There are many different ways to help you cope with the stress and pain of labor. During labor you can help yourself immensely by using a variety of comfort measures such as music, position changes, massage, relaxation techniques and breathing. These techniques cannot guarantee a pain-free childbirth, but they can help reduce pain and stress, promote labor progress and give you more control over the experience. These techniques can be used alone or with pain medication. It is important to remember each birth experience is different; the length and discomfort level of each birth experience will vary. Different women will have different coping techniques that work the best for them; the following relaxation and breathing techniques can be individualized to find the ones which will work best for you.

**Music to Soothe Your Labor**

Music has been an integral part of healing rituals all over the world since the beginning of recorded history. In this century, scientists have found that dental and surgical patients listening to music require less anesthesia and recover faster than patients who have nothing to listen to but the sounds of the medical procedures being performed on them. Women in labor also experience less pain from their contractions when they are listening to music.

The three main benefits of using music for labor are:

1. Music will calm your physiological response to stress, allowing you to relax and letting labor happen more easily.
2. The rhythm of the music can cue your breathing, slowing you down to keep you calm.
3. Focusing your attention on the music will take your concentration away from sounds that may be anxiety provoking.

The right music for your labor can be anything you enjoy. Practice your relaxation and breathing to the music before your labor begins. Try using music for meditation. Listen to the music. Let each measure flow through your whole body, relaxing every muscle and joint. Feel yourself floating along with the melody, relaxing more and more. Focus on the images suggested by the music.

In labor, use an mp3 player with earphones, increasing or decreasing the volume as you prefer, perhaps louder when a contraction begins, and very low between contractions. Or you may want to leave the music on for everyone in the room to enjoy. Music can relax your partner and birth attendants, too!

- Rhythmic body motions to go along with the music can add to your attention focus and provide even more pain relief. Tapping to the rhythm can help keep your attention off the pain.
- You can also concentrate on your own sounds to help you relax. Singing, moaning, or groaning, can relieve tension. Sounds that won’t be helpful to you are high-pitched screams because these sounds will make you more tense.
Sit in a comfortable chair or rocking chair with your feet up on a stool. Put a pillow behind your back and under your arms and knees. You can still be hooked up to a monitor and IV.

The birthing ball can help increase your comfort and aid in your baby’s descent.

To be comfortable in bed sitting up place pillows behind your back and under your knees to help your legs relax. Also you can put a pillow under your arms to help your shoulders and arms relax. Use lots of pillows.
More Positions You May Want to Try

- For back pain try standing up and leaning against the wall with your feet placed about a foot away from the wall. Press your waist against the wall.

- To help with back pain you can try kneeling on all fours while arcing your back like an angry cat.

- Another good position for back pain is sitting backwards in a narrow chair. Use 2 or 3 pillows to rest your arms and head on. This helps take the weight of the baby off your back and puts you in a great position for your partner to rub your back.

- You may want to try sitting or standing in a warm shower. This can be a wonderful way to promote relaxation.

- Some women find it comforting to rock back and forth or from side to side while sitting or standing. If standing, you can face your partner and lean your chest on theirs or you can lean your back against your labor partners chest. Both are good for rocking slowly.

- Do not lie flat on your back. This is not comfortable during labor, and is not good for circulation to your baby.

- Change your position at least every half hour. If you stay in one position too long it can make your muscles get sore. Get up and walk if you can. This can make labor shorter and easier to handle.

When lying on your side in bed, place one or two pillows between your knees with your legs slightly bent. Wedge another pillow behind your back and place one under your head and arms.
COMFORT POSITIONS FOR PREGNANCY AND LABOR

Use the birthing ball to help position yourself.

Double hip squeeze.

Sitting backwards on a hard chair is also a good position for a back rub.

Lunging can increase the size of the bony pelvis.
 Massage Can Help Relieve Tension and Can Help Reduce the Discomfort of Labor
Touch and massage help relieve tension and reduce pain. Your labor partner can help with this. During labor some women relax well and find massage helpful, others do not want to be touched. Some women find touch relaxing early in labor and irritating later. Labor partners need to be sensitive to her needs and not feel rejected if she doesn’t want to be touched. Try just holding her hand. Massage can be done on bare skin or over clothing. Try using lotion, powder or massage oil to help reduce friction.

**Types of Massage**

*Effleurage* is a light to firm stroking that can be done on your abdomen, arms, legs or back.

You can perform this on your abdomen yourself. This can be done on bare skin or over clothing. Many women do this by placing their hands on their lower abdomen, bringing them up their sides and back down the middle. They are massaging in two small circles.

*Effleurage stroking* is a long continuous stroke which can be done on arms, legs or back by your labor partner. Usually firm pressure feels good but start with light pressure and increase it according to the mother’s feedback.

For arms, begin at one shoulder, place both hands on either side of her arm and stroke down her arm all the way to her fingers. Mothers can try exhaling as the labor partner strokes down the arm. Repeat on the other arm.

On her legs start on one side, place your hands on either side of her upper thigh and stroke down the leg to her toes, again suggest she exhale as you stroke down her leg. Repeat on other leg.

On her back you can massage in circles, covering her entire back or stroke down on either side of her spine continuously.
**Counterpressure** on the lower back can help give relief if she is experiencing back labor. You can press with your fist or the palm of your hand on her lower back. You can just apply pressure or move your hand in a small circle, picking up her skin instead of sliding over it. This massage can be done in a variety of positions such as sitting backwards in a chair, kneeling on hands and knees or laying on her side.

**Touch relaxation** is responding to your labor partner’s touch by relaxing or releasing tense muscles. This can be done with gentle pressure or stroking. Practice will condition the mother to relax to touch during labor and will teach the labor partner how to touch, stroke, massage, and press in the most effective ways. You can start by tensing and releasing to your labor partner’s touch. After you have mastered contracting and releasing to touch, stop contracting first and see if you can release tension as your partner uses various massage techniques.

