HEAT OR COLD THERAPY

Key words: pain relief, labour analgesia, non-pharmacological pain relief, heat packs, cold therapy, heat therapy, hydrocollator

AIM

- To reduce pain and provide a comfort measure for women in labour.

BACKGROUND INFORMATION

Superficial application of hot or cold therapy is a common and popular choice for women in labour, with minimal side effects when appropriately used.\(^1\) Superficial heat may be generated from hot packs, hot moist towels, heated silica gel packs, warm towels, baths and showers.

Superficial cold can be produced from covered ice bags, frozen silica gel packs and towels soaked in icy water.\(^2\)

Research indicates that the application of warm compresses to the perineum during late second stage assists in relieving pain, providing comfort\(^3,4\) and reducing perineal trauma.\(^5\)

KEY POINTS

1. Ensure the woman has no contra-indications to hot or cold application prior to use.
2. One to two layers of cloth should be placed between the woman’s skin and the hot or cold pack.\(^1\)
3. Wheat bags/ hot water bottles should not be used at KEMH.
4. Microwave ovens should not be used for heating packs.
5. Hot packs shall only be heated in a hospital approved heating device with thermostatic control. The temperature of the heating device is to be checked daily; it should be between 71 -74 °C. The device is to be emptied and cleaned weekly.

CONTRA-INDICATIONS TO HEAT OR COLD APPLICATIONS

- Avoid use of hot or cold applications in regions of impaired sensation (e.g. with analgesia or anaesthesia such as epidurals)\(^1\), impaired consciousness / cognition, or with those having language and communication difficulties.
• **Avoid heat application** on a woman if she experiences any of the following:
  - impaired circulation
  - acute inflammatory conditions
  - heat intolerance
  - areas of recent bleeding / haemorrhaging
  - open wounds
  - cardiovascular impairment
  - damage of infected tissue
  - oedema
  - current febrile condition
  - if unable to communicate when the use of heat becomes uncomfortable

• **Avoid cold applications** on women with:
  - cold urticarial / hypersensitivity (cold-blisters, hives, itching or prolonged ‘goosebumps’)
  - cold intolerance
  - cryoglobulinemia (gelling of the blood / vasculitis)
  - hypertension (because of vasoconstriction)
  - peripheral vascular disease
  - cardiac disease
  - sickle cell anaemia (hypothermia may precipitate a painful episode)
  - Raynaud’s disease

**MANAGEMENT**

1. Ensure there are no contra-indications to heat or cold application.
3. Women may tolerate more extremes of temperature during labour than usual. Test the temperature of the hot or cold pack by pressing onto the forearm of the caregiver for several seconds prior to applying to the woman.

For heated water therapy for labour pain management see Clinical Guideline, O&M, Pain Management in Labour: **Water Therapy**.

For cold therapy relevant to postpartum perineum care, see also Clinical Guideline, O&M, **Postnatal: Maternal**: **Perineal Care**.
REFERENCES / STANDARDS


National Standards – 1- Clinical Care is Guided by Current Best Practice; 2- Partnering with Consumers and/or Carers to Design the Way Care is Delivered to Better Meet Patient Needs and Preferences; 3- Preventing and Controlling Healthcare Associated Infections

Legislation - Nil

Related Policies - WNHS: W104 Infection Control Policy

Other related documents – KEMH Clinical Guidelines:

- **OGCCU:**
  - Obstetrics & Midwifery: [Pain Management in Labour](#); [Water Therapy](#)
  - Obstetrics & Midwifery: [Postnatal: Maternal: Perineal Care](#)

- **Infection Control Manual:**
  - Section 4: Infection Prevention and Control in the Hospital Environment: [WNHS Cleaning Policies and Procedures Manual](#) (Patient Support Services)
  - Section 5: Antiseptics, Disinfection and Sterilisation: [Cleaning, Disinfection and Sterilisation Policy 5.1](#)

**RESPONSIBILITY**

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