# Lamaze Breathing

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During labor, emotional stress and pain may negatively impact the physiologic process of contraction, and interfere with labor progression. In cases of women who have fear regarding birthing pain and complications, cesarean delivery is preferred over vaginal deliver. Labor pain management is important in reducing the rate of increased elective cesarean section Over the decades the world of birth has been changed. The routine use of intrventions increased, and the cesarean rate has skyrocketed. But there are some positive changes. We now have a better undearstanding of the physiology of natural labor and birth, and how interfering in the physiology process without a clear medical indication increases risk for mother and baby.

We learned about the hormonal orchestration of labor, the role of stress hormones, and the relationship between breathing, relaxation, and catecholamine release. This knowledge reaffirmed that controlled breathing enhances relaxation and the relaxation decreases stress hormone levels, especially important early in labor., Instruction on breathing during dillataion is based on physiology, aimed at boosting oxygenation to both the mother and the baby;increasing relaxation; raising confidence; and decreasing discomfort, pain and anxiety, thereby keeping the mother calm and satisfied with the labor process

Based on Listening to Mothers | survey49% of women who used breathing techniques in labor, but all of the supportive sterategies women used in labor, women rated breathing as least helpful. However the strategies they rated most helpful (immersion in a tub, massage, birth ball, and shower) are those that are least available. Controlled breathing is most effective when used with other comfort sterategies. Controlled breathing helps women become more aware . more attentive, more alert, aimd more focused.

The isolated use of breathing techniques may not be enough to alleviate labor pain, reinforcing the evidence that pain control can achieved using a tThe isolated use of breathing techniques may not be enough to alleviate labor pain, reinforcing the evidence that pain control can achieved using a therapeutic procedure without medication as a strategy involving several methods. These are all good things in laborherapeutic procedure without medication as a strategy involving several methods. These are all good things in labor

Lamaze Method was introduced to the united States BY Marjorie Karmel who had her first baby in France with Dr. Fernad Lamaze.Lamaze method is about conscious relaxation and controlled breathing to manage the pain of contractions, avoiding the need for drugs.actually Lamaze mothers are able to give birth "awake and aware."

Although Lamaze breathing is quite different from the breathing techniques introduced in 1960s, conscious breathing and relaxation are not outdated Lamaze traditions, but valuable, evidence based strategies to manage pain and facilitate labor showes that Lamaze brething today, unlike 50 years ago, is one of many ways that women now have to manage contractions, to facilitate the physiologic process of labor, and to give birth with confidence.

Every pregnant woman should be traind about breathing techniques during pregnancy, especially in laet 6 weeks, 10-15 minutes per day exercices with a trained midwife is necessary.while using all of these methods a symbole(it can be inner or outer point such as a nice picture) can be used for better concentration.

# **First Stage** Paced Breathing Technique(Hoot-Hut)



Fill lungs with a deep breath and exhale When contraction begins, take 7-10 deep breaths in a minute. Using hands stroke the lower abdomen upwards and when you exhale let your hands move downwards. The slight massaginf of uterus helps with the contractions. When the contraction is gone, breath normally.

Conscious, slow, deep breathing was already recomended to increase relaxation and pain during labor and can control stress.the patient is instructed to inhale slowly, count from 1 to 5 and breath out gradually, count from 5 to 1. This inspiratory phase is not stimulated to full lung capacity; ther is inspiratory reserve volume.In post-exhalation pause, the patient is instructed to to take a deep breath and increase the postexhalation pause (1 to 2 seconds). This pattern is used mainly when contraction are strong.

- After cervix is dilated more than 5 cm, the contractions intensify and using the modified paced breathing is more effective. As the intensity increase, lighten your brething by taking shallow breath at the rate of one breathat the rate of one breath per second.
- Take a 1-2 deep relaxing breath

**)** .

- When the contraction begins, start with light breaths and increase the frequency as the contraction peaks.(hoot-hut)It usually peaks around 30-45 seconds, then you can breath slower.in this step there is no need to concentrate on inhalation and exhalation, because air goes inside and outside normaly.
- After the contraction is done, breathe normally

# **Transition Phase Modified Paced Breathing** Technique

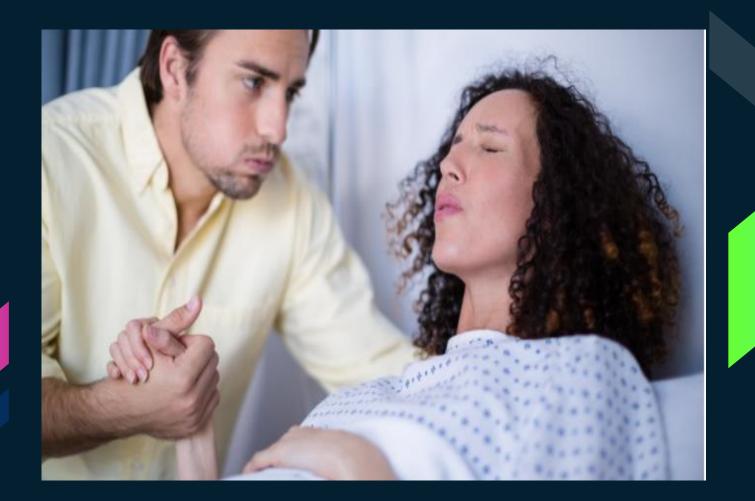


This form of controlled breathing is used when dilation is 8-10 cm .the contractions duration is about 60-90 seconds and they are really powerful. This type of controlled breathing techniques is used to stop mother from pushing when cervix is not dilated.thereby conserving her energy. Sooner pushing may lead to tearing in the cervix.

