Treating Postpartum Urinary Retention with Acupuncture: A Case Report

By Fan Qu, MD, PhD, Jue Zhou, MD, PhD and Rui Nan, MD

Mrs. Lin, a 29-year-old teacher, vaginally delivered a normal baby on August 18, 2005. Five hours after delivery she was unable to urinate voluntarily, accompanied by the distention and dullness of the lower abdomen, which lasted for 18 hours.

A day later she suffered from anuria, which may have been caused by the prolonged birthing process. The physical examination did not show any organic lesion. The top of the distended urinary bladder reached the level of one finger below the umbilicus. The intolerable sufferings could not be relieved by the administration of drugs. The patient did not want to be treated with urethral catheterization. As the patient was a little familiar to traditional Chinese medicine, she was willing to accept an acupuncture treatment.

Method

The patient took a lateral recumbent position. Zi Wu Dao Jiu needling was applied to the Huiyang (BL 35) acupoint. After the needling sensation was obtained, the reinforcing technique was performed by quickly and forcibly thrusting, as well as slowly and gently lifting the needle when it was thrusted downward by three steps to a deeper level together with a counter-clockwise twisting manipulation of the needle. As for the reducing maneuver, the needle was lifted upward by quickly and forcibly raising it, as well as slowly and gently thrusting, together with clockwise twisting manipulation of the needle to induce a needling sensation toward the perineal region. The needle should not be inserted too deep or it may influence the inferior gluteal artery and vein. The needle was then retained in the acupoint. Twenty minutes later, she felt a sense of urination and 800 ml of urine was spontaneously discharged. Forty-five minutes later, her pain was relieved. A follow-up visit after six months showed no sign of a relapse.

Discussion

Postpartum urinary retention is a common complication after the delivery of a baby. Although the urethral catheterization is a common measure to relieve urinary retention, many patients do not like to receive it, as it may produce some discomfort and the repeated catheterization may cause urethra and urinary bladder
inflammation.

The Zi Wu Dao Jiu needling refers to a kind of needle manipulation by combining the lifting, thrusting and twirling manipulations of the needle together, i.e., following insertion and Deqi (achieving needle sensations), the needle is thrust quickly, lifted gently and rotated leftward nine times first, then, lifted quickly, thrust gently and rotated rightward six times. The procedure is repeated several times.

The Zi Wu Dao Jiu needle method combines thrusting, lifting and twisting maneuvers, and is usually applied to promote the normal movement of Yin and Yang and to relieve ascites and dysphagia. The postpartum retention of urine is due to the deficiency of qi, blood and the abnormal urine transformation function of urinary bladder. As Su Wen (Plain Questions): "The urinary bladder is a water reservoir to store liquid, conduct transformation and discharge of urine." The tonification of Yang may stimulate Kidney Yang to enhance the transformation function of urinary bladder; and the reduction of Yin may promote the discharge of waste fluid from urinary bladder.

There has been investigative reporting on urinary retention in postpartum women who delivered vaginally with epidural blockade. The mechanism and incidence of urinary retention in relation to epidural analgesia, however, are not established. Epidural analgesia provides valuable pain relief but may be associated with greater residual urine. Postpartum urinary retention is, however, more often related to prolonged labor than to the effect of epidural analgesia itself. Close monitoring of the progress of labor and avoiding urine retention are essential. Nulliparity, a longer labor course, instrumental delivery, and extensive vaginal and perineal laceration were also the contributing obstetric factors to postpartum urinary retention. The root of postpartum urinary retention is the extended compression to the pudendal nerve and the functional disturbance of sphincter muscles of urethra and urinary bladder. The pudendal nerve, deeply situated underneath Huiyang point, originates from the sacral nerve plexus and is distributed to the sphincter muscles. Acupuncture at the Huiyang point may adjust and recover the function of pudendal nerve and relax the spasm of the sphincter muscles, from which the alleviation of postpartum urinary retention was obtained.

Reference


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