Contract forehead........release as your partner strokes across forehead with fingers. Try placing two fingers between her eyebrows and suggest she feel the space grow wider.

Clench jaw........release to pressure of palms on jaw. Your labor partner can cradle your jaw in their hands, then suggest she feel her jaw drop down into their hands.

Contract shoulders........release to kneading action or place one hand on each shoulder and when she exhales gently press downward, suggesting she allow her shoulders to drop downward.

Contract arm........release arm as your partner strokes down with both hands encircling your arm. Repeat on other side.

Contract back........release to firm yet gentle massage.

Contract abdominal muscles........release to effleurage. As labor intensifies she may find anything touching her abdomen irritating.

Contract leg ..........release to long stroking pressure from your partner’s hands, encircling your legs stroking down to your feet. Repeat on other side.

Visualization

Training the mind to create soothing images helps with relaxation and distraction. Examples include imagining yourself in relaxing places such as a beach, under a shade tree or watching a beautiful sunset. Try to imagine everything about this place from what you see, to what sounds you would hear and possibly what odors you might smell. Your labor partner can help if they’ve been to this place with you by describing all the details.

Relaxation

is the art of releasing muscle tension. This ability is easier for some people than it is for others. With practice and concentration everyone can learn how to relax. Relaxation during labor will help you feel less pain and stay more comfortable. Relaxation will help you save energy and reduce fatigue. You will feel more in control if you are not fighting the contractions. Relaxation will help reduce your body’s stress response. The goal is to make breathing and relaxation techniques become automatic responses to uterine contractions. Instead of becoming tense and frightened you will relax and use special breathing patterns.

There are many different ways to relax. Concentrate on those that appeal to you and work best for you. Be sure and share your favorites with your labor partner. Being able to respond to a contraction with relaxation is difficult and takes practice. To be able to relax in labor, you will need to become aware of tension in your body and practice ways of releasing tension. Practice in different positions that are comfortable to you. Use pillows to support parts of your body. Arms and legs shouldn’t be completely stretched out, they should have a gentle curve to them. This helps reduce tension. Any of the pictures shown here can be used for labor or to practice. Try to practice every day, especially during the last few weeks of your pregnancy. The ability to relax is one of the most important coping techniques because your body’s natural tendency will be to tense during contractions. Relaxation is a skill that is great to have after the pregnancy is over, it can be used throughout your life.
**Contract and Release Relaxation**

Pay attention to how muscles feel when they are tense and then relaxed. Keep your eyes open during this exercise and concentrate on a visual focal point. Contract as you inhale and release the muscle tension as you exhale.

Clench your right fist........Release
Clench your left fist........Release
Reach with your right arm........Release
Reach with your left arm..........Release
Wrinkle your forehead, scrunch up your nose........Release
Squint your eyes........Release
Clench your jaw tightly shut.......Release
Press your tongue against the roof of your mouth......Release
Press the back of your head against the pillow........Release
Bring your right shoulder to your right ear lobe........Release
Bring your left shoulder to your left ear lobe..........Release
Hold your breath for 10 counts........Release
Tense your abdominal muscles........Release
Press your right leg into the mattress....Release
Press your left leg into the mattress.......Release
Bring the toes on your right foot toward your chin.......Release
Bring the toes on your left foot toward your chin.........Release
Inventory your body. All muscles should be relaaaxxxxed.
Practice daily with labor partner giving commands.
Neuromuscular Control Exercise

This exercise contracts one group of muscles while keeping all other muscles relaxed. This is a rehearsal for labor, at which time the uterus will contract and the rest of the body should relax. While practicing the following exercise keep your eyes open and focused on a specific point to aid in your concentration. Keep your brain concentrating on breathing and relaxation. This can help tune out the discomfort. Labor partners should check for tension by gently lifting or stroking part of her body. Start by checking for tension in fingers, hands, feet and ankles. Then check the face, neck, shoulders, arms, legs and back. If the labor partner is picking up her arm to check for tension, gently pick it up supporting it at the elbow and wrist. The joints should feel loose and relaxed and the arm should feel heavy. Feel for tension in the shoulders, upper back, and neck by placing your hands over the muscles in these areas and kneading gently. If tense, the muscles feel hard; if relaxed, they feel mushy. To check for tension in her legs, place one hand under the knee and the other under her calf, just above her ankle. Slowly lift the leg a few inches. The leg should feel heavy and not offer any resistance. Gently set her leg down. Check for relaxation in her ankles by moving her foot slowly in a circle. Gently, but firmly massage her thigh and calf muscles. Again they will feel hard if they are tense and mushy if they are relaxed.

Labor partners need to give the mother instructions on which muscle groups to tense and then check the other parts of her body for relaxation. Labor partners should not touch the contracted part of her body only the parts that are suppose to be relaxed. Your labor partners touch and voice should be associated with relaxation. If she is tense where she should be relaxed use your voice and massage to help her relax.

Contract your right arm. Take a relaxation breath. Concentrate on releasing all other muscles. Release your left hand, lower and upper left arm, shoulder, neck, throat, mouth, eyes, forehead, abdominal muscles, pelvic floor, both feet and legs. Release your right arm. Take a relaxation breath.

| Contract your left arm. | Release |
| Contract your right leg. | Release |
| Contract your left leg. | Release |
| Contract your jaws. | Release |
| Contract your right arm and leg. | Release |
| Contract your left arm and leg. | Release |
| Contract your left arm and right leg | Release |
| Contract your right arm and left leg. | Release |
| Contract both arms. | Release |
| Contract both legs. | Release |

Labor partners should skip around in giving your commands to contract different muscle groups so your partner does not anticipate your commands.

