

Self-hypnosis training doesn't cut epidural use

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(HealthDay)—Self-hypnosis training does not reduce women's epidural use during childbirth, according to a study published online May 11 in *BJOG: An International Journal of Obstetrics and Gynaecology*.

Soo Downe, Ph.D., from the University of Central Lancashire in the United Kingdom, and colleagues assessed the effect of antenatal group self-hypnosis on [epidural](#) use during delivery. At 28 to 32 weeks' gestation, 680 [women](#) were randomized to usual care or usual care plus brief self-hypnosis training (two 90-minute groups at around 32 and 35 weeks' gestation plus a daily audio self-hypnosis CD).

The researchers found that there was no statistically [significant difference](#) in epidural use (27.9 percent in [intervention group](#) versus 30.3 percent in usual care; odds ratio [OR], 0.89, 95 percent confidence

interval, 0.64 to 1.24). Similarly, there was no significant difference in 27 of 29 pre-specified secondary clinical and psychological outcomes. However, women in the intervention group had lower actual than anticipated levels of fear and anxiety between baseline and two weeks postnatal (anxiety: OR, -0.72 ; fear: OR, -0.62).

"Allocation to two third-trimester group self-hypnosis training sessions did not significantly reduce intra-partum epidural analgesia use or a range of other clinical and psychological variables," the authors write.

More information: [Abstract](#)
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