



September – October 2011
Volume 3, Issue 5

Ear Say



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Upcoming Seminars:

Seminar I – Online
September 20 – November 15
(still accepting late registrations)

Laser Therapy in
Auricular Medicine
Ongoing

Register Now!

Important Dates:

- ☾ September 4
- September 12
- ☾ September 20
- September 27
- ☾ October 4
- October 12
- ☾ October 20
- October 26

Labour Day

Monday, September 5

Punctuation Day

Saturday, September 24

Thanksgiving

Monday, October 10

Farmer's Day

Wednesday, October 12

Monster Mash Day

Thursday, October 20

Halloween

Monday, October 31

Welcoming the "E"s

At VPI these days we're all about babies! Both Dave and Paul Maybee have recently become new fathers, making Dr. Muriel Agnes a proud Gramma... twice! Dave and his wife Amy welcomed a baby girl, Ella Sofia Grace Maybee into the world on August 8th, and Paul and his wife Mikey gave Ella a cousin, a baby boy, Ezra Salsman Maybee on August 24th.



Point of the Month

Oxytocin (Gold on Dominant to Stimulate)

Pathophysiology: A hormone synthesized in the hypothalamus and secreted into the blood from the posterior pituitary, as well as from some reproductive tissues such as ovaries and testes.

Expected Effect: A key hormone in the reproductive life of mammals, oxytocin is best known for its use to stimulate contractions during labour. It also stimulates milk ejection during lactation, and is released during sexual orgasm in both men and women. On a psychological level, oxytocin affects social behaviours. It inspires the nesting urge, and acceptance of a newborn. This hormone also plays a role in the bonding experience of adult relationships, and trust. Oxytocin seems to affect women more than men, and a lack of it may influence women's experience of interpersonal stress. Stress, and fright, will inhibit oxytocin release.

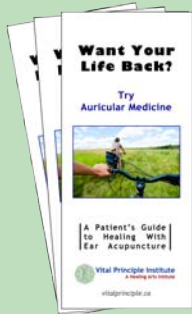
Common Conditions: With medical supervision that has determined that it is time for labour and delivery, this point can be stimulated to assist in the body's own release of this hormone for dilation and contractions. This point will also assist in the let-down reflex of breastfeeding. This point may be active (deficient) in women experiencing postpartum depression, or even women (or men?) who find it difficult to trust, or commit in adult relationships. Low levels of oxytocin have been found in the blood plasma of autistic children, and in the past decade studies have found improvements in social recognition and behaviours of autistic people with the administration of oxytocin.

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NEW!

Auricular Brochures



This new brochure for patients clearly explains the therapy and its health benefits, as well as the procedures and history of the medicine. There is also room on the inside to include your clinic's contact information.

Order Now!

www.vitalprinciple.ca/store

**Next Issue:
Nov. 10, 2011**

**Deadline for
Submissions:
October 20**

Email your story to:
info@vitalprinciple.ca

**Tell Us What you Think
of "Ear Say"**

Email us at:
info@vitalprinciple.ca

Auricular Medicine in the Delivery Room

Dave Maybee, RMT

In class we always tell people at Level 1 to stay away from treating pregnant women, and this holds true as a caution, the reason being that you might actually induce labour too early.

However sometimes, this is exactly what you want to do. I was fortunate enough recently to have the opportunity to experiment with auricular points during labour on my own wife as she gave birth to our daughter! This was made possible by the open-mindedness of my wife and the acceptance, or at least indifference, of the medical staff at the hospital. Whichever it was I am grateful for it.

I could tell you, here is a recipe for a "normal" birth, but we know there is no real recipe for anything and I learned recently that perhaps there is no such thing as a normal birth.

Amy and I went into the hospital for a routine appointment about 6 weeks away from our due date, so we had only just begun to let the reality of the birthing process sink in. To our surprise, Amy had preeclampsia, a condition that can occur during the later stages of pregnancy, which is characterized by hypertension and high levels of protein in the urine. This condition can also lead to decreased platelets and blood supply to the kidneys, liver and eventually the placenta. No good. So after a couple days on observation the decision was made to induce the labour. They did this by placing Cervidil in the cervix. The active ingredient in this product is prostaglandin. Can you imagine the points you might try already? This causes a slow and more natural process of labour, as opposed to using a Pitocin drip (or the oxytocin point on the ear), which would start contractions right away without the cervix being dilated.

They told us that, because of the condition, if Amy's blood pressure were to stay this high, they would have to put a Magnesium sulfate (Epsom salt) IV in and leave it in for the entire birthing process. This also meant that she would have to have a catheter in the whole time, and that was not sounding pleasant. So the first points that were used were the Beta 2 receptor and renin-angiotensin; both in silver. This brought her BP down from

170/100 to a more reasonable 135/90, which put us just under the wire and she did not need the IV. Phew!

As the contractions started, Amy was feeling quite nauseous, and her legs were getting shaky. This could have been a bad cascade of events, so in went the nausea point and the barbiturate to calm her nervous system. Right away she said: "I feel like a rag doll." Minutes later she was chowing into a fruit salad before she realized that her stomach felt much better.

There was a long time that followed of the contractions becoming stronger; everything was going the way is needed to. During this time we massaged the cervix point to help with dilation.

Eventually we came to a point (12 hrs later) where Amy had an epidural in and was 6 cm dilated, things were moving along. At this point I had tried a couple pain points, as the epidural wasn't as effective as she had hoped, but to no avail. It seemed that in this state, she couldn't determine tenderness, making it difficult to be precise. So then we thought of another option. If we can't decrease her pain, we might as well just move things along. What she needed was to become more dilated, so I treated the cervix and the prostaglandin points, and shortly after she was dilated enough that they broke her water which lead to the baby coming relatively quickly.

There were a couple times when I was tempted to use the oxytocin point, my trigger finger was itchy. But when I sat back and thought about it, her contractions were strong and consistent, so really there was no need. Since then I have found the oxytocin and prolactin points very helpful to stimulate milk production, or the opposite (in silver) to avoid the breasts from becoming engorged.

Auricular acupuncture can be very helpful during pregnancy, but we recommend only advanced students attempt this and really think each step through before treating.