



HOMEOPATHIC REMEDIES FOR CHILDBIRTH

Before birth – To prepare the mother and baby for the optimum experience:

1. Constitutional homeopathic treatment.
2. Yoga and swimming (until the last week). And pelvic floor exercises!
3. Eat healthy organic food.
4. Any problems/worries should be talked through with partner immediately.
5. Make a birth plan. See 'Who's having your baby?' by Beverley Beech.
6. To avoid occipito-posterior labour ('back to back' ie. baby's spine facing your spine), from 36 weeks it is important to adopt positions daily, eg. in 20 minute sessions, which encourage gravity to swing the baby's back to the front. This can be achieved easily whilst reading the paper or watching TV by leaning forward eg. Over a large beanbag or birthing ball, or crawling around the floor on your hands and knees. Spending time on a sofa with knees higher than the hips predisposes the baby's back to lie in the posterior position and should be avoided. If the baby is in the 'back to back' position during labour, try **Kali Carb 200c** (see page 5) to encourage the baby to turn.
7. From 36 weeks drinking Raspberry Leaf Tea daily increases uterine tone helping make uterine contractions more efficient when labour starts.

To Initiate Labour

A first baby is often at least two weeks late. Don't panic or let others decide when the baby will come. It will come when it is ready.

If you need to initiate labour:

1. Take a long walk.
2. Clean the house/make soup/do some kind of activity in the house.
3. Nipple stimulation.
4. Watch a sexy movie.
5. Make love. Prostaglandin in semen will help contractions. With a pillow under the thighs, let semen bathe the cervix for as long as possible.
6. Eat a whole fresh pineapple.
7. If you are not used to strong curry, eat one now. As it rushes through the bowel, the uterus is irritated, and it can set things in motion.



8. Get your partner to give you a foot massage, paying particular attention to the Shiatsu point of the cervix which is situated on the base of the heel (see diagram on next page).



9. If the baby is in breech position (bottom down) to turn it around use **Pulsatilla 1M** one dose.
10. If you have to go to hospital and they want to induce you, ask the midwife for a 'Cervical Sweep' morning, evening and morning (about as uncomfortable as a smear test) before induction.
11. If you are still pregnant at 39 weeks you may take **Caulophyllum 30c** x 1 daily until labour starts. This remedy ripens the cervix.
12. If you are overdue and feel that labour is delayed due to fear or anxiety consider a single dose of the following remedies:
Aconite 200c – marked fear, including fear of dying during labour.
Gelsemium 200c – It is almost as if the woman is holding back the process with her emotional state of anxiety about how she will manage ie. Waters may have broken and then labour may have started but then stopped.

During Labour

1. Snack every 2 hours, or as and when desired. Mother needs to keep energy and blood sugar up. If blood sugar is low, when you have the baby, you won't be able to meet the incredible hormonal energy surge just afterwards. Every 2 hours take 2 tablespoons of either:
 - a. Lentil soup with some bread in it.
 - b. Fresh juice (or herbal tea) with honey.
 - c. Small pieces of fruits (frozen grapes are excellent).

NB. If you have more than 2 tablespoons it will be a problem as the body in labour needs to keep a relatively empty stomach; large amounts of drink/food make induce vomiting.



2. Encourage the mother to withdraw into herself. Respect and help her do this by limiting activities/talk around her.
3. To assist in this process synchronise breathing of everyone present with the mother's breathing and the contractions.
4. Mother should take **Arnica 200c** every 2-4 hours once the labour is well established. In labour you are using muscles you do not normally use and this will give the muscles a boost. Arnica is also a prophylactic against formation of pus. It helps eliminate puerperal fever (from retention of placenta). It also helps with bruising of mother and helps her relax. It can work like oxytocin. It also helps the baby when on its journey down the birth canal.
5. The mouth can become very dry in labour. Dissolve the Arnica in filtered/spring water, take one teaspoon of the water at a time as 1 dose.
6. Mother should be encouraged to pass urine every two hours; a full bladder can stop the baby's head crowning and cause trauma to the bladder.
7. Everyone else there should have Rescue Remedy! [this can be purchased from Boots, Holland & Barrett and other good health food stores]

General Rules about Homeopathic Doses:

- * Take 1 dose (1 pill) of the required remedy.
- * **Do not touch with hands – use a clean spoon to remove from packet or tip a remedy directly into the bottle lid and then tip into mouth.**
- * If possible avoid food/drink 10 mins before and after taking a remedy.
- * **Allow to dissolve under the tongue.**
- * Do NOT take a second dose if you get a good reaction from the first.
- * **ONLY repeat when/if symptoms continue or return.**



Remedies to aid effective and **Rhythmic Contractions:**

Pulsatilla: Aids onset of contractions when they are intermittent. Apprehensive, needs lots of reassurance, weepy, apologetic, changeable moods. May easily get hot during labour and want fresh air. Giving up, can't take any more. Invites all her friends to attend, wants candles, someone to rub her feet.

