

PRACTICE STANDARDS

College of Traditional Chinese Medicine Practitioners and Acupuncturists of British Columbia

ACUPUNCTURE FOR INDUCTION OF LABOUR

Effective February 2, 2015

Female patients may seek acupuncture treatment as a means to induce labour. Under the Traditional Chinese Medicine Practitioners and Acupuncturists Regulation, Acupuncturists, <u>TCM Practitioners and Doctors of TCM</u> ("hereinafter referred to as "practitioners") are not authorized to manage labour. Practitioners may assist pregnant patients seeking acupuncture to induce labour only if the following conditions are met.

A. Before performing the treatment, the practitioner must do all of the following:

- 1. verify and document that the patient is under the care of a primary birth attendant who is registered with an approved regulator under the *Health Professions Act*;
- 2. record the name of the primary birth attendant in charge of the patient's pregnancy (e.g. obstetrician, midwife, general practitioner);
- 3. obtain a prior written signed consent form from the patient after following the requirements and considerations listed in sections A and B of this Practice Standard. The consent form must include the patient's name, the date, a brief description of the treatment, the rationale for performing the treatment, and the name of the practitioner who will provide the treatment;
- 4. record the estimated date of delivery and date of scheduled induction (if applicable) in the patient's clinical record:
- 5. record the patient's medical history and all pertinent information in the patient's clinical record, including but not limited to the patient's age, week of pregnancy/gestation, if primiparous (first pregnancy) or multiparous (history of one or more pregnancies), current complications, and history of complications in previous pregnancies/deliveries;
- 6. conduct an oral interview to verify the patient's current physical status including history of stress tests, blood pressure, status of cervix, engagement, cephalic or frank breech, mucus plug, contractions, membranes intact, cervical sweep and /or plan for other natural induction tools such as castor oil or lemon verbena and record all of this information in the patient's clinical record;
- 7. take steps to ensure that there are no contraindications to administering acupuncture to the patient for the purposes of inducing labour. Contraindications may include but are not limited to: (a) absence of any medical reason necessitating an induction; and (b) any conditions that would make induction unsafe for the patient and/or the baby.

Potential contraindications to induction of labour through acupuncture

- if the patient is carrying twins, induction may only be administered if all general induction qualifications and baby "A" is in a cephalic presentation; the practitioner should have written confirmation that the patient will be delivering vaginally with twins (note: this is not commonly done by primary birth attendants in BC) and their primary birth attendant is aware and confirms the position of the babies.
- if there is a breech frank breech induction may only be administered if the patient meets all general induction qualifications; all non-frank breeches are contraindicated for induction unless there is a written request by the primary birth attendant;



- if the patient is planning for a vaginal birth after caesarean section (VBAC) patients with a previous history of caesarean section must have the prior consent (verbal or written) of their primary birth attendant, confirming that the patient is eligible for a vaginal birth;
- the timing may be a contradiction as acupuncture induction should not be provided more than 72
 hours before a known medical induction unless the practitioner has received confirmation that the
 primary birth attendant has recommended acupuncture induction for the patient.

B. Consideration of the Practitioner's competency to perform acupuncture to induce labour

Practitioners who wish to perform acupuncture for the induction of labour are responsible for ensuring that they are competent to do so. Practitioners may be required to provide evidence of such competency to the College documenting their education and training for labour induction and outlining their experience and competency to apply the necessary knowledge to perform labour induction in a safe and competent manner.

The following links are for further information regarding reference material and training programs:

Betts, Debra. *The essential guide to Acupuncture in Pregnancy & Childbirth*: Eastland Press, 2006 The Cochrane Collaboration. *Acupuncture for induction of labour (Review)*: Wiley & Sons, 2009 National Institute for Health and Clinical Excellence (NICE). *Clinical guidelines 70: Induction of Labour*, London, UK 2008

