

Sacred Scents AROMATHERAPY

May 2021

INSIDE THIS ISSUE



PG. 1

General safety tips for essential oils used in aromatherapy. Dilution, oils for all to avoid, emmenagogues and abortifacient essential oils.



PG. 2

Research based recommendations for essential oils and application by trimester. Aromatherapy for changes in physiology and emotional supports.



PG. 3

Essential oils for labour, delivery, and post-partum use. Consideration for caregivers, partners, infants.

Emmenagogues

“Plant substitutes for hormones that stimulate the pituitary gland to produce more gonadotrophic hormones. Herbs that initiate and promote the menstrual flow. Most are uterine tonics and stimulants to restore normal function of the female reproductive system.”

(Bartram T 1995 Encyclopedia of herbal medicine. Grace Publishers, Christchurch UK, p166)

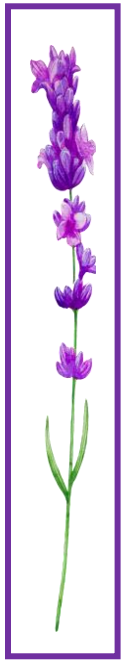


ESSENTIAL OIL SAFETY IN PREGNANCY

There are two basic rules: do not ingest essential oils and do dilute them. Most reactions can be prevented with proper dilution (1% for gestation) and application (<https://www.cfacanada.com/pages/safety-statement>). These neurotoxic essential oils should be avoided by everyone: Birch, Cassia, Elecampane, Mustard, Pennyroyal, Sassafras, Tansy, and Wintergreen.

Expectant mothers will also want to steer clear of emmenagogues which can induce bleeding: Angelica, Basil, Chamomile, Cinnamon, Clary Sage, Frankincense, Hyssop, Jasmine, Juniper, Lemongrass, Melissa, Myrrh, Peppermint, Rose, Sage, Fennel, Marjoram, and Thyme. Abortifacient oils include: Parsley Seed, Sage, Wormwood, Rue, and Hyssop.

Trimesters 1-2-3



FIRST TRIMESTER

In the first trimester, nothing should be applied topically. After 10 weeks, a diffusion of Lemon can help with nausea. As the mother nears the second trimester, Lavender inhalation or a drop in bath water can help with relaxation and stress.

Conrad, P. (2019). Women's Health Aromatherapy. London UK: Singing Dragon

A 2014 study published in the Red Crescent Medical Journal of Iran looked at the use of Lemon inhalation and found it was effective in reducing nausea and vomiting in the first trimester.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4005434/>



SECOND AND THIRD TRIMESTER

In the second trimester, there are physiological changes to the mother's body that create discomfort. The hormone Relaxin is released in order to soften ligaments and muscles and prepare the pelvis for childbirth. This can lead to aches and pains in the back, other joints and muscles. Lavender is a safe analgesic.

(<https://www.tisserand.com/aromatherapy/soothe-pregnancy-aches-and-pains-with-aromatherapy/?v=7516fd43adaa>)

A blend of Lavender, Petitgrain, Bergamot, and Neroli in a footbath or massage as a safe remedy for anxiety after the 16th week of gestation. Lavender, Petitgrain, Bergamot, Neroli, and Lemon can be used in a spritzer for depression in the second trimester.

In the third trimester, floral and wood scents can help with emotions. However, Midwifery Lecturer Denise Tiran suggests holding off on using Rose or Jasmine, and Clary Sage as they can induce contractions. Save these for later stages of a normally progressing vaginal birth labour. ([HTTPS://WWW.EXPECTANCY.CO.UK/DENISE-AND-HER-BLOG](https://www.expectancy.co.uk/denise-and-her-blog)) (<https://www.tisserand.com/aromatherapy/easepregnancyblueswitharomatherapy/?v=7516fd43adaa>)

The International Federation of Professional Aromatherapists recommends these essential oils for the conditions below:

