Indications for Massage

Indication – condition for which an approach would be beneficial

Contraindication – condition for which an approach could be harmful

Types of contraindications:

- General avoidance of application
- Regional avoidance of application
- Application with caution

A caution is a condition that requires the massage therapist to adapt the massage process so that the client's safety is maintained.

Examples of each type of contraindication?

General avoidance: infectious diseases, pulmonary embolism, uncontrolled hypertension

Regional avoidance: open wounds, bruises, athlete's foot

Application with caution: rheumatoid arthritis, hyperthyroidism, diabetes mellitus

Based on objective and subjective health-enhancing benefits or results:

Objective results can be measured and observed.

Subjective results are assumed effective based on experience.

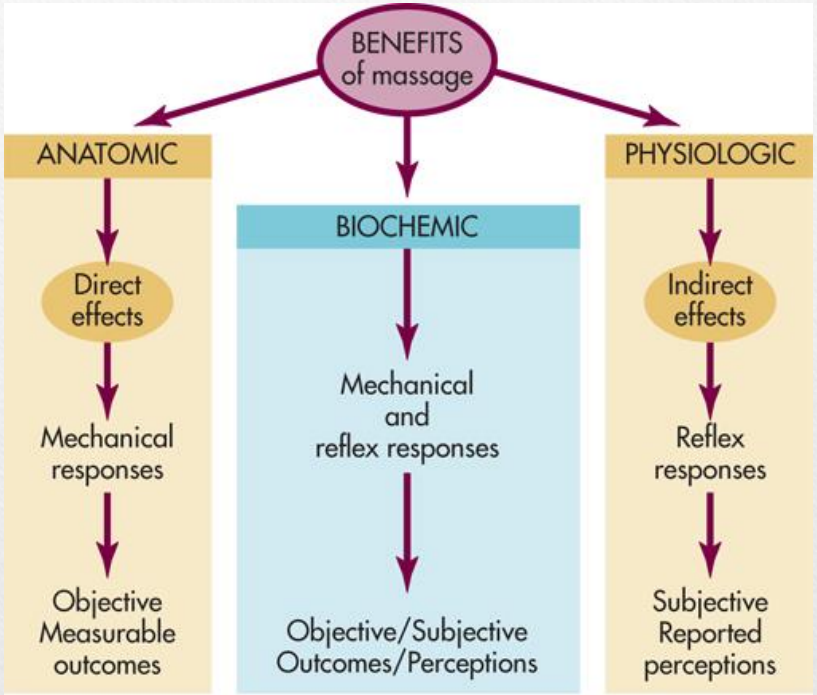
Effects of massage are physical (objective) and mental (subjective).

A client's words and body language can reveal how he or she perceives the treatment's effectiveness

Anatomic benefits are measured objectively.

Biochemic benefits can be both objective and subjective.

Physiologic benefits must be reported subjectively.



The benefits, effects, responses, and outcomes can occur separately, combined, or as a result of one another

How would explaining the benefits of massage to a nurse be different from explaining them to an athletic trainer?

Nurses and athletic trainers generally work with different groups of clients who have different goals in seeking massage therapy. A therapist might talk with a nurse about benefits for postoperative recovery, interactions with medications, and in terms of physiologic processes. An athletic trainer might be most interested in keeping athletes healthy, assisting in injury recovery, and in pre- or postevent sports massage.)

Approaches to Care: Therapeutic Change

Therapeutic change – modification of physical form or function

Requires:

- Practitioner – must have appropriate knowledge and skills and network of support from other professionals
- Client – must have the motivation and resources to complete a change process

What are some questions a therapist might ask to determine whether a client is a good candidate for a therapeutic process?

Do you feel supported at home?

Can you make time for the necessary exercises?

Are there any positive aspects to the situation as it exists?

Therapeutic change might be unrealistic at a particular time or under a certain set of circumstances.

Condition management or palliative care can be offered instead.

Example: Athletes

Because athletes are looking to improve their physical qualities to compete, massage could improve flexibility, enabling them to push off more efficiently and run faster.

Even when change is indicated by a client's condition, it is not always realistic.

The constraints of each individual's situation determine the approach the massage therapist should take.

