INTRODUCTION

• Recent social media trends have demonstrated increased interest in dancing during the final weeks of pregnancy and labor.1,2
• However, there is limited evidence about dancing during labor and its impact on labor pain and duration, as well as patient satisfaction.
• To our knowledge, only one randomized controlled trial identified that mean pain and patient satisfaction scores were significantly better in the dance labor group when compared to the control group.3

AIMS

• As enrollment is often challenging for prospective research, our primary objective was to determine pregnant women’s willingness to participate in a future study that aims to evaluate low-impact dance during labor.
• Secondarily, our study aimed to evaluate pregnant women’s perception of low-impact dance as a non-pharmacological alternative for pain management during labor.

METHODS

Following a review of the literature:6

Eligibility

• English speaking/readling pregnant patients;
• Received prenatal care at one of three clinics;
• During June-July 2019;
• Who were offered a small treat (e.g., granola bar) regardless of participation.

Survey

• The survey was administered through REDCap Cloud:
  • Patients may have had to complete up to 23 questions regarding demographics, pregnancy information, non-pharmacologic methods for pain relief during labor, and interest in future study participation.

Statistics

• Descriptive statistics and Fisher’s exact test were used as appropriate.
  • *p < 0.05 was considered significant.
  • All data was analyzed using SAS 9.4 (SAS institute, Cary, NC).

RESULTS

• 177 pregnant women were approached to participate
• 33 women declined to participate
• 12 did not meet eligibility requirements
• 132 surveys were completed (74.6% completion rate)
• Only 58 (43.9%) participants had heard of dancing during labor.
• African American patients (P=0.01), as well as patients < 35 years of age (P=0.04), were more likely to be interested in future study participation.
• There were no other statistically significant differences in characteristics (e.g., BMI, current activity level, pregnancy history, etc.).
• Overall, 78% of participants were interested in alternative options for pain relief including low-impact dance and changing positions (Figure 1).
• In a future study:
  • 47.9% (N=56) preferred dance moves were provided
  • 34.2% (N=40) preferred music was provided
  • More than 70% wanted either a video clip or photo of themselves dancing.

CONCLUSIONS

• There is sufficient interest in low-impact dance during labor as a non-pharmacological option for pain management.
• Although there will inevitably be challenges for conducting a sufficiently large, prospective, randomized trial, our survey results identified that women responded favorably to participating and, therefore, enrollment may be more feasible than previously anticipated.
• Ultimately, this study has the potential to inform a prospective study on low-impact dance to strengthen the current evidence available on low-impact dance in laboring women.

REFERENCES

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