



Chiropractic Newsletter

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Rainbow Polyvagal Pregnancy

Jessica came to me midway through her second pregnancy, seeking to prepare her body for birth. Her first labor had stalled, and her doctor resorted to a series of ineffective interventions that culminated in her daughter's surgical birth. After healing and thoroughly studying her experience—the way many of my VBAC (Vaginal Birth After Cesarean) moms do—Jessica decided she needed both chiropractic care to balance her pelvis and a homebirth midwife who could offer the time and compassion missing from her first experience.

When I examined Jessica, I realized her case required more than simply preparing her body for labor. Her presentation revealed signals suggesting she might also be at risk for a perinatal mood disorder. Perinatal mood disorders include postpartum depression, anxiety, anger, and psychosis. While the latter garners most of the media's attention, it is the least common, affecting 1 in 1,000 women. Meanwhile, the first three impact an estimated 1 in 7 women. These conditions, which may begin anytime between the 38th week of pregnancy and the baby's first year, are the most common complications of pregnancy. Yet they are often underreported—likely because most birth providers stop followups around eight weeks postpartum—and therefore, go under-appreciated. Common treatments include antidepressants and talk therapy that show similar rates of effectiveness, but I've been working on a hypothesis that there may be a third option.

For seven years, my office has tracked quality-of-life data during pregnancy. We published the first study suggesting women under chiropractic care experience improvements across multiple areas, including depression, during pregnancy. However, postpartum assessments often showed a decline in quality-of-life scores compared to the weeks leading up to delivery. For most parents, this makes sense; factors like disrupted sleep and reduced household



productivity are challenges we can all relate to, even without giving birth. Despite this, our peer-reviewed follow-up data suggests that within 90 days, quality-of-life scores rebound to the same levels—or higher—than those recorded before starting chiropractic care.

Our clinical experience has uncovered a trend: Mothers showing certain postural and autonomic indicators—linked to “automatic” functions like heart rate or pupil response—may be predisposed to perinatal mood disorders or more likely to experience them after a traumatic birth. What we're now studying is whether improvements in these indicators correlate with enhanced quality of life. Based on years of working with hundreds of pregnant women, my hypothesis is that they do.

Jessica went into labor at 41 weeks. Her labor progressed through the first and second stages uneventfully, and she managed the transition phase with confidence. Tragically, her baby boy never took a breath. Despite every effort by her birth providers and emergency medical personnel, he couldn't be revived.

Research emphasizes that building a community around grieving families helps create resilience to overwhelming stressors. I can't imagine a bigger stressor than losing a child. In previous Pathways articles, I've written about Polyvagal theory and how the social aspect of our nervous

system impacts health and development. This part of the nervous system, which fosters connection and problem-solving, strengthens through supportive interactions, much like exercise strengthens muscles.

I knew that before Timothy's birth, Jessica needed extra support. After his loss, it wasn't a question of whether she needed help, but how soon and for how long I could offer it. I relied on one essential tool, the chiropractic adjustment, to help regulate her internal neurological communication as she grieved. I also had another resource: the Pathways Connect meetups I'd been hosting for seven years. These groups have consistently rallied around families in need—whether milk-banking for moms undergoing medical treatments, supporting families displaced by Hurricane Irma, or helping grieving mothers overcome a loss.

Our office adapted Jessica's schedule to give her private time for adjustments until she felt ready to see other babies in our practice who were born around Timothy's due date. Her church organized a meal train to ease her family's load. Over six months, Jessica began processing her feelings and connecting with others. During this time, we watched her neurological indicators of brain function gradually improve. She continued to benefit from weekly adjustments until she transitioned to bi-monthly visits, coinciding with her return to a more neurotypical state. Six months later, Jessica had news for us—she and her husband were expecting their next child.

Scientists have long studied how a mother's internal environment influences her developing baby. Mothers are often encouraged to listen to classical music, quit smoking, eat healthier, or start light exercise to optimize brain development. Since the 1980s, cell biologist Dr. Bruce Lipton has presented evidence suggesting that maternal thoughts and emotions create a cascade of chemicals that affect the baby's perception of the outside world. "Am I in a safe place," the baby seems to ask, "or do I need to activate

my DNA programs for survival?" Polyvagal theory further reinforces this connection between a mother's state and her baby's development.

Jessica's third pregnancy became an opportunity to give support and to grow beyond survival mode through chiropractic care and through great community connections. Not only did this benefit her mental health, but it also positively influenced her baby's developing nervous system. Today, her daughter Juliet is a thriving, happy baby, adored by her big sister.

The combined wisdom of Polyvagal theory and chiropractic practice offers a pathway toward a new standard in maternal care—one that prioritizes connection, nervous system health, and the inherent power of the human being to be resilient. Jessica's story reminds us of our profound inner resilience when we establish and advance nervous system wellness through family-centered practices and through community relationships.

-John Edwards, DC, DACCP

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