The mother’s job is to ignore the contracted part of her body and focus all her attention on relaxing the rest of her body. In labor she will relax her entire body while her uterus contracts.
Complete Relaxation

1. Settle into a comfortable relaxation position.
2. Take two or three slow deep breaths, inhaling through your nose and exhaling through your mouth.
3. Close your eyes. Contract all the facial muscles. Try to move all the facial muscles toward the nose and feel the tightness. Hold for five seconds. Release. Breathe.
5. Make fists with the hands and tighten the arms. Tighten harder as you raise them a few inches. Hold for five seconds. Release. Breathe.
9. Push your heels away from the body by pointing the toes toward the knees as you feel the tightness. Hold for five seconds. Release. Breathe.
10. Open your mouth wide as you inhale and sigh out the breath, aaaaahh. Repeat 5 times.
11. Focus your concentration on your facial muscles and feel the forehead and eyebrow area go limp. Let go of that area even more.
12. Mentally focus on your eyes. Relax them.
13. Feel your jaw muscles and cheek muscles let go. Feel the looseness. Separate your teeth and let the tongue fall back slightly into your mouth. Feel the muscles in the mouth area letting go.
14. Feel your nostrils, ears, and scalp relaxing.
15. Let all expression melt from your face. Feel it go limp.
16. Relax the neck, the front, the sides, the back.
17. Feel your shoulders letting go, the right shoulder, the left shoulder, the space in-between.
18. Feel your upper arms, elbows, and lower arms relaxing.
19. Feel your fingers opening slightly and releasing.
20. Feel your chest and back going limp. Feel the top half of your body completely relaxed and loose.

21. Relax the tummy area to give the baby more room. Feel the inner abdominal muscles letting go.

22. Feel your buttocks going limp, letting go.

23. Focus in on the birth canal area and feel it loose and relaxed.

24. Feel your thighs, hips, knees, calves and ankles going limp.

25. Feel your feet letting go. Let your toes relax one by one.

26. Take a moment or two to check your body over for further tension.

27. Feel yourself sinking into the floor or bed. Let go. Give up. Feel a sense of looseness enveloping you.

28. Feel the tensions draining out of your fingers and toes. Imagine a flow of tensions, tiredness, troubles, fears, anxieties and aches leaving your body as you open all the muscles.

29. Let your breathing settle down to a comfortable rate as you sink into the blissful feeling of complete relaxation.

30. Try to keep your mental awareness on your baby as you relax for 10-20 minutes.

31. When coming out of complete relaxation take your time.

32. First focus your awareness on how your body feels. Become aware of your hands and legs. Move your fingers slowly, then your toes, then begin to stretch and slowly open eyes.

33. You should feel revitalized and re-energized after your practice.
Active Progressive Relaxation

Assume a comfortable position, make sure all limbs are supported and slightly bent. Allow your eyes to close. Start to become aware of your breathing, slowing down and relaxing more on each exhaled breath. Continue to breathe in and out slowly, listening to the music as you gradually become more relaxed. Throughout the exercise, continue doing slow, easy breathing. Allow yourself to release tension as you exhale (breathe out). Tell yourself “I feel quiet; my mind is quiet; my thoughts turn inward and I am at ease”.

Begin by wrinkling your forehead, lifting your eyebrows as high as you can. Hold and feel the tension for a few seconds and now release. Let the tension melt away from your forehead and scalp.

Close your eyes tightly and wrinkle your nose. Hold and feel the tension for a few seconds and now release, letting your mouth open slightly as you sigh away the tension when you exhale.

Clench your teeth, tightening your jaw. Hold for a few seconds. Recognize the tension and now release, letting your mouth open slightly as you sigh away the tension when you exhale.

Tilt your head toward your chest, tensing your neck muscles. Hold the tension and now relax those muscles. Letting the tension drain away.

Now tilt your head backward, tightening the back muscles of your neck, hold, feel the tension, and now relax those muscles. Let the tension drain away. Note how pleasant the muscles feel in the relaxed state.

Shrug your shoulders toward your ears. Hold and feel the tension; and now relax letting the knots in your shoulders dissolve away.

Clench your right fist tightly and feel the tension move up your hand, to your arm and shoulder; hold the tension, taking time to recognize how those muscles feel when they are tense, and now release the tension allowing relaxed sensations to flood your arm with warmth. REPEAT WITH LEFT FIST.

Arch your back. Hold and feel the tension. Now, let all the tension evaporate as you exhale slowly and deeply.

Tighten your abdomen; hold and feel the tension and now relax the muscles, allowing warmth to replace the tightness.

Tense your bottom (buttocks); hold the tension and now release.

Pull the toes of your right foot up toward your face, tightening your foot, calf and thigh; hold and acknowledge the tension. Now release the muscles and allow the warmth to spread throughout your leg and foot. The muscles feel smooth and peaceful. REPEAT WITH LEFT FOOT.

Continue to breathe slowly and evenly. Search your body for any area that still feels tight or uncomfortable - tell yourself, “when I feel tense, I will take a deep relaxation breath in and I will sigh away my tension as I exhale”

Take time to enjoy this relaxed state, noting the warm soothing sensations in your muscles now that you have let go of all tension. Enjoy the good feelings of relaxation.

Gradually begin to move your arms and legs. Open your eyes and sit up when you are ready.

J. Janke RN, DNSc From 1994 ICEA Convention
Passive Progressive Relaxation

Find a comfortable position. Begin by focusing on your breathing, slowing down and relaxing more on each exhaled breath. Notice how slow, rhythmic breathing helps you become more relaxed...Let your body breathe according to its natural rhythm.

Now take in a deep relaxing breath; feel your lungs expand and fill up with fresh air; as you exhale, let the tension flow out of your body with a sigh. This is the message to your body that you are entering a state of relaxation. Whenever you take this breath, your body will get the message to relax. Take 3 more of these breaths, allowing your body to become more and more relaxed with each exhalation.