## **Second Stage**

- Variable brething
- > (Hoot-Hoot-Hoot→Hout ) ( pant-pant-blow)





In this stage breathing exercices with deep inhalation and exhalation are effective in reducing the and shortening the duratuin of the second stege of delivery .The second most intense stage of labor calls for expulsive breathing.it is used when cervix is fully dilated, otherwise it could cause tearing or other damages.

Using appropriate breathing during labor can be effective in facilitating fetal descent. The pain is localized to the lower abdomen in the second stage, and pain can be managed more effectively through brething exercices to faciliate labor. The main components of breathing exercises are as follow:at first Find a focal point or sth to focus on then

- A)fill stomach and then lungs with air while breathing
- > B)fill the expansion in the stomach
- C)make sure the muscle from your stomach to your knee are relaxed
- D)when there is pain , perform deep abdomainal breathing exercises, and take a deep breath in and hold as much as you can
- > E) try to push the baby downward
- F)you can do it by holding your breth or brething out quite slowely from your mouth
- G)you should continue the pushing until tha pain is relieved.

J breathing, down breathing, or simply cab be memorized as:

**MOO BREATHING** 

## **Maternal Satisfaction**

Personal Expectation Support from health care professional Active participation in decission making

Physical Factor

Quality of patientcaregiver relations

## **Maternal Satisfaction**

Lack of an intergroup difference in pain

anxiety

**fatigue** 





What's our Normal Reaction to Pain?

Breathing comes automatically that we don't even think about it during labor. However when pain enters the body our natural response with our breathing and response to pain is to either hold our breath or hyperventilate,

wo breathing techniques that you don't wanna use in labor

If we don't Help **Mammas to reduce** labor pain.....



# Why Breathing Is Importnt During Labor?

Maternal
Anxiety
Pelvic Spasm
Pain

In patients with respiratory intervention there is low anxiety level in both latent and active phases, and positive pain relief results during active phase labor.

# The Lamaze Six Healthy Birth Practices are based upon the most recent, evidence based research.they are 6 recommendations

Let labor begins on its own

Walk, move around and change positions throughout labor

Bring a loved one, friend or doula for continuous support

Avoid interventions that are not medically necessary

Avoid giving birth on your back and follow your body's urges to push

Keep mother and baby together; it's best for mother, baby, and breast feeding

#### Accepted Manuscript

The effectiveness of breathing patterns to control maternal anxiety during the first period of labor: A randomized controlled clinical trial

A. Boaviagem, E. Melo Junior, L. Lubambo, P. Sousa, C. Aragão, S. Albuquerque, A. Lemos

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NAVIGATING THE MAZE-Perinand Exchange

Continuing Education Module

#### Lamaze Breathing: What Every Pregnant Woman Needs to Know

Indith A. Lothian, PND, RN, LCCE, EACCE.

#### ABSTRACT

Lemace broading historically is considered the fullmark of Lamace preparation for children. This column ideases broathing in the larger coatest of concernpoury Lamace. Controlled breathing enhances often-ation and discontine precipition of pain. It is one of more continuitionally singled in Lamace aboves. In securited brething environments, breathing may be the only complarational-episal continuition transpired to women. Considers breathing and relization, especially in combination with a wide summy continuition with a wide summy continuition with a wide summy continuition with a wide summy continuition.

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#### • Research Article

## Effectiveness of breathing exercises during the second stage of labor on labor pain and duration: a randomized controlled trial

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#### ABSTRACT

BACKGROUND: Some research exists on the effect of non-pharmacological approaches for labor pain relief. However, there is limited information about effectiveness of breathing exercises in pregnant women to reduce material pain during labor.

OBJECTIVE: To determine whether breathing exercises for pregnant women during the second stage of labor have beneficial effects on maternal pain, duration of labor, and the first-minute Appearance, Pulse, Grimace, Activity and Respiration (APARI) scores.

DESIGN, SETTING, PARTICIPANTS AND INTERVENTIONS: This randomized clinical trial involved 250 pregnant women, who were randomly divided into loss groups: intervention group (GC, n = 125), IG received one session breathing exercise training and performed breathing exercises training and performed breathing exercises training and performed breathing exercises.

MAIN OUTCOME MEASURES: The effects of breathing exercises on maternal pain were determined by Visual Analogue Scale (WAS), duration of the second stage of labor, and the first-minute APGAR scores.

RESULTS: The mean age of the participants was (23.2 ± 4.2) (range: 18 to 42) years. Both IG and GG had similar basisting characteristics in terms of age, education invert, occupation, and enoking (2+ 0.06). The mean VMS scores of VG and CG weet (88.2 ± 6.3) and (90.5 ± 7.0), respectively (2+ 0.001). The duration of the control of VG and CG weet (88.2 ± 6.3) and (90.5 ± 7.0), respectively (2+ 0.001). The duration of the control of VG and VG weet (8.2 ± 0.3) and (90.5 ± 7.0) and (90.5 ± 7.0). The result of the control of VG and VG

CONCLUSION: Based on this study, breathing exercises with deep inhalation and exhalation in pregnant women are effective in reducing the perceptions of the perception of the

management and shortening the duration of TRIAL REGISTRATION: This study is regis

with the number of NCT03066973.

Keywords: breathing exercise; labor pair

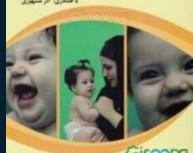
: Yuksel H. Cayir Y, Kosan Z, Tasta in labor pain and duration: a random

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### **آمادگی برای زایمان** و روش های **کاهش درد غیر دارویی**

(راهنمای پزشکان و ماماها)

موافده شپهتاز ترک زهرانی حمومیت طبر باشکاه خود پرندار شهد پستر







## THANKS!

## **Any questions?**

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