

Moxibustion use for Breech Presentation

Cardini et al in 1998 [7] had the following randomised controlled trial published in the Journal of American Association (JAMA)

Summary

The objective was to evaluate the efficacy and safety of moxibustion on Zhiyin BL-67 to correct breech presentation. 130 women having their first baby (primigravidas) at 33 gestation received moxibustion to Zhiyin Bl 67 while 130 women, also primigravidas, received no intervention.

The moxibustion was administered for 7 days .Women were then assessed and a further 7 days of moxibustion treatment given if the position had not changed.

Outcomes were measured in terms of fetal movements, as counted by the mother for one hour each day for one week and the number of cephalic presentations both at 35 weeks gestation and at delivery

At 35 weeks gestation 75.4% in the intervention group were cephalic (47.7% in the control).

Women in both groups then had the option of undergoing external cephalic version (ECV). One woman took this option from the intervention group and 24 from the control group

At delivery the presentation of 75.4% of the intervention group were cephalic compared to 62.3% in the control group.

The presentation did not change in any of the groups after 35 weeks except in those undergoing ECV. In terms of fetal movement the moxibustion group experienced a greater number of movements (a mean of 48.45 compared to the control group with a mean of 35.35).

Conclusion

That in prigravidas at 33 weeks gestation with breech presentation moxibustion treatment for 1 to 2 weeks at Zhiyin BL-67 increased fetal activity during the treatment period and cephalic presentation at 35 weeks and at delivery.

Treatment method

The women and their partner (or a person to help with the treatment) were given a treatment and taught how to use the moxibustion in a hospital appointment within 24 hours of the scan confirming the breech position. They then applied the treatment to Zhiyin BL-67 daily at home. Moxa sticks were used with the women sitting or in a semisupine position and the partner delivering the treatment.

Clinical Perspective

As part of this study an attempt was made to assess if there was a difference in delivering moxibustion sessions once or twice a day.

87 women used moxibustion for a total of 30 minutes (15 minutes to each point) while 43 women used moxibustion in the same way but received treatment twice a day.

At the end of the first week 79% of the cephalic versions were obtained in the women using moxibustion twice a day compared to 55.2 % in the daily treatments. But by the end of the second week 15 additional cephalic versions were obtained in the group having moxibustion treatment once a day.

This meant that at 35 weeks the results were termed as a nonsignificant difference (72.4% in the once a day moxibustion group compared to 81% for the women having moxibustion treatment twice a day).

From a safety perspective it was reassuring that no adverse events (such as intrauterine death or placental detachment) were noted in the treatment group. It was also interesting that while the number of premature rupture of membranes was similar in both groups the number of premature births was lower in the intervention group and that the use of oxytocin, before or during labour, was also reduced in the moxibustion group (8.6% compared to 31.3%).