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Study protocol

The effect of foot reflexology in the fourth stage of labor on postpartum hemorrhage and after pain: Study protocol for a randomized controlled trial

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Abstract

Background

Postpartum hemorrhage is the most common midwifery hemorrhage that occurs in 1 %–5 % of childbirths, causing an estimated 140,000 deaths per year. After pain is also one of the common postpartum pains and approximately 70 % of women with vaginal delivery complain of it. Due to the side-effects of chemical medications, researchers have a particular interest in using traditional and complementary therapies. Reflexology is one such method. The present randomized clinical trial will be conducted to assess the effectiveness of reflexology on hemorrhage and after pain following vaginal delivery.

Methods

The present randomized controlled trial will be conducted on women presenting to the maternity wards of Allameh Bohlool Gonabadi and 17th Shahrivar hospitals in Gonanbd and Mashhad, Iran. After obtaining informed consent from the eligible women, sampling will begin through the convenience method. The subjects will be randomly divided into intervention and control groups by permuted blocks of four. The sample size will be 40 per group. After the removal of the placenta, the intervention group will be given a four-minute general massage on each foot, followed by two minutes of specific reflexology on the uterus, pituitary and solar plexus points by exerting rotational pressure. The control group will also be given a four-minute general massage on each foot, followed by six minutes of rotational pressure on a point on the outer edge of the heel. Ten minutes are required for each foot, and this procedure is to be repeated two hours after childbirth. After pain will be measured using the Visual Analogue Scale (VAS) and bleeding by weighing the pads every one to four hours. Data will be analyzed in SPSS 16.

Discussion

The results will provide accurate scientific evidence for the use of reflexology to control postpartum hemorrhage and after pain. If the results are favorable, the routine use of this technique will be recommended for women in the fourth stage of labor.

Abbreviations

RCTrandomised controlled trialVASvisual analogue scaleIRCTIranian Registry of Controlled Trial

Keywords

ReflexologyPostpartum hemorrhageAfter painRCT