



Think It Through

an online resource
created to accompany

Pre- and Perinatal Massage Therapy:

*A Comprehensive Guide to Prenatal, Labor
and Postpartum Practice*
(Third Edition)

Carole Osborne

Michele Kolakowski

David M Lobenstine

(Handspring Publishing Ltd. 2021)

this resource links to:

Chapter 4, page 148





Think It Through

Below you'll find a list of questions that will test what you have absorbed from this chapter. Below each question are the possible answers (as you'll see, nearly all of these questions have multiple answers). All the answers are things discussed within this chapter. Read each question and try to answer, in as much detail as you can before you look further. Once you have written down your answers or said them out loud, you should compare your answer to the potential answers given below.

ANSWERS TO TEST YOURSELF--CHAPTER 4

1. Choose three of the nine primary therapeutic principles of massage therapy throughout pregnancy to explain in further detail. See page 101 for the details.
 - First, do no harm.
 - Create safe, comfortable and stable positions.
 - Prioritize autonomic sedation.
 - Communicate to find your client's preferences.
 - Respond to your client's goals.
 - Make needed variations.
 - Maintain scope of practice.
 - Collaborate with medical professionals.
 - Accommodate her changing body.
2. List some of the benefits and some of the safety concerns to carefully consider when deciding if first trimester massage therapy is



advisable for an individual person.

- Benefits: autonomic sedation effects of massage therapy may contribute to fewer negative impacts of stress in formative trimester
 - Safety concerns:
 - Is the pregnancy low-risk and proceeding normally, or does it involve medical complications or high-risk factors?
 - Is your own knowledge base sufficient and your intake process robust?
 - Do you have sufficient understanding and supports, as well as the decision-making authority, to create recommended first-trimester positioning?
 - What is your (and, if you are employed, your employer's) level of risk tolerance?
 - Would it be helpful to you or your prospective client to seek advice from her maternity healthcare provider?
3. List several typical third trimester functional changes in gait and what types of pain can result from those changes.
- External hip rotation resulting in waddling gait and strain and trigger point development in the lateral hip rotators, particularly the piriformis that may impinge the sciatic nerve creating pain in the buttocks and down the posterior leg
 - Reduced use of iliopsoas and increased reliance on the gluteus medius resulting in strain and trigger point development in the gluteus medius
 - Hormonally-induced ligament laxity creating instability in any of the weightbearing joints



4. If a complication of pregnancy were to occur, such as PIH or gestational diabetes, in which trimester is this most likely to occur?
Third trimester

5. List the uterine ligaments and when they are most likely to have the greatest strain during pregnancy.
 - First: none
 - Second: round
 - Third: sacrouterine and broad

6. List three techniques from those taught in this chapter that have good potential for relieving strain/pain to the uterine ligaments.
 - Structural Balance Education
 - Lumbosacral Joint Decompression
 - Pelvic Alignment Education
 - Lumbar Lengthening
 - Lateral Pelvis Deep Tissue Sculpting
 - Anterior Hip Deep Tissue Sculpting
 - Baby Lift (online technique)

7. What communications with your client should be a standard part of every session throughout her pregnancy?
 - an update on what she has been experiencing
 - what her most recent prenatal healthcare visits revealed
 - what she currently hopes to gain from her session with you



8. When you need to massage a pregnant client's back, what position on a massage therapy table usually allows best access as well as comfortable and safest in every trimester?

Sidelying

9. Despite the strain to and importance of the iliopsoas in maintaining optimal postural integrity, why is direct massage of this muscle not recommended?
- Potential for irritating the uterus with deep, pointed abdominal pressure
 - Potential for disturbing blood clots if working to the depth of the lower fibers in the inguinal area and lesser trochanter attachments
10. List some of the techniques taught in this chapter that have good potential to address the iliopsoas muscle without the dangers of direct pressure to it discussed above.
- Structural Balance Education
 - Pelvic Alignment Education
 - Lumbar Lengthening
 - Lumbosacral Joint Decompression
 - Anterior Hip Deep Tissue Sculpting
 - Pelvic Girdle Decompressions
 - Paravertebral Deep Tissue Sculpting