevalent during pregnancy.

1. The Hormones Relaxin and Progesterone make ALL ligaments lax and causes instability, changes the walking gait and the standing posture.
2. Increased weight gain causes an increased lumbar lordosis which can cause facet jamming and changes in the center of gravity.
3. Weakened abdominal muscles.
4. Pubic bone misalignment.

Now, a pregnant spine is different than a non-pregnant one. First of all, we need to accommodate for mom's ever-changing figure. A tilt up pelvic piece or pregnancy cushions work best. I avoid tables with a drop out piece because this actually is VERY uncomfortable for a pregnant woman with an already hyperlordotic spine. I speak from personal experience as well as from feedback I have received from dozens and dozens of pregnant practice members.

When I adjust an expectant mother, I generally see her more frequently than a practice member who isn't pregnant. Those pregnancy hormones mentioned

earlier, make it very difficult for mom to hold her adjustments for extended periods.

We must not forget the importance of the pubic bone when caring for the mother-to-be. In my opinion, this is one of the most important areas during pregnancy. The majority of mom's weight gain occurs right over the front of her pelvis, it makes sense to be certain this is in proper alignment, doesn't it? If you learn nothing else from this article, please remember the importance of the pubic symphysis during pregnancy...especially if the baby is Breech, Transverse or Posterior.

Some things to consider when working with the mother-to-be:

- Have intake forms that specify pregnancy related concerns. I have forms that ask about complaints before pregnancy and those that just appeared during pregnancy. Why? If a woman never had headaches before being pregnant, it is a clue that they may be due to an increase in estrogen which means look at L3. If she's past 28 weeks and complaining of headaches that she never experienced before, it could be pre-eclampsia which means check T1 and T10- T12 , her blood pressure and check for proteinuria.
- Obviously **NO** x-rays ever on a pregnant woman. Even with the abdomen shielded, DO NOT X-RAY a pregnant woman's cervical spine. It's the x-ray exposure to the thyroid that causes the problems during pregnancy (Source: <http://www.medterms.com>) and in upper cervical films, one cannot shield the thyroid and obtain a good cervical film.
- Don't use bilateral scales...
  - #1 NO pregnant woman wants to be weighed EVER!
  - #2 the position of the baby can give you an erroneous reading.
- I recommend omitting side posture during pregnancy; especially in the later months (past 25 weeks) because of recent research I have encountered regarding the very slight risk abructing the placenta in high risk individuals. WEBMD states that there is concern that rapid stops and jarring forces could cause placental abruption.
- High risks include:
  - Maternal hypertension - Most common cause of abruption, occurring in approximately 44% of all cases
  - Maternal trauma (eg, motor vehicle accidents [MVA], assaults, falls) - Causes 1.5-9.4% of all cases
  - Cigarette smoking
  - Alcohol consumption
  - Cocaine use

- Short umbilical cord
  - Sudden decompression of the uterus (eg, premature rupture of membranes, delivery of first twin)
  - Retroplacental fibromyoma
  - Retroplacental bleeding from needle puncture (ie, postamniocentesis)
  - Advanced maternal age
  - Idiopathic (probable abnormalities of uterine blood vessels and decidua)
- **Slava V Gauferg, MD** *Assistant Professor of Medicine, Harvard Medical School; Associate Chief, Research Director, Director of Education and Training, Department of Emergency Medicine, The Cambridge Hospital*
    - *Abruptio Placentae* Aug 29, 2006
- I also recommend that if the doc is pregnant herself that she does not use side posture to adjust because of the instability of her own pelvis.

**Basically, the rule of thumb is to decrease your force, avoid gross twisting motions, and postpone x-rays until after the baby is born.**

I'm sharing this information with you because I hope it will help you become more interested and confident in caring for pregnant women and if you already do care for pregnant women, I hope some of this information will help to enhance your results.

*Dr. Karen Gardner is a graduate from Life Chiropractic School (now Life University). She has built more than one large pregnancy care practice in Bucks County, Pennsylvania and also in Montgomery County Pennsylvania. Dr. Karen Gardner teaches pregnancy care to chiropractors world wide and has lectured at the University of Pennsylvania School of Nursing, the American Association of Birthing Centers, and the Florida Chiropractic Society on the importance of chiropractic care during pregnancy. Currently she is on faculty with Chirocredit.com offering continuing education courses on Pregnancy chiropractic. Her new book, [Pre-Natal Chiropractic Care](#) can be found in chiropractic schools across the country. Go to [www.pregnancychiropractic.com](http://www.pregnancychiropractic.com) for this book and more pregnancy care resources. Sign up for a free monthly newsletter dedicated to assisting principled chiropractors in building and enhancing a pregnancy care practice.*