Return to your slow and even breathing and while doing so, allow your eyelids to close and enjoy the relaxing sensations around your eyes.

Allow this relaxed feeling to spread to your forehead, your scalp and your mouth. Relax your jaw; allow remaining tension in your face to flow away with your next exhalation.

As you continue to breathe slowly and rhythmically, release the muscles in your neck and allow the warm feelings of relaxation to radiate down to your shoulders. Feel the soothing sensations as you let the muscles un-knot and relax.

Next let the relaxation flow down your upper arms, to your elbows, your forearms, your wrists, and your hands. Take a moment to relax each finger. As your arms, hands and fingers become soft and loose, enjoy the warm and soothing sensations that are your body’s way of showing relaxation.

Continue breathing slowly and rhythmically; with your next exhalation let the feeling of warmth and relaxation extend down your chest and abdomen, radiate around your sides and ribs, and flow down your back.

Allow the flow of warmth to extend down to your backside, around your hips and between your legs.

Feel the warm soothing sensations continue down to your thighs, your calves, your ankles, your feet, and your toes.

Remember to breathe slowly and rhythmically, enjoying the feeling of release, letting go a little more each time you breathe out.

Now that you are relaxed, check to see if any tension remains; if any part of your body isn’t fully relaxed and comfortable, simply take a breath in and send healing, nourishing oxygen to that area to release the tension and allow it to melt away with your next exhaled breath. As you breathe out, imagine that you are sighing away the tension, pain, worry, or discomfort.

Now take five deep relaxation breaths (at your own pace); with each one, allow yourself to become twice as relaxed as you were before. Tell yourself “I can reach a deep state of relaxation, whenever I wish, simply by taking the relaxation breath.”

Once fully relaxed, take a moment to enjoy the good feeling, experiencing warmth and well being throughout your body.

Conclude this exercise by taking in a deep relaxing breath and as you exhale feel energized, with a powerful sense of well-being and comfort.

J. Janke RN, DNSc  From 1994 ICEA Convention
Relaxation Using Visual Imagery

Take a deep breath, as you exhale let your eyes close, or if you’d rather, let them focus softly on nothing - just a blur - so you have no visual stimuli.

Now let your awareness follow my voice, and continue breathing softly and deeply.

Start by placing your awareness in your feet. Feel your feet, and feel the tension that is generated and stored in your feet. You probably weren’t aware of it. As you become aware of it, imagine all the tension can turn to water and drain out through the bottom of your feet.

Now bring your awareness up through your ankles into your calves. Feel your calves and feel the tension that’s been stored in your calves, probably without your ever being aware of it. Bring your awareness on up into your thighs. As this tension comes into your awareness, just pretend that all the tension simply turns to water and drains down through your knees, calves, ankles, and out through the bottom of your feet.

Now bring your awareness up through your hips and into your pelvis, abdomen, and lower back. Feel and experience the tension that’s generated and stored in this part of your body. As you become aware of this tension - again - imagine that it is all turning to water and draining down through your hips, down through your thighs, through your knees, your calves, your ankles, and out through the bottom of your feet.

Now bring your awareness up through your chest and upper back. Let yourself get in touch with the tension stored there, and as you begin to experience this tension, see - in your mind’s eye - all this tension turning to water and draining down through your abdomen, hips, thighs, knees, calves, ankles, and out through the bottom of your feet.

Now put your awareness in your fingers and hands, up through your wrists and forearms, and on up through your elbows and upper arms. Experience all the tension that’s stored there. Now, as you become aware of this tension, draw it all upward to join the tension in your shoulders - let it all turn to water, and drain down through your chest, abdomen, hips, thighs, knees, ankles and out through the bottom of your feet.

Now bring your awareness into your head. Feel the tension across your forehead and around your eyes, in your tongue, and especially in your jaw, and across the top and back of your head. As you get in touch with this tension, let it turn to water and drain down through your neck, chest, abdomen, hips, thighs, knees, calves, ankles, and out through the bottom of your feet.

Continue breathing softly and deeply. Each time you breathe out, imagine that any tension that’s left turns to water and drains out through the bottom of your feet.

Now - feeling a sense of relaxation - imagine that you are in one of your favorite places - outdoors. The sun is shining and it is warm, but not hot. It is soothingly, comfortably warm. Feel the warmth of the sun on your head and neck and shoulders. Now feel the warmth of the sun on your chest and back, then on your arms, legs and feet. As you breathe in, breathe in sunshine, warmth and energy. As you breathe out, feel any remaining tension flow out through your feet. Continue to be aware of your breathing for a few more minutes while you breathe in sunshine, and breathe out tension.
Conscious Breathing and Relaxation

Close your eyes and yawn, and now begin to be aware of each breath you take, focusing on each exhalation, and see if you can feel your body grow heavy each time you let your breath out. That's right.

* Feel as though your breath is on a wheel with one breath just flowing into the next breath.

* Each time you exhale think of releasing tension and fatigue — just breathe it out.

* As you inhale, breathe in new energy, replenishing yourself with a new supply of oxygen.

* As you exhale:
  Feel your eyes sink deeply back.
  Feel the space between your eyebrows widen.
  Feel your jaw drop down with your mouth slightly parted.
  Feel your shoulders drop down.
  Feel all the muscles in your arms go heavy.
  Feel all the muscles in your chest, abdomen release.
  Feel all the muscles in your back, hips, buttocks release.
  Feel all the muscles in your pelvic floor release.
  Feel all the muscles in your legs, feet and toes release.

Instead of telling your partner to relax, use words, phrases and images that imply relaxation, such as:

* See if you can allow your body to grow warm, soft and heavy.

* Allow your body to go limp like a floppy rag doll.

* Feel the full weight of your body by letting it sink into the chair, bed, floor, etc.