Dose: Pulsatilla 200c every 30 minutes for up to 3 doses.

Caulophyllum: A hesitant labour where contractions are ineffective and the woman is showing signs of nervous exhaustion. Caulophyllum works on the lower uterine muscle and helps cervix to dilate. If contractions are coming on regularly eg. Every 3-5 minutes but they are not gaining strength or momentum (ie. When the cervix remains unchanged in dilation). Or contractions can be spasmodic, changeable in location, flying from one place to another and the cervix feels like needles pricking. Wants fresh air and there may be shaking (Gelsemium)

- Or, if labour stops.
- Nervous women, pain seems to be insupportable, she can scarcely speak at times. Fretful. Thirsty. Very sensitive to cold.

Dose: Caulophyllum 200c every 30 minutes for up to 3 doses.

Cimicifuga: A sense of foreboding and fragmented thought, or a history of painful/difficult past obstetric experiences, alongside weak, irregular contractions. Hysteria, sighing and tearful. Cramps in the hips. Pains go from hip to hip. Any distraction, the contractions 'piddle out'. Has the chills (Caulophyllum and Gelsemium: shaking). When she gets the chills, the contractions start coming. When the chills stop, the contractions stop. Pains cause her to double over. Very excitable, very loquacious. Restless, talking through the contractions. Big sighs every time she hears there is no progress. Threatens other people. Constantly complaining.

Dose: Cimicifuga 200c every 30 minutes for up to 3 doses.



Cocculus: Vomiting in labour (vomiting/bowel motion & feeling very sleepy can be an indication she is fully dilated & transition is coming)

Dose: Cocculus 200c one dose.

Ipecacuanha: Vomiting as a side effect of Pethidine.

Dose: Ipecacuanha 200c every 30 mins for up to 3 doses.

Gelsemium: Nervous apprehension. Cervix usually undilated. Relaxation and weakness of the uterus, causing weak, ineffectual contractions. May be drowsy & lethargic and completely fagged out. Pain or a chill in the loins and back. Lots of shaking and trembling. No thirst. Quite often useful in early labour when there are chills, back pain, shaking & weakness all over. Hands and legs are the weakest part. Heavy eyelids. Good for posterior position babies.

Dose: Gelsemium 200c every 30 minutes for up to 3 doses.

Kali Carb: This is the first remedy to try if you have an occipito-posterior labour ('back to back' presentation during labour). Other indications are weakness & exhaustion from contractions, resulting in not enough push for continuing labour. Main remedy for backache labour. Sharp, stitching pains in the back. Pains extend down the buttocks. Want to be in the bent forward position. Wants back pressed hard or rubbed. Chilly.

Dose: Kali Carb 200c every 30 mins for up to 3 doses.

Kali Phos: Complete collapse and exhaustion during labour. Can't go on and contractions stop.

Dose: Kali Phos 200c every 30 mins for up to 3 doses.

Natrum Mur: This woman will feel inhibited by lack of privacy & may be unable to get on with the work of labour while strangers are present or likely to enter the room. Closes up emotionally in labour. Become tight. Unhappy about having to go through all this physical pain. Labour won't start, has to have waters broken, already exhausted. Headache at start of labour. If anyone comes into the room, contractions become more feeble. Thirsty for large gulps. If midwife is pushing her, becomes very hurt by this. Possibly had a lot of attention & gifts in pregnancy & doesn't want it to end. She knows it's going to change but is already feeling grief of not having baby move inside her.

Dose: Nat Mur 200c every 30 minutes for up to 3 doses.



Nux Vomica: Frequent urge to urinate and defecate in labour. Excessively painful and spasmodic (even violent) contractions which can entirely or nearly cease. Pain goes through to the rectum. Can get cramps in the legs. Very chilly. Very irritable. Sensitive to odours, noise or talking.