- ✓ Frequent urination: Sweet Marjoram, Cypress, Neroli
- ✓ Abdominal discomfort: Juniper, Benzoin, Lavender
- ✓ Heartburn: Sandalwood, Roman chamomile, Petitgrain
- ✓ Hemorrhoids: Cypress, Sandalwood, Peppermint, Sweet Orange
- ✓ Morning sickness: Petitgrain, Sweet orange, Mandarin
- ✓ Stretch marks: Lavender, Frankincense, Rose, Roman Chamomile
- ✓ Varicose veins: Cypress, Sandalwood, Sweet Orange
- ✓ Water retention: Petitgrain, Geranium, Bitter Orange





Table 1 Essential oils used in the study and rationale for use

Essential oil	Latin name Country of origin	Botanical source	Rationale for use in labour
Lavender	<i>Lavandula Angustifolium</i> France	Lamiaceae	For anxiety, tension, stress, relaxation, headaches and after perineal suturing
Frankincense Olibanum	<i>Boswellia Carteri</i> Somalia	Burseraceae	For high anxiety, hyperventilation, hysteria
Clary Sage	<i>Salvia Sclarea</i> Russia	Lamiaceae	For assisting contractions to enhance labour
Peppermint	<i>Mentha Piperita</i> China	Lamiaceae	For nausea and vomiting, headaches, pyrexia
Lemon	<i>Citrus Limonum</i> Argentina	Rutaceae	For upper respiratory tract infections, to enhance mood
Mandarin	<i>Citrus Reticulata</i> Argentina	Rutaceae	For relaxation, to enhance mood
Rose Absolute	<i>Rosa Centifolia</i> Morocco	Rosaceae	For depression, anxiety or bereavement, to enhance labour
Jasmine	<i>Jasminum Grandiflorum</i> Morocco	Jasminaceae	For depression or anxiety, to assist labour, to help expel placenta
Eucalyptus	<i>Eucalyptus Globulus</i> China	Myrtaceae	For nasal congestion, pain relief
Roman Chamomile	<i>Chamaemelum Nobile</i> Chile	Asteraceae	For mothers with multiple allergies, eczema, anxiety, and after perineal suturing

https://www.researchgate.net/profile/EthelBurns/publication/272450347_Aromatherapy_in_childbirth_An_effective_approach_to_care/links/5626140108aeedae57dbbd3b/Aromatherapy-in-childbirth-An-effective-approach-to-care.pdf?origin=publication_detail



Ethel Burns of Oxford University led a decade long study into the use of aromatherapy in childbirth in the United Kingdom. Table 1 lists the essential oils used.

For a preterm labour, only Lemon inhalation should be used. For the early stages of regular labour, inhale Lavender, Bergamot, Neroli or Petitgrain for anxiety. Note: lavender is contraindicated in women with hay fever, low blood pressure, or on an epidural and Peppermint should only be in an inhaler or footbath.

For a slow labour, try footbaths of Lavender, Bergamot, Neroli or Petitgrain. Mandarin, Lemon and Geranium aid with edema. If unsure, stick to citrus.

As labour progresses, a back massage blend of Rose, Lavender, and Jasmine can help. Frankincense helps with hysteria, but it is not advised if there is a history of psychosis. Chamomile can help with spasms, but not for women with allergies or asthma. Clary Sage should not be used if the mother is on oxytocin, has previously had a Caesarean, or is on an epidural.

During delivery, Clary Sage and Rose can be applied to the abdomen, wrists and ankles to help augment contractions. Roman Chamomile. Frankincense, Lavender, Jasmine and Clary Sage make a good pain reduction massage blend for the back. Jasmine fortifies and can help with a difficult placental delivery. An inhalation of Geranium, Bergamot, Lemon, Eucalyptus, and Peppermint can help refresh.

In postpartum, Jasmine is a good uplifting. It helps with the baby blues and builds confidence in the new mother. Fennel will help induce lactation. Rose can help with hormonal balancing, but can increase hemorrhaging, so it should be used with caution. Lavender in a sitz bath with help with perinium pain and aids maternal sleep. Neroli helps with anxiety.

Infants under 3 months of age should not be exposed to topical aromatherapy as their skin is highly permeable. Peppermint and Eucalyptus can arrest their breathing and are best avoided in a diffuser in a room with the infant. Care in choice of essential oils is also especially advised if the midwife, nurse, or doula is also pregnant.