* Allow this tension to drain away as water soaks into the dry earth.

* Let the space between your eyebrows widen.

* Feel your shoulders and jaw drop down.

From Partners in Birth by Kathy Cain
The Special Place

In this imagery exercise you create your own personal inner sanctuary, a place of retreat, peace, comfort and security.

After practicing The Special Place a few times, you will be able to imagine yourself in this peaceful place whenever you want.

With two or three weeks of regular practice, you will automatically associate your private sanctuary with deep relaxation and a sense of peace. You can then use The Special Place as a way to relax body and mind - now, during pregnancy, and later, during labor. In addition to bringing about a deep state of mind/body relaxation, recalling The Special Place during labor will help you draw on inner reserves of strength.

Get into a comfortable position and relax.

Breathe deeply and rhythmically.

Imagine each breath you take in as bringing health-giving life energy and each breath you let out as carrying tension away.

Continue breathing this way for a minute or so and feel yourself entering a more peaceful, relaxed state of mind and body.

Now imagine that you are in a special place that is peaceful and makes you feel secure and comfortable. It can be any place at all, real or imaginary: a favorite room; a beautiful natural setting; in a meadow; near a bubbling brook; or by the ocean - anywhere you feel completely safe and comfortable.

Let the details of this Special Place unfold. (You may want to add the following suggestions: “cool, warm, colors you see, sitting, walking, lying down, is someone with you?”)

Acknowledge that this is your place. No one can enter without your invitation.

Take a few minutes to explore this place and enjoy it.

You can return here at any time and feel peaceful and completely relaxed.

Take a deep breath and when you are ready, count slowly to five open your eyes.

Breathing techniques enhance relaxation, and relaxation is the most important coping tool. By using breathing techniques during labor you will be better able to decrease physical discomfort and emotionally stay on top of each contraction. By concentrating on a specific breathing pattern you redirect your thought processes in your brain. You learn to focus attention on a positive response, breathing and relaxation, and away from the sensations of the contraction.

Breathing techniques also assure your body proper oxygenation during labor and provides your baby better oxygenation. In the unprepared individual, respiratory rates change in response to pain. Breathing may quicken and become shallow, rapid and heavy, or breath holding may occur. In labor, these responses interfere with proper oxygenation of the uterine muscle. Oxygen is the fuel for your working muscles. If the uterus continues to work with an inadequate amount of oxygen, lactic acid builds up, which in turn increases pain in uterine muscle. Paced breathing will also prevent hyperventilation in labor.

### Breathing Basics

1. **RELAX ENTIRE BODY**
   a. Relaxation is the most important labor tool
   b. Comfortable position necessary, ideally no two body parts touching
   c. Practice breathing techniques after relaxation

2. **RELAXATION BREATH**
   a. Signal to labor partner contraction is beginning
   b. Signal to laboring woman to completely relax
   c. Increases oxygen supply
   d. Sets boundaries of contraction, begin and end each contraction with a relaxation breath
   e. Release tension as you exhale
   f. Deep breathe, ideally in through the nose and out through the mouth
   g. The relaxation breath should be effortless and as deep as is comfortable

3. **CONCENTRATION**
   a. Concentrate on relaxing
   b. Concentrate on the evenness of your breathing to prevent hyperventilation
   c. Concentrate on rhythm of breathing
   d. Concentrate on a focal point. It may be visual, choose something bright and close by (approximately 3 feet away). You can use an internal focal point, such as a vivid picture in your mind of a relaxing, safe place. You may want to use an auditory focal point, playing your favorite music or music that helps you relax. A tactile focal point such as stroking, massage, or warm packs may also be used.
4. LABOR PARTNERS
   a. Labor partners should give actual instructions for practice, “Contraction begins.....Contraction over.” The pregnant woman learns to respond to this verbal cue with relaxation and breathing patterns, then in labor, the woman responds in the same way to the contraction.
   b. Labor partners should give commands to release tension in specific areas the labor partner notes to be tense, for example, “Release the tension in your hands.....Release the tension in your shoulders.”
   c. Talk the laboring woman through her contractions. Your voice will be reassuring. Saying things like “Your contraction has peaked”......or.......”Your contraction is on the downhill side,” helps break the contraction into manageable segments.

No one specific breathing pattern has to be used at a specific time during labor. Use the ones that work best for you. Practice all breathing techniques. If you become skilled with each breathing technique, then you will be able to choose the one that works best for you in labor.

Practice Aids

1. Practice breathing through contractions lasting 60 to 90 seconds.
2. Vary your position when practicing, try lying on side, standing, sitting, rocking chair etc.
3. Try effleurage with slow paced breathing and modified paced breathing.
4. If you are dizzy, you are breathing too fast, cup your hands and breathe into them.
5. Practice with Braxton Hicks contractions.
6. It is best if you take time out to practice relaxation and breathing with your labor partner daily. Other good times to practice the breathing techniques are during commercials on TV and when you go to the bathroom.
**EARLY LABOR**

### What is Happening

1. Cervix is effacing
2. Dilation of cervix 0-4cm
3. Contractions:
   - Intensity: light
   - Length: 30-60 seconds
   - Frequency: 5-20 minutes
4. May have bloody show
5. Membranes may rupture
6. Contractions become longer, stronger and closer

### Actions

1. Do nothing as long as possible, use distraction then use relaxation during contractions and when that is no longer effective, start using breathing techniques.
2. Try different positions
3. Call doctor as instructed
4. Walk as long as possible
5. Use effleurage

### Feelings and Behavior

1. Excited, thoughts center on labor, self, body
2. May be talkative or quiet

### Labor Partner

1. Time contractions
2. Time their frequency
3. Check for relaxation
   - hands open
   - jaw relaxed
4. Offer diversion
5. Give support and encouragement

