

midirs Writes



Editorial comment on issues addressed
in this month's Essentially MIDIRS...

January 2013 • Volume 4 • Number 1



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Comment by

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Association, prediction and soothsaying

If you are reading this, then it is likely that the world did not end in December 2012 and that we have made it to 2013 relatively unscathed. I cannot say this for certain, of course, because I am not a soothsayer. I suppose it is possible that a cataclysm did occur as the Mayan calendar passed from one b'ak'tun into another on 21st December but that – in contrast to every disaster film made since 1950 – the focus of any survivors was not on gathering food, but on breaking into MIDIRS office in an attempt to preserve the knowledge contained in *Essentially MIDIRS* and *MIDIRS Midwifery Digest* for future generations. If this did happen, then please feel free to help yourself to my chocolate stash which is hidden in my top drawer. But I think all of these things are unlikely, and one of the reasons I feel confident that my editorial will one day reach its intended readership is because,

when it comes to our ability to take something which appears factual (such as an element of an ancient calendar, or a finding in a research study) and calculate what it actually means, signifies or predicts, we humans don't exactly have a fabulous track record.

We have been thinking about knowledge quite a lot over the past few months as we have developed our new *Evolution of the Theses* series (Cooper & Wickham 2012) and shared Sandra's information journey with you in *The Joy of Information*. Sandra's journey culminates in this issue (Wickham *et al* 2013), and we are delighted that Sandra found time to write up her work and share it with us (Midwife 2013). Just as Sandra's article was about to be published, we spotted an interesting and related paper in the November edition of the journal *Human Reproduction*. In this, Facchinetti *et al* (2012) report on their retrospective study which

involved 700 women in Northern Italy. They set out to look at the frequency of use of herbal products during pregnancy and question whether they adversely affect pregnancy outcomes and found – as do most such studies – that a good proportion of women use herbal products, sometimes on a daily basis. The topical application of almond oil appears to be a popular remedy for stretch marks, with 56.6% of women saying they used it, but Facchinetti *et al* (2012) found a possible association between the daily massaging of almond oil into the skin and preterm birth, '...even after controlling for confounding factors such as smoking habit and multiple pregnancies' (2012:3165).

While they acknowledge that their findings should be interpreted with caution due to the retrospective nature of their study, Facchinetti *et al* (2012) speculate about possible mechanisms by which the topical application of almond oil might bring on early labour.

Yet while each of their theories seems plausible, they rely on leaps of deduction that some may not consider justifiable. Firstly, they suggest that spreading oil on the abdomen may mechanically stimulate the myometrium and thus stimulate contractions — which seems fair enough as a theory. However, Facchinetti *et al* then attempt to support this theory by noting that users of almond oil were more likely to receive tocolytic drugs. Surely the very fact that — whether coincidentally or because of some causal relationship — women who used almond oil experienced a higher likelihood of preterm birth means it is almost inevitable that they are also going to have received more tocolytic drugs?

Facchinetti *et al*'s next theory considers that '*...one or more components of almond oil might penetrate the tissue and produce some uterotonic effects*' (2012:3165). In support of this, they add that:

'In fact, almond oil has been successfully used as a solvent to carry herbal cocktails for the treatment of dysmenorrhoea in Korean high-school girls (Hur et al., 2012), suggesting that this compound can effectively target the myometrium' (Facchinetti *et al* 2012:3165).

But if it is being used as a solvent then by implication it is a solvent for something that is considered to have greater therapeutic properties? Indeed, my understanding is that almond oil is used to carry other essential oils in massage blends **because** it is relatively inert, and that some of these other oils are deemed to have a much greater effect than sweet almond oil. This is not to say that almond oil has no therapeutic properties or that our current view of it is correct but Facchinetti *et al* (2012) do not even mention whether women used almond oil alone, whether it was used in combination with other essential oils, or whether this question was even asked.

It is Facchinetti *et al*'s conclusion which raises the issue that I would most like to offer for discussion, however:

'... the use of herbal products during pregnancy is common and popular despite being poorly studied. This frequent use is particularly worrisome because many of these compounds are taken without an expert physician's advice and are often not supported by adequate information [...] The association between the daily topical use of almond oil and PTB raised a hypothesis that requires further confirmation. It is important to emphasize that more data are needed to clarify the causality of this relationship' (Facchinetti *et al* 2012:3166).

So the authors do acknowledge that their finding is by no means confirmed, and is purely a hypothesis. Hypotheses are very important in the development of knowledge, and it is possible that this

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one might turn out to be a landmark finding which changes our knowledge. Some hypotheses, however, have a tendency to wriggle off the pages of journals and into discussion in practice (and, of course, tabloid newspapers) and become 'facts' that are shared with women before they are adequately tested, and I realise that I may be playing a part in the propagation of an unproven link by giving the study more airtime in these pages. Or, if this study turns out to be the first step in discovering that stretch mark oil is a major factor in preterm birth, then I may have helped get the word out at an early stage. We just don't know whether this finding means anything real or not, because we're not soothsayers, and we can't predict the future, and yet we still have to decide what to do with it. We also have to decide whether, like Facchinetti *et al* (2012), we take the position that women need to take 'expert' advice on everything and should not even use stretch mark oil without professional say-so, or whether, like Sandra Midwife (2013) we are willing to engage with the complexity, reflect on the issues and encourage women to tap into their own knowledge, relying on experience and intuition as well as the evidence that is available in a particular area.

Our inability to know for certain what will happen next week, month, millennium or b'ak'tun isn't (at least in my opinion) a bad thing, but the fact that humans have to live with uncertainty on a daily basis means it is imperative that we engage with the questions which arise from our never-ending search for information. We will of course continue this engagement in *Essentially MIDIRS*, but I am going to ask you to wait until next month for specific details because I don't want to overshadow the very exciting news which you may have spotted on



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page 24; that Nadine Edwards and Becky Reed have recently become the new editors of *MIDIRS Midwifery Digest*. The EM team would like to extend our own very warm welcome to Nadine and Becky: we are delighted that they have joined us, and are really looking forward to working with them.

References

- Cooper T, Wickham S (2012). Folic acid supplementation before and during pregnancy: Part 1. *Essentially MIDIRS* 3(9):34-9.
- Facchinetti F, Pedrielli G, Benoni G *et al* (2012). Herbal supplements in pregnancy: unexpected results from a multicentre study. *Human Reproduction* 27(11):3161-7.
- Midwife S (2013). Stretch marks: results of an Information journey. *Essentially MIDIRS* 4(1):46-9.
- Wickham S, Cooper T, Roe J (2013). The Joy of Information: Part 5: Anatomy of an abstract. *Essentially MIDIRS* 4(1):40-4.