Approaches to Care: Condition Management

Condition management – support for clients unable to undergo therapeutic change process for various reasons:

- Chronic health condition
- Life circumstances that create chronic stress
- A situation for which change is not viable
- Need to postpone time frame for change

Clients in many life situations, such as pregnancy, a long-term illness like cancer, or even a change of job, might prefer condition management until they are able to devote more time and energy to a therapeutic change process

Massage benefits:

- Physical
  - Managing existing physical compensation patterns
  - Sometimes slowing progression of chronic conditions
  - Preventing a situation from becoming worse
- Emotional
  - Can assist in the management of physical stress symptoms allowing client to cope better
  - Accounts for the largest client base for therapeutic massage

Why do you think condition management is the largest client base for massage therapy?

Dysfunction and chronic health conditions and pain are widespread, and most people want relief from discomfort but don't have the necessary time or resources for therapeutic change.

Approaches to Care: Palliative Care

Palliative care – attempts to relieve and reduce the intensity of uncomfortable symptoms, but does not produce a cure

Massage aimed at reducing suffering

Palliative care is provided when the client's condition is most likely going to worsen and degenerative processes will continue (e.g., terminal illness, dementia).

Palliative care is also appropriate when the condition should not be changed or the person does not desire a specific outcome other than pleasure and relaxation

Determining the Type and Timing of an Approach

Questions to ask:

- When is change appropriate?
- When is change not desirable and condition management and palliative support are more appropriate?
- How does the massage professional determine what type of care is appropriate: therapeutic change, condition management, or palliative care?
- How does the massage professional know when transitions occur in types of care?

Palliative care can progress to condition management, and with the gradual restoration of energy, the client may even progress to a therapeutic change process.

Eventually a therapeutic change process ends or transforms, and condition management, such as stress management, becomes the professional focus once again.

Pathology

Pathology – study of disease

Trauma – abrupt shock or injury to the body or psyche

To practice safely, massage practitioners need a basic understanding of pathologic processes.

A basic understanding of pathologic processes and pharmacology is helpful:

to refer appropriately;

to recognize contraindicating symptoms;

to recognize general types of disorders, specific signs and symptoms, and the development of disease processes; and

to understand possible interactions between medications and massage.

Health

Health—optimal functioning with freedom from disease or abnormal processes

Factors that influence health:

- Inherited (genetic) and constitutional traits
- Lifestyle (diet, exercise, rest, stress level)
- Beliefs and attitudes, self-esteem, loving relationships
- Authentic personality and freedom from self-hindering patterns

Clients who feel empowered to act on their own behalf tend to have a positive frame of mind that can positively affect massage therapy outcomes

Dysfunction

Dysfunction – the in-between state of "not healthy" but "not sick"

Prepathologic states often are not apparent using Western diagnostics.

Effective approaches to dysfunction include mind/body medicine, stress management, and prevention methods.

Active pathologic processes often require more aggressive treatment.

Dysfunction is prepathologic and responds to the activation of innate healing processes that these approaches offer.)

Peak Performance

Maximal conditioning and function to a particular action

- Physical or mental
- Energy consuming and stressful

Injury, depletion, and illness can result:

- If the lifestyle does not support recuperation time
- If anatomic or physiologic limits are exceeded

Peak performance isn't just for athletes. For example, consider this series of events that leads from health to pathology, in which peak performance plays a role:

An 18-year-old woman with a family history of neurologic disease and a personal history of poor nutrition and lack of exercise is deprived of sleep for months by her newborn child. She suffers from postpartum depression. She becomes pregnant again when the baby is 9 months old.

Financial stress and family illnesses continue, as does her pattern of inadequate nutrition, sleep, and exercise. At 21 years old, she is diagnosed with multiple sclerosis.

Disease

Homeostasis – the relative constancy of the body's internal environment

Disease conditions:

- Acute – homeostasis restored quickly
- Chronic – homeostasis may never be restored; compensation develops

Compensation is the process of counterbalancing a defect in body structure or function.

Homeostasis – the relative constancy of the body's internal environment

Disease or pathology occurrence

- Homeostatic and restorative body mechanisms break down or can no longer adapt
- Illness usually requires a series of events
- Stress levels and lifestyle are contributing factors

Consider two people who are exposed to the same pathogen, but one falls sick and the other experiences no effects. What processes could have affected this outcome?