### Slow Paced Breathing

1. Contraction begins
2. Take relaxation breath
3. Release tension
4. Slow, even breathing
5. Contraction ends
6. Relaxation breath

### Helpful Aids

1. Count, in, 2, 3, 4 - on inhalation
   out, 2, 3, 4 - on exhalation
2. Visualization - Breathing in a continuous circle, up one side of circle on inhalation,
   down opposite side on exhalation.
3. Repetition of words - rhythmical phrases
   - Inhale - Breathe in oxygen
   - Exhale - Breathe out tension
   - Inhale - Think “Energy in”
   - Exhale - “Tension out”
   - Inhale - “I am safe”
   - Exhale - “I am sound”
   - Inhale - “I love my baby”
   - Exhale - “I want my baby”
What is Happening

1. Dilatation continuing 4-8 cm
2. Contractions:
   - Intensity - strong
   - Length - 45-90 seconds
   - Frequency - 2-5 minutes

Actions

1. Do not eat solid food
2. Change position frequently
3. Empty bladder every 1 to 2 hours
4. Concentrate - release tension during contractions
5. Anticipate and work with contractions
6. Walk if possible

Feelings and Behavior

1. Mom less talkative and social
2. Serious - Total attention in work of labor

Labor Partner

1. Provide direction in relaxation and breathing pattern. Keep slow and even.
2. Protect from interruptions such as T.V. or distracting conversations
3. Comfort measures - Lamaze bag
4. Watch for tension
5. Remind to empty bladder every 2 hours
6. May have to breathe with mom at times

Modified Paced Breathing

1. Contraction begins
2. Take relaxation breath
3. Release tension
4. Start contraction with slow paced breathing (for 15-20 seconds) and then accelerate to shallow more rapid breathing, at the peak of the contraction (for approximately 20-30 seconds). As the contraction eases off breathing down (last 15-20 seconds). At the peak of the contraction breathing should be more shallow and more rapid, but no faster than 30 to 40 breaths per minute.
5. Contraction ends
6. Relaxation breath

Helpful Aids

1. Keep mouth and jaw relaxed
2. In beginning of contraction, count;
   - in 2, 3; out 2, 3 then with the peak count
   - in, out, in, out, until contraction is decreasing,
   - then slow breathing down and count; in 2, 3; out 2, 3, etc.
3. Repetition of words - Inhale Peace Exhale Quiet
   - Inhale Give Exhale Birth
4. Visualization - imagine a candle a few inches from your mouth and with every breath you cause the flame to flicker.
**What is Happening**

1. Dilation of cervix 8-10 cm
2. Contractions:
   - Intensity - strong and erratic
   - Length - 60-90 seconds
   - Frequency - 1-3 minutes
3. These contractions complete dilatation
4. This period is usually the shortest but most difficult part of labor
5. May have a premature urge to push
6. May have nausea, vomiting or trembling
7. Bloody show increases

**Actions**

1. Relax - Release tension
2. Concentrate on breathing
3. Change position
4. For premature urge to push, blow gently or “AH - WHO”
5. Concentrate on one contraction at a time
6. ACCEPT - Nothing is wrong, you are doing everything correctly. Transition is simply difficult!

**Feelings and Behavior**

1. Women in transition are extremely sensitive, frequently irritable
2. Can not problem solve effectively
3. Face flushed and hot, often perspiring
4. Sleepy, may not remember this phase
5. May have a brief moment of panic, usually brief

**Labor Partner**

1. Give firm, gentle instructions
2. Offer ice if permitted or wet mouth with cloth
3. Counter-pressure for back pain
4. Help release tension
5. Remind her of her progress. Stress almost over - soon will see baby
6. Praise efforts - Give verbal encouragement with every contraction
7. Don’t argue, woman may be irrational but don’t argue
8. Be understanding of irritability - don’t leave
9. May need to breath with her
**Patterned Paced Breathing**

1. Contraction begins
2. Relaxation breath
3. Release tension (especially pelvic floor)
4. This technique is a pattern of shallow breaths in the upper part of your chest, they can be done in two different ways:
   - **Noiseless option** - slightly accentuate the exhalation every 3rd or 4th breath. For example shallow breaths in and out 3 times and on the fourth time inhale and sigh out softly.

   ![Diagram of noiseless option]

5. Repeat pattern until contraction ends
6. Relaxation breath

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**Sound distracter option** - This helps keep fewer brain cells paying attention to the pain. Make a “hee” sound when you exhale 3 times in a row and on the fourth exhalation breathe out “who”. When using a sound distracter make a very soft, whispered sound when you exhale. Only some one very close should be able to hear the exhaled sound. Keep the mouth relaxed.

![Diagram of sound distracter option]
Helpful Aids and Variations

1. When using the noiseless option think to self on inhalation “and” on exhalation “one”
   Continue 
inhal “and” exhale “two”
   inhal “and” exhale “three”
   inhal “and” exhale “sigh”

Continue this pattern of 3 breaths to one sigh until the contraction is over.

2. This breathing can be done in complex patterns/rhythms that require intense concentration. Pyramid
   building breathing - breaths to sighs or “hees” to “whos” - 1:1, 2:1, 3:1, 4:1, 3:1, 2:1, 1:1, etc. or

3. Labor partner can signal mom with fingers or verbally the number of breaths to sighs or “hees” to “whos”.

4. To prevent you from hyperventilating, do not exaggerate sighs or “whos”. Inhale and exhale softly and equally.

5. Keep breathing slow and quiet so you don’t get dizzy.

Premature Urge to Push

Pushing before the cervix is completely dilated may cause swelling or laceration of the cervix.

1. When instructed not to push, let breath out, release all muscles, allow head and shoulders to fall back, 
inhal and blow out gently. Use quick short breaths. NO long hard blows.

