

## Abdominal Acupoint Massage Combined with Auricular Acupressure for Postpartum Constipation of Qi and Blood Deficiency Pattern: Nursing Experience from One Case (Postprint)

**Authors:** Wang Xuejing, Lu Ying, Yang Man, Tang Ling

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### Abstract

This paper summarizes the clinical outcomes of one case of postpartum constipation with qi and blood deficiency pattern treated with abdominal acupoint massage combined with auricular point sticking, and presents nursing experiences including nursing assessment, routine care, operational methods of abdominal acupoint massage, operational methods of auricular point sticking, etc. Implementing appropriate Traditional Chinese Medicine nursing techniques based on syndrome differentiation and nursing can effectively improve patients' constipation symptoms and anxiety.

### Full Text

### Preamble

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**Abdominal Acupoint Massage Combined with Auricular Point Sticking and Pressing for a Patient with Postpartum Constipation of Qi and Blood Deficiency Pattern: Nursing Experience**

**Authors:** Wang Xuejing<sup>1</sup>, Lu Ying<sup>1</sup>, Yang Man<sup>1</sup>, Tang Ling<sup>2</sup>

**Affiliations:**

1. Department of Gynecology, Dongfang Hospital, Beijing University of Chinese Medicine, Beijing

2. Department of Nursing, Dongfang Hospital, Beijing University of Chinese Medicine, Beijing

**Corresponding Author:** Lu Ying, E-mail: [wldel\\_{lu}.com](mailto:wldel@163.com)

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## Abstract

This paper reports the clinical outcomes and nursing experience of a patient with postpartum constipation of Qi and blood deficiency pattern treated with abdominal acupoint massage combined with auricular point sticking and pressing. Key nursing interventions included comprehensive assessment, enhanced routine care, and detailed protocols for abdominal acupoint massage and auricular point application. Based on the principle of syndrome differentiation and holistic nursing care, this Traditional Chinese Medicine (TCM) nursing intervention effectively alleviated the patient's constipation symptoms and anxiety.

**Keywords:** postpartum constipation; acupoint massage; auricular point sticking and pressing; Traditional Chinese Medicine nursing

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## Introduction

Postpartum constipation refers to the condition where a woman, despite normal dietary intake after childbirth, fails to defecate for several days or experiences difficult, dry, and painful bowel movements. In Traditional Chinese Medicine, this condition is classified as one of the “three postpartum diseases.” Postpartum women are particularly susceptible to constipation, which often becomes chronic and recurrent, leading to complications such as hemorrhoids, anal fissures, postpartum depression, and increased risk of hemorrhage, significantly affecting maternal physical and mental health. Patients with Qi and blood deficiency pattern typically develop constipation due to insufficient fluid in the large intestine, loss of intestinal lubrication, and impaired transmission function leading to accumulation of waste.

Conventional Western medicine commonly employs glycerin suppositories or soap water enemas to assist defecation, but these methods often yield suboptimal clinical results and may create dependency. Abdominal acupoint massage and auricular point sticking and pressing offer advantages of simplicity, remarkable efficacy, safety, and absence of side effects, and have been widely applied in clinical practice in recent years. This article summarizes the nursing experience of treating a patient with postpartum constipation of Qi and blood deficiency pattern using combined abdominal acupoint massage and auricular point sticking and pressing.

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## 1. Clinical Data

The patient visited the gynecology outpatient clinic on [date]. Chief complaints included normal appetite and sleep but difficult defecation with dry, hard stools

and a sensation of incomplete evacuation. The patient had undergone spontaneous delivery of a female infant with episiotomy and suturing on [date]. No history of food, drug, or alcohol allergies was reported.