The sick person's immune system was probably already impaired in some way at the time of infection, such as from stress, lack of sleep, poor nutrition, an existing illness, or lifestyle choices like smoking.

Functioning Limits

Limits may be anatomic and physiologic.

The body signals fatigue, pain, or strain when limits are reached.

Extraordinary events can push the body's limits.

Functioning reserves are available and are replaced by the body.

Some specific signs of physiologic fatigue and strain are sore muscles, cramps, trembling, shortness of breath, profuse perspiration, weakness, and dizziness can all signal that a person is nearing functioning limits.

Dysfunction results of depleted reserves:

- Early massage intervention may support healing and restoration.
- Pathology requires a multidisciplinary approach.

Dysfunction is related to attempts to maintain a higher energy reserve.

- Overstretched muscle patterns are reset to prevent further strain, slightly limiting ROM.
- Continuing dysfunction leads to compensatory habits.

Massage intervention right after a first event can be an effective support for repair and restoration of function.

Client cooperation in developing new habits is important.

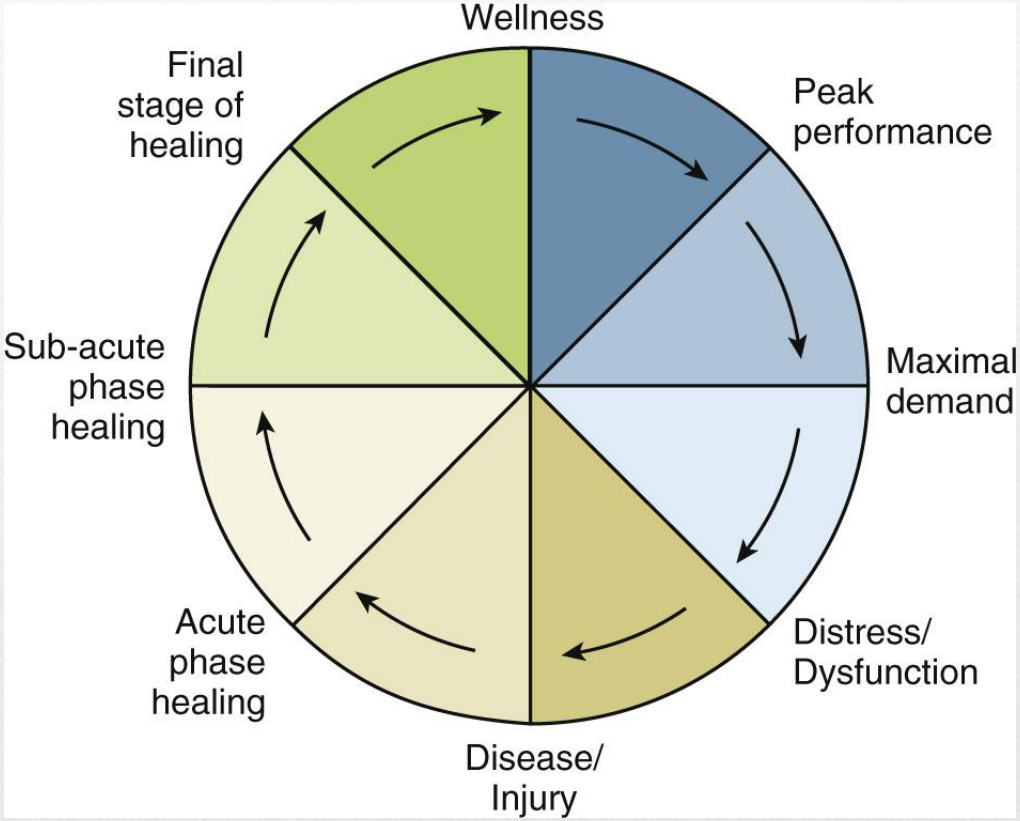
After dysfunction has set in, an intervention should be applied at the point where ROM limits were first observed.

A more complex intervention plan is necessary.

Why is the supervision of an athletic trainer important when working with a professional athlete?
A trainer's considerations, such as the athlete's training and game or meet schedules, must be considered when preparing a massage care plan. The trainer may also share valuable information for the therapist about injuries or medications.