2. Blow out small bursts of air, try making an “F” sound. Take in a quick breath each time before you blow 
out. Keep pattern light and as slow as possible.

urge to push is gone.

4. Using a short sequence of patterned paced breathing will help control the urge to push. For example, 
try one breath to one sigh or blow. Use quick short breaths and short gentle sighs or blows. For 
example, inhal, exhale, inhal, sigh,inhal, exhale, inhal, exhal, sigh, etc.

5. When the urge to push is gone return to the breathing pattern you were using before.
What is Happening

1. Cervix is completely dilated
2. Doctor or nurse OK pushing
3. Contractions:
   - Intensity - strong
   - Length - approximately 60 - 90 seconds
   - Frequency - 1-3 minutes
4. Bloody show increases
5. Perineal muscles stretch and thin

Actions

1. You will begin to actively bear down with abdominal muscles, along with uterine contractions, to push baby down birth canal.
2. Relax pelvic floor (Kegels down in basement)
3. Only push with contractions. If you do not feel the urge to push don’t, this is a waste of energy
4. Avoid fatigue....Relax completely between contractions.

Feelings and Behavior

1. The urge to push is an instinctive reaction to the pressure of the baby on the pelvic floor. This pressure causes an irresistible need to bear down or push.
2. Transition symptoms leave, head is clearer
3. For some, it is a relief to push
4. You will feel your perineum bulging as you push

Labor Partner

1. Assist mom in getting into pushing position
2. Remind her of breathing pattern
3. Between contractions use cool cloth, fan, massage
4. Support head and shoulders while pushing
5. GIVE CONSTANT ENCOURAGEMENT
Pushing Technique

1. To practice, sit on floor propped up against wall or couch at a 45 degree angle, pillow behind back
2. Relax thighs, slightly apart with feet on floor, relax perineum
3. Position hands behind knees, elbows pointing out, round shoulders forward in “C” position with chin toward chest
4. Rock pelvis forward by pushing lower back into pillow
5. Take two slow relaxation breaths, release the top half of your body as you exhale the first time and release the lower half of your body as you exhale the second time
6. Take a third deep breath in, let a small puff out and hold your breath. Let mouth drop open, eyes open, jaw relaxed!!!
7. For practice do not push. When in labor, while holding breath, use upper abdominal muscles to bear down.
8. Hold breath and bear down as long as you can, exhale while you continue to bear down; inhale and repeat.
9. Continue breathing and pushing in this manner until the urge to push is gone.
10. Take two relaxation breaths and rest.
**Helpful Aids**

1. When pushing think **down, out and away**

2. Think: Baby Out

3. While you push, the upper abdominal muscles are contracting but the lower ones are not. To see if you are pushing correctly, place your hand over your abdominal muscles just above the pubic bone. If your hand moves up, away from the bone when you bear down, you are doing it correctly. If your hand moves in, you are contracting the lower abdominal muscles, and pushing less effectively.

4. Relax completely between contractions.

**Physiologic or Exhalation Pushing**

1. Start in the same position for pushing as described above

2. Take two relaxation breaths

3. Take a breath in, let it out very slowly, at the same time push with your upper abdominal muscles, slowly in a controlled manner.


5. Repeat until you no longer feel the urge to push.

6. This is difficult to do in labor because you want to exhale at a faster pace.

**Pushing Positions**
Hyperventilation occurs when the balance between oxygen and carbon dioxide in your blood is upset. Hyperventilation can cause a feeling of being light-headed or dizzy, or a tingling sensation around your mouth, fingers or feet. It may be caused by breathing too deeply, too fast, or unevenly. Practicing the breathing and relaxation techniques prior to labor makes it unlikely that you will hyperventilate. If hyperventilation does occur, it can be easily corrected with the following:

- Rebreath your own air by breathing into cupped hands, a paper bag or a surgical mask.
- Hold your breath after a contraction until you feel the need to take a breath. Do not hold breath during a contraction.
- Set a slower breathing rate. Your partner can help slow the rhythm by using hand signals or breathing with you.
- Make sure “In breath = Out breath.”

Her lips and mouth are dry
- Try ice chips
- Plain unscented, unflavored chapstick
- Popsicles

Laboring Woman is having trouble focusing on breathing or relaxation.
- Change her focal point
- Breathe with her
- Suggest walking or changing position
- Ask extra people to leave the room
- Try a different breathing or relaxation technique
- Reassure and praise her

Lower abdominal pain
- Remind her to urinate frequently
- Change position
- Use effleurage on abdomen, thighs or back

She is tense in early labor
- Distract her with walk, cards, TV, music
- Try hot shower
- Rub her back
- Brush her hair

She has clenched fists
- Place your hand over hers
- Have her shake her hands
- Massage her arms and fingers

She is hot/flushed face
- Apply cold cloths to face or neck
- Offer ice chips or cold cloth
- Use a paper fan
- Lower temperature on room thermostat
**Back Pain**
- Change her position - get the pressure of the baby off her spine. Try all fours, leaning forward or side lying.
- Try pelvic tilt on all fours
- Apply heat or cold
- Apply counterpressure - use partner’s hand, rolling pin, soda can.
- Use the “junior high dance position”

**Pelvic pressure or rectal pressure**
- Let the nurse know so she can check her cervix if needed.
- Encourage her to release her bottom into the bed or chair, like Kegel’s down in the basement.