**TCM Examination:** Tongue pale with white coating; pulse thin and weak.

**Medical History:** Married, gravida 1, para 1. Menarche at age [X], regular menstrual cycles.

**TCM Diagnosis:** Deficiency constipation (Qi and blood deficiency pattern)

**Western Medicine Diagnosis:** Functional constipation

**Pre-treatment Assessment:**

- Bowel sounds: 2 times/min
- Defecation frequency: once every 3 days
- Stool characteristics: brown, hard, with residual sensation
- Defecation effectiveness: no bowel movement for 3 days (ineffective)
- Anxiety score: 65 points (severe anxiety)
- Comfort score: 4 points (poor comfort)

**Post-treatment Assessment (after 2 treatment sessions):**

- Bowel sounds: 5 times/min
- Defecation frequency: once daily
- Stool characteristics: yellow, soft, without residual sensation
- Defecation effectiveness: daily bowel movement (cured)
- Anxiety score: 45 points (mild anxiety)
- Comfort score: 8 points (high comfort)
- Satisfaction score: 95 points (very satisfied)

The treatment outcomes are summarized in .

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## 2. Nursing Assessment

### 2.1 Bowel Movement Assessment

Evaluated daily before and after intervention, recording: bowel sounds (times/min), defecation frequency (times/day), stool consistency (dry/hard), and presence of incomplete evacuation sensation.

### 2.2 Defecation Effectiveness Assessment

Evaluated 24 hours after intervention:

- **Cured:** Bowel movement within 24 hours with gradually softening stool and smooth defecation
- **Improved:** Bowel movement within 24-48 hours with gradually softening stool but some resistance
- **Ineffective:** No bowel movement after 48 hours

### 2.3 Anxiety Assessment

Evaluated before and after intervention using the Self-Rating Anxiety Scale (SAS) with 20 items rated on a 4-point Likert scale. Standard score threshold: 50 points.

- 50-59 points: mild anxiety
- 60-69 points: moderate anxiety
- $\geq 70$  points: severe anxiety

### 2.4 Comfort Level Assessment

Evaluated before and after intervention using a comfort scale (total score 10 points), where lower scores indicate poorer comfort.

### 2.5 Satisfaction Assessment

Post-intervention evaluation using a self-designed questionnaire assessing patient compliance, nurse technique, and treatment effectiveness (total score 100 points):

- $>90$  points: satisfied
- 80-90 points: moderately satisfied
- $<80$  points: dissatisfied

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## 3. Nursing Interventions

Based on the patient's symptoms, interventions focused on improving constipation, alleviating anxiety, and enhancing comfort.

### 3.1 Enhanced Routine Care

**Dietary Guidance:** Provided individualized dietary instruction based on syndrome differentiation. Advised increased intake of high-fiber, easily digestible foods, fresh vegetables and fruits, while avoiding spicy and irritating foods. For Qi and blood deficiency, recommended foods to strengthen the spleen, boost Qi, and nourish blood, such as lean meat, eggs, goji berries, Chinese yam, longan fruit, red dates, and donkey-hide gelatin.

**Pelvic Floor Rehabilitation:** Instructed the patient to perform Kegel exercises using three methods:

1. Inhalation method: Lift the anus during inhalation, hold breath for several seconds, then slowly relax during exhalation
2. Leg-crossing method: Supine position with crossed legs, bring hips close to thighs, and lift the anus with maximum effort
3. Sitting method: Seated position with crossed legs, hands on hips, lift heels and contract the anus

**Emotional Care (Five-Element Music Therapy):** Applied TCM five-element music therapy based on the principle that “all diseases arise from Qi and cease with sound.” For Qi and blood deficiency affecting the spleen, the corresponding musical note is “Gong” (equivalent to “1” in numbered musical notation). Recommended piece: *Ambush from Ten Sides*.

**Psychological Support:** Addressed the patient’s fear of episiotomy wound tearing during defecation through enhanced psychological counseling to alleviate anxiety and encourage positive disease management.

### 3.2 TCM Characteristic Nursing

**Abdominal Acupoint Massage:** Acupoint massage, a common Tuina manipulation, dredges meridians, regulates Qi, and promotes blood circulation. For this Qi and blood deficiency case, reinforcing (tonifying) technique was applied to nourish Qi and blood.