Dose: Nux Vomica 200c every 30 minutes for up to 3 doses.

Opium: Terror, frightened, the contractions scare her. Everything stops due to fright. Hazy look in her eyes, looks spacey. Has feeling psychic and physical body are detached, floating. Baby is moving violently and this scares her too. As labour is progressing and nothing is happening, she is frightened of having a caesarean. No bowel motion.

Dose: Opium 200c every 30 minutes for up to 3 doses.

Secale: For women who have had lots of babies, shrivelled with no muscle tone. Feel bearing down the uterus. Contractions are irregular: ie. every 5 minutes, then every 15 minutes. Body not secreting enough oxytocin. Sense of looseness and wide openness. No elasticity. Hot, shy, timid, don't ask for what is needed. Strong fear of death: their own or their baby. Suspicious of people's suggestions.

Dose: Secale 200c every 30 minutes for up to 3 doses.

Excessively Painful Labour

Chamomilla: "I can't bear it, the pain is too much". Almost frantic. Cursing/swearing, spiteful, peevish, wants to get away from it all. Hot, sweaty and thirsty. Won't permit examination. Snappy. Swears at her partner. Has poor opinion of the midwife and tells her so. Rigid os, pelvic bone stays rigid.

Dose: Chamomilla 200c every 30 mins for up to 3 doses.

Aconite: For pain with fear and when labour is too fast. Mother knows it is too fast and it is terrifying. Distress and restlessness with each pain. Fears that she will not be delivered or that she will die.

Dose: Aconite 200c every 15 minutes for up to 3 doses.

Coffea: Highly strung nervous types who can't bear the pain. Pains



though severe are not effective. Very sensitive to noise. Have an overexcited state of mind. Ecstatic. When pains cease, start chatting, laughing, joking.

Dose: Coffea 200c every 15 mins for up to 3 doses.

Some women like to use the **TENS** (Transcutaneous electronic nerve stimulation) machine for pain relief in early labour. These can either be bought or hired (www.tens.co.uk supply them for hire & it is good to book them well in advance of our due date). This comprises of 4 sticky pads which are attached to the back either side of the spine - 2 at bra level, & 2 around the sacrum. Nerve impulses like pins and needles override the pains coming from the uterus, releasing endorphins. If you want to use this, for it to be effective you should put it on from the start of labour.

The Delivery

In their birth plan some mothers like to request there is SILENCE for 30-45 minutes of an hour after the birth so the new born can gently acclimatise to new surroundings and bond with the mother.

Often immediately after the birth the mother may for 5 minutes SHAKE quite strongly. This is not something to be alarmed about; it is simply the hormonal surge which is taking place after the birth.

The Cord

Ideally always wait until the cord has stopped pulsating before you cut it. However, if the cord is very short or around the baby's neck tightly, it will have to be cut at once.

Post Partum – Some of the more common remedies: *The Baby*

Aconite: If blood isn't working properly & the baby is purple. Or, if baby is fearful/in shock from a too rapid birth. Retention of urine from shock.

Dose: Aconite 30c one dose.

Ant Tart: If asphyxia and rattling and the baby doesn't breathe because it has swallowed some fluid.

Dose: Ant Tart 200c one dose.

Carbo Veg: If baby is limp and almost dead (this remedy is known as the 'corpse reviver').

Dose: Carbo Veg 200c one dose.



Laurocerasus: If baby is blue, breathless and pulse is failing.
Dose: Laurocerasus 30c or 200c one dose.

Chelidonium: If baby is jaundiced at birth.
Dose: Chelidonium 30c one dose.

Delivery of the Placenta

Ideally you want to avoid the routine use of Syntometrine (a drug used to precipitate the delivery of the placenta) – make this clear in your birth plan. (If you do not want or need it, in your birth plan ask for Syntocinon to be given as it does not have the side effects – nausea, vomiting, headaches – associated with Syntometrine).

- 1) Put the baby to the breast at once as this will promote further contractions and help expel the placenta. Wait to see if the placenta is delivered on its own.

Caroline Flint in 'Sensitive Midwifery' says: "You should wait until you can't bear to wait any longer, and then wait some more". As long as you are not bleeding heavily there is no emergency.