**Nausea**
- Take slow deep breaths
- Lie on left side or try sitting up
- Apply cool cloth to face or neck

**Shakes or Chills**
- Put on socks
- Try warm blankets
- Contract then release all muscles
- Try touch relaxation
- Gently flex her legs at the knees
- Hold her closely
- Massage shaking extremities

**Contractions stop**
- Walk!
- Change positions
- Try touch relaxation
- Use the break to rest
- Try a hot shower

**Leg cramps**
- Have partner place heel of affected leg in palm of his hand and use arm to gently push ball of foot toward mom’s head
- Do foot twirls
- Apply warm blankets or compresses

**The laboring woman panics**
Watch for signs of panic and try to help ahead of time when possible.

**If she is restless or moving in an agitated manner, try the following:**
- Stroke tension away with both touch and verbal signals. “Release where I touch you,” “Release to my hands”.
- Talk it away, “Uncurl your toes,” “I’ll hold your hand,” “Take a relaxation breath,”
- Have her “sigh” deeply
- Use key phrases from your “special place” to encourage relaxation
If her breathing is loud and irregular:
• Breathe with her. Start at her pace and slow her down if needed.

Loss of a focal point - eyes darting about or head moving side to side.
• Keep your face close. “Look at me”

Verbally giving up
• This is a request for help. Acknowledge her pain. Reassure her, praise her, take charge. Use as much of The Take Charge Routine as needed.

The Take Charge Routine
This is good anytime she hits an emotional low, is in despair, cries out, wants to give up and feels she can’t go on, is very tense and cannot relax or is in a great deal of pain. The Take Charge Routine is exactly that. You do all you can until she regains her inner strength.
• Remain calm. Your touch should be firm and confident. Your voice should remain calm and encouraging.
• Stay close by her side with your face near hers
• Make eye-to-eye contact. Tell her to open her eyes and look at you. Say it firmly but kindly.
• Encourage her every breath. Guide her in the patterned breathing: “Breathe with me.....BREATHE WITH ME......That’s the way........Just like that.......Good....Stay with it .....Just like that....LOOK AT ME......Stay with me....Good for you...It’s going away.....Good...Good...Now just rest. That was so good.” You can whisper these words or say them in a calm and confident tone.
• Talk to her between contractions. Ask her if what you are doing is helping. Make suggestions, for example: “With the next one, let me help you more. I want you to look at me the moment it starts. We will breathe together so it won’t get ahead of us. OK? Good you are doing so well. It won’t be long now before the baby is here.” Words of support and encouragement from you can make all the difference in the world.
• Repeat yourself. She may not be able to continue what you tell her for more than a few seconds. That’s OK, say the same things again to help her.
• What if she says she can’t or won’t go on? Don’t give up on her. This is a difficult time for her. You cannot help her if you decide she cannot handle it. Acknowledge to her this is difficult but not impossible. Ask for help and reassurance from your labor nurse or doctor. They can check dilation, give you advice, do some of the coaching, try something new, and reassure you that your partner is OK and that this is normal.
• Remind her of the baby. It may seem surprising, but laboring women are so caught up in labor that they do not think much about their baby. It may help for her to remember why she is going through all this.
• What about pain medication? Do you call for them or not? It depends on:
  1. Her prior wishes.
  2. How rapidly she is progressing and how far she still has to go.
  3. How well she responds to your more active help.
  4. Is she asking for pain medication?
  5. Talk things over with her labor nurse or doctor.

Women today have more options than ever before. The decision whether or not to have pain medication in labor, with the exception of certain emergency situations, will be yours. The choice is not always an easy one. Along with your caregiver you must weigh the benefits and possible risks. Since non-drug methods have no side effects, consider them first for coping with pain. Also, to avoid interfering with the progress of labor, often pain medication is not a choice until labor is well under way. Practicing non-drug techniques of pain control will help boost your confidence in yourself. When you are in labor is not the best time to learn about what type of pain medication is available. Familiarize yourself ahead of time with the types of pain medications, benefits and drawbacks. While it is good to be knowledgeable and have a plan prior to labor, it is also good to keep an open mind. Labor may surprise you with its intensity. Some women who had hoped to avoid pain medication change their mind once they are in labor. On the other hand, labor may not be as difficult as you anticipate and you may be surprised by your strength and ability to cope with a challenging situation.

Pain medication used in labor and birth frequently falls into two categories either systemic drugs or regional anesthetics.

**Systemic drugs** are frequently narcotics given in the IV, they affect the whole body. With IV narcotics the laboring woman stays awake. She still feels the contractions but most commonly says the drugs helped “take the edge off the contraction” and helped her relax.

**Regional anesthetics** numb the sensations in part of the body. The following are types of regional anesthetics used in labor and birth.

A local is an injection into the perineum either just before the baby’s birth or just after to numb the area for an episiotomy or stitches.

A pudendal block is done just prior to the baby’s birth or just after and numbs the vagina and perineum. An epidural block numbs the lower half of the woman’s body. They are given usually after a woman is dilated to 3 or 4 centimeters. An epidural requires the insertion of a tiny, flexible catheter into the back, just outside the spinal membrane. May be used for vaginal or cesarean births.

A spinal block is given as one shot into the fluid surrounding the spinal cord. They are used only for cesarean births.

**General anesthetic** puts the patient to sleep. Today it is used only for some cesarean births.

The following are possible advantages and disadvantages of pain medication:

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Disadvantages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can reduce pain and discomfort</td>
<td>Can directly or indirectly affect the baby</td>
</tr>
<tr>
<td>May help the mother to relax</td>
<td>Mother may experience side effects such as a drop in blood pressure, nausea, dizziness or allergic reaction</td>
</tr>
<tr>
<td>May help reduce anxiety</td>
<td>Can slow labor down, requiring pitocin to speed it up</td>
</tr>
<tr>
<td>Can, on occasion, speed up a slow labor if her tension is inhibiting progress</td>
<td>May diminish urge to push and lead to a need for forceps or vacuum extractor</td>
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<tr>
<td>Medication can help turn a difficult painful labor into a more positive experience</td>
<td>May lead to a maternal temperature and require further interventions to monitor mother and baby</td>
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<tr>
<td></td>
<td>May cause drowsiness in baby and interfere with normal newborn reflexes</td>
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