**Procedure:**

1. Perform alternating counterclockwise abdominal massage with both hands for 5 minutes, gradually increasing pressure from light to heavy
2. Apply thumb pressure to Zhongwan (CV12), Tianshu (ST25), and Qihai (CV6) for 3-5 minutes per point until warmth is felt at the skin surface
3. Conduct once daily for 7 days per course

**Precautions:**

- Trim nails before procedure to prevent skin injury
- Ensure patient empties bladder before abdominal massage
- Maintain patient privacy and warmth, avoid drafts
- Apply moderate pressure and observe patient response; discontinue if discomfort occurs

**Auricular Point Sticking and Pressing:** This technique uses adhesive tape to apply Vaccaria seeds to specific auricular points. Stimulation through pressing creates sensations of soreness, numbness, distension, and pain, thereby dredging meridians, harmonizing Qi and blood, and balancing Yin and Yang.

**Procedure:**

1. **Point Selection:** Use a probe to locate positive reaction points on the auricle.
  - **Main points:** Large Intestine, Small Intestine, Triple Burner, Rectum, Constipation point, Pelvis, Abdomen (to regulate intestinal descending function)
  - **Adjunct points:** Lung, Spleen, Kidney, Subcortex, Endocrine, Uterus
2. **Application:** Apply seeds to selected points and press until patient feels distension and soreness. Replace weekly, using alternate ears.
3. **Frequency:** Instruct patient to press each point 3-5 times daily, 1-2 minutes per point, for 2 weeks per course.

**Precautions:**

- Instruct proper pressing technique

- Observe auricular skin condition; remove if redness, swelling, or ulceration occurs
  - Remove seeds during menstruation
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#### 4. Discussion

In Traditional Chinese Medicine, postpartum constipation results from blood loss during delivery causing sudden deficiency of nutritive blood and consumption of body fluids, leading to intestinal dryness and difficult defecation. Alternatively, pre-existing Yin deficiency worsens after childbirth, generating internal heat that scorches fluids, resulting in fluid depletion, loss of intestinal moisture, and impaired transmission. The treatment principle focuses on nourishing Qi and blood and moistening the intestines to promote bowel movements.

Abdominal acupoint massage stimulates abdominal acupoints through manual manipulation to dredge meridians, tonify Qi and blood, and promote defecation. Since postpartum patients with Qi and blood deficiency require tonification, counterclockwise reinforcing massage was applied to nourish Qi and blood, regulate intestinal Qi movement, and enhance gastrointestinal motility. Zhongwan, the Front-Mu point of the stomach, harmonizes stomach Qi; Tianshu, the Front-Mu point of the large intestine, dredges intestinal function; Qihai warms and unblocks the lower burner.

According to TCM theory, “the twelve meridians and three hundred sixty-five collaterals all transport blood and Qi upward to the face and orifices, with divergent Qi reaching the ears for hearing,” and “the ears are the gathering place of ancestral vessels,” describing the close connection between the auricle and whole-body organs. For this patient, main points (Large Intestine, Small Intestine, Triple Burner, Rectum, Constipation point, Pelvis, Abdomen) regulated intestinal descending function. The Large Intestine auricular point, corresponding to the Hand-Yangming Large Intestine meridian, works synergistically with the Lung point to ensure normal lung descending function and large intestine transmission. The Spleen point, source of transformation and generation, strengthens the spleen and boosts Qi; when Qi and blood are abundant, fluids return and bowel movements normalize. The Kidney point, opening at the two lower orifices, facilitates excretion through its Qi transformation function. Subcortex regulates cerebral cortex excitation and inhibition, dilates vessels, and increases circulation; combined with Endocrine, it promotes intestinal motility. The Uterus point promotes postpartum uterine recovery and facilitates Qi and blood circulation.

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## 5. Conclusion

In treating postpartum constipation of Qi and blood deficiency pattern, the combined intervention of abdominal acupoint massage and auricular point sticking and pressing effectively improves constipation symptoms, alleviates anxiety, and enhances patient comfort and satisfaction. This TCM nursing approach demonstrates favorable clinical outcomes. However, this study is limited to a single case report; future large-sample randomized controlled trials are needed to establish standardized protocols and evaluation criteria.

**Conflict of Interest Statement:** The authors declare no conflicts of interest.

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