A Modern Midwife's Experience
With Ancient Maya Techniques of Abdominal/Uterine Massage

by Anne Hirsch

We are taught in modern midwifery that the way the uterus lies in the pelvis is of little consequence. We might know that it is retroverted or anteverted, but we do nothing about it. We are told it makes little difference except in extreme cases in which a growing pregnant uterus might become trapped if it is very retroverted.

The Maya see this differently. They say that how the uterus lies in the pelvis makes all the difference. My experience with ATMAM has shown this to be correct.

As a Certified Professional Midwife (CPM) providing homebirth services, I work only with healthy women who have normal uncomplicated pregnancies. My practice is personal and wellness-oriented with a strong focus on nutrition, which helps women avoid many common discomforts associated with pregnancy.

Some women still have to put up with those pesky annoyances: aching hips, painful ligaments, a tight back, sciatic pain and pelvic pain. In the past, I have had to say, "This is just part of pregnancy." That is, until I learned about ATMAM. These techniques have changed the way I practice midwifery. Now I can offer relief where once I had little ability to help. Let me give you some examples.

At a recent client’s prenatal I was confronted with a somewhat agitated woman who said she had not slept well for two nights. Her back felt jumpy. Her hips hurt. She just could not get comfortable. She had even tried sleeping on a bean bag chair in a position that gave relief for a while but then the discomfort returned. "Well then," I said, "let's give you a Maya massage!"

She relaxed deeply during the treatment, which included the uterine massage and the sacral work that Dr. Rosita Arvigo teaches. Afterwards this woman felt a bit better and looked remarkably more relaxed. I asked her to go for a walk to allow the corrections to the hips to settle in.

The next week she reported that all discomfort had gone. She was sleeping well and back in bed with her husband. The discomfort never returned and she was able to enjoy the final weeks of her pregnancy until she gave birth. I was astounded and very happy I’d been able to help her!

Another one of my clients, a woman at 26 weeks gestation, complained that her uterus was very uncomfortable. Before she was pregnant she had been in an automobile accident in which the car she was riding in was displaced.

Symptoms of a Displaced Uterus

Menstrual symptoms include painful periods; late, early or irregular period; dark thick blood at the onset or end of menstruation; excessive bleeding and clots during menses; headache or migraine with menses; and premenstrual syndrome (PMS).

Urinary symptoms include frequent urination, bladder infections and incontinence.

Ovulatory symptoms include failure to ovulate, irregular ovulation and painful ovulation. Circulatory symptoms include varicose veins of the legs and hemorrhoids; tired weak legs, numb legs and feet, especially while standing.

Musculoskeletal symptoms include sore heels when walking and low backache.

Symptoms of congestion include endometriosis, uterine polyps, uterine fibroids, uterine infections, vaginal yeast infections and vaginitis, painful intercourse and unresolved pelvic pain.

Other symptoms including constipation, difficult menopause and cancer of the cervix, uterus or colon can all be related to a displaced uterus.

Pregnancy symptoms that can be treated with ATMAM: pubic symphysis pain, pelvic pain, sciatic pain, back pain, achy hips, malposition of the fetus, lack of descent and prevention of postdates pregnancy.