- 2) Don't rub the uterus.
- 3) If you are at home, walk up and down stairs (if you have any energy left!)
- 4) To help detach retained placenta, give a sharp cough.

Pulsatilla: If the placenta has not been delivered within 1 ½ hours and you want to speed it up.
Dose: Pulsatilla 30c one dose every 15 minutes for up to 3 doses.

Caulophyllum: If the placenta is retained, the mother is exhausted and has no energy to expel the placenta. With passive dark oozing blood trickling out, from partial separation of the placenta.
Dose: Caulophyllum 30c one dose every 15 minutes for up to 3 doses.

However, if high risk labour – you have been induced, used pethidine, epidural or forceps there is a greater chance of postpartum haemorrhage, and if you start bleeding it will be difficult to avoid having Syntometrine.



Secale: If the birth has been induced with a drip or an epidural or Pethidine has been used the placenta is retained.
Dose: Secale 30c one dose every 15 minutes for up to 3 doses.

Haemorrhage after Birth

As the placenta breaks away from the uterine wall, the site of the attachment bleeds. It is considered normal to lose about the equivalent of a coke can full of blood. (Giving birth in the upright position helps the placenta to separate). Bleeding is stopped by further uterine contractions, stimulated by putting the baby to the breast, which releases maternal oxytocin. Occasionally the uterus fails to contract with the result that the bleeding continues.

Definition: Gushing blood – *Uterine Haemorrhage*.
Oozing Blood – *Tear*.

A uterine haemorrhage needs to be dealt with fast: you have only 2 MINUTES to sort it out. The right remedy will work within 30 seconds.

Phosphorus 200c: If the blood is bright red, there is a lot of it and it gushes out. Wait 60 seconds and if there is no change, follow it with **Ipecacuanha 200c**.

Belladonna 200c: If there is a lot of dark red blood with clots that gushes out.

If there is no change after 2 minutes, take orthodox treatment (Syntometrine).

Episiotomy or Perineal Tear

Approximately 50% of women do not tear. (If you labour in water you are less likely to tear).

Yoga, stretching the perineal muscles and perineal massage with almond or olive oil in the last month of pregnancy will help. Massage oil into the perineum as the baby crowns: or apply flannels soaked in hot water to which some Calendula tincture has been added: this soothes and encourages blood to the area which will relax and stretch the tissues. Squatting position actively relaxes the perineum.

Most tears are minor, 'natural' and are known as first degree tears. Occasionally second degree tears occur which involve the muscular tissue.



- 1) Soak a sponge in half a glass of warm water with 20 drops of Calendula tincture. Apply gently to the area every 3 hours or after every visit to the toilet. Or, put same proportions into a plant spray and spray onto the area. This will prevent infection and help healing.
- 2) Keep a store of sanitary pads in the freezer and place a fresh cold pad inside the knickers at regular intervals. This will help to relieve any pain or soreness as the tear heals. You may also spray the pads with your Calendula solution.
- 3) Urinating can cause pain/ stinging as the acidity of the urine irritates the tear. Take a jug of luke-warm water with you to the toilet and pour this over your perineum as you urinate. This will dilute the urine and eliminate any stinging. Otherwise, urinate in the bath using the shower head to spray luke-warm water onto the affected area.

Staphysagria 200c once a day for 3 days will also help healing. Pelvic floor exercises will help it heal and help guard against stress incontinence.

After Normal Birth

Arnica: Helps regain strength and stimulates rapid recovery.
Eases aches and pains in the muscles caused by bruising.
Dose: Arnica 200c three times daily for up to 3 days.

After Ceasarean

Bellis Perennis: For feelings of bruising and soreness deep within the uterus/bowels. Helps internal organs recover from bruising.
Dose: Bellis Perennis 200c up to three times a day for up to 3 days.

Staphysagria: Resentful, angry and let down by the experience of having had a caesarean/medicalised birth.
Dose: Staphysagria 200c once a day for up to 3 days.



Feeding

Milk usually doesn't come in for 3-5 days after the birth. During this time the baby drinks colostrum from the breast. There is not much of it, but it is 10% antibodies which boosts the immune system of the baby. The baby's sucking stimulates the hormones which cause the milk glands to produce milk.

Not making enough breast milk? If you are struggling to make enough breast milk for the baby take **Pulsatilla 200c** (up to 3 doses) and drink as much *nettle* or *fennel* tea as you can. In any case, aim to be drinking at least 3 litres of water a day as lack of breast milk is all too often due to dehydration.

If your Baby Won't Latch on at all

An infant has instincts that pull him to the breast. Occasionally when there are severe latch-on problems a technique called 'rebirthing' can help to trigger this instinct :

- Fill a bath with warm (not hot or tepid) water so both mother and baby are comfortable.
- Have the mother undress and get in the bath.
- The support person then places the naked baby in the water. The baby should be well supported and gently submerged up to its shoulders. Allow the baby to gently float in the water for about a minute.
- Then place the baby nude on the mother's belly.
- Bring water from the bath onto the baby's back every few minutes to keep him warm.
- Let the baby crawl his way up to mother's breast.

Mastitis

Mastitis is an infected milk duct, usually high on the outer edge of the breast.

- 1) To help it, let the baby feed on that side and gently massage the tender area downwards.
- 2) Apple cider vinegar in the diet has proved effective. A teaspoon in a glass of water and sip on this.
- 3) Taking **Phytolacca 200c** up to 2 times a day for 3 days may help heal mastitis, cracked nipples or blocked milk ducts/engorgement. Breasts needing this remedy will be hard, with intense radiating pains. If symptoms persist contact your homeopath, there are other remedies which will help.



Engorgement

- 1) When in the bath, lean forward so that the breasts are immersed in water and massage gently with a hot flannel towards the nipples.
- 2) Dark green savoy cabbage leaves: Leave them in the freezer. Form into cup shape. Break the veins along the central vein of the leaf. This releases an enzyme which eases symptoms of engorgement. Stick it in the bra. Change every 2 hours.

Cracked Nipples

If you have cracked nipples, the baby is most likely not positioned correctly. Nothing will make it better until you get the position correct. Ask your GP about Breastfeeding classes, contact the NCT or visit the La Leche League website at <http://www.laleche.org.uk/>.

Letting milk dry on the nipples can help, or express breast milk and rub it in.

Plastic nipple shields can also help protect inflamed or sore nipples while breastfeeding giving the nipples time to heal.

Vitamin K Shot

Given at birth to prevent 'haemorrhagic disease of the newborn' (HDN) unless you put in your birth plan that you do not want it. You can opt to have it orally. One in 10,000 babies has a problem with blood clotting, which reduces to one in 60,000 babies if you have the Vitamin K orally, or to one in 100,000 if you have the vitamin K shot.

Nappy Rash

It is not necessary to use baby wipes on your baby's bottom to keep it clean. For at least the first few months cotton wool soaked in tepid water will be sufficient to keep your baby's bottom clean. To avoid nappy rash, apply Calendula cream to your baby's bottom before putting on each fresh nappy.

Very Important: Private Bonding Time for you and the baby

The first 2-4 weeks after the birth are crucial for the whole first year of the baby. You will naturally feel very high and excited after the birth. It is vitally important to use this energy in the best way and not give it away in inappropriate situations by having too many visitors or rushing around. It is suggested that for at least the first two weeks you don't have visitors and you keep quiet and sleep as much as possible with the baby and tune into the routine of the baby. This will help the first year to proceed smoothly and the baby will have a routine for the rest of its life. If you don't do this you will find



you are always trying to catch up on that missing sleep. Interestingly in some cultures this 'staying in' period extends for 40 days – at the end of which they have a big celebration to which all are invited.

If you must have guests in the first two weeks, give them very clear boundaries: a half an hour visit at one time. You might also like to ask them to bring a homemade frozen meal with them instead of a baby gift as this will save you the burden of having to cook. People are usually delighted to oblige.

Recommended Reading

Frederick Leboyer	Birth without Violence
Janet Balaskas	Active Birth
Janet Balaskas	The Active Birth Partner's Handbook.
Janet Balaska & Yehudi Gordon	The Encyclopedia of Pregnancy and Birth
Janet Balaska & Yehudi Gordon	Water Birth
Beverley Beech	Who's Having your Baby
Kaz Cooke	The Rough Guide to Pregnancy and Birth
La Leche League	The Womanly Art of Breastfeeding
Miranda Castro	Homeopathy for Mother and Baby
Magda Gerber & Alison Johnson	<i>Your Self-Confident Baby: How to encourage Your Child's Natural Abilities from the Very Start</i>