Health, wellness, and injury continuum

A therapist can support a current healing process by properly assessing the situation and referring if necessary. Massage can activate the parasympathetic response and increase the circulation generally and to specific injured areas.



Development of Pathologic Conditions

Illness

- Occurs when a body process breaks down
- Tends to indicate general cautions and contraindications

Therapeutic massage has widespread effects on the physiologic functions of the body.

Therefore, the massage professional must learn about pathologic conditions, contraindications, and endangerment sites.

Injury:

- Occurs when tissue is damaged
- Creates regional cautions and contraindications

Incorporate aspects of general constitutional massage:

- Reflexive in nature
- Reduces stress load so the body can heal
- Supports the body's healing responses

Injuries include wounds (cuts, lacerations, punctures, burns, and blisters), hematomas (bruises, black eyes, and "broken blood vessels"), broken bones, muscle sprains and strains, and tearing or damage to connective tissues.)

Healing taxes the body's reserves.

Massage for injuries can address edema, pain, circulation, approximation, scar tissue formation.

Illness and injury:

- Inflammation is a factor.
- The therapist must refer clients for diagnosis and/or treatment.

Signs are objective abnormalities seen or measured by someone other than the client.

Symptoms are subjective abnormalities felt only by the patient.

Syndromes are groups of signs and symptoms, usually from a common cause.

Diseases and injuries are identified (diagnosed) by their signs and symptoms.

What might be some signs of a common cold? Signs of a cold can include fever, sneezing, coughing, and nasal and chest congestion.

What are the symptoms of a cold? Symptoms, as experienced by the patient, might include chills, headache, and fatigue.

Acute diseases develop signs and symptoms quickly, last only a short time, and then disappear.

Chronic diseases develop slowly and last for a long time.

Communicable diseases can be transmitted from one person to another.

Examples of acute, chronic, and communicable diseases?

Acute: appendicitis, influenza, conjunctivitis

Chronic: Alzheimer's disease, asthma, cancer, diabetes, tuberculosis

Communicable: influenza, syphilis

Risk Factors

Risk factors are predisposing conditions that make disease or injury more likely, including:

- Genetic or inherited traits
- Age-related or biologic factors
- Lifestyle
- Environment
- Preexisting or primary conditions
- Stress

Genetic or inherited traits

E.g., breast cancer gene, family history of disease

Age-related or biologic factors

E.g., age-related musculoskeletal problems

Lifestyle

E.g., poor diet, smoking, alcohol consumption, sedentary lifestyle, physical risk taking

Biologic and behavioral factors increase the risk of developing certain diseases or injuries at certain ages.

Environment

E.g., air pollution, snow and ice

Preexisting or primary conditions

E.g., primary viral infection leading to secondary bacterial infection

Stress

E.g., any substantial change in routine or any activity that forces the body to adapt

Stress places demands on physical, mental, and emotional resources.

Research has shown that as stresses accumulate, especially if the stress is long term, the individual becomes increasingly susceptible to physical illness, mental and emotional problems, and accidental injuries.

General Adaptation Syndrome

Three stages:

- Alarm (fight-or-flight response) – body's initial reaction to stressor
- Resistance reaction – secretion of hormones allows body to continue fighting or to endure a stressor after effects of alarm reaction have dissipated
- Exhaustion – occurs if stress response continues without relief

Dr. Hans Selye, a pioneer in stress research, labeled the body's response to stress the general adaptation syndrome (GAS).

The GAS describes the way the body mobilizes different defense mechanisms when threatened by harmful stimuli, whether perceived or real.

General Adaptation Syndrome

A prolonged or excessive "fight-or-flight" response can disrupt normal functioning throughout the body.

General adaptation syndrome (GAS) alerts us to the presence of stressors that could injure us or lead to pathology. It accesses reserves that give us a window of opportunity to remove or reduce the stressor.)

Generalized stress conditions

The hypothalamus acts on the anterior pituitary to release adrenocorticotropic hormone.

This stimulates the adrenal cortex to secrete glucocorticoid.

The ANS is stimulated by the adrenal medulla's release of epinephrine and norepinephrine.

Prolonged stress leads to harmful levels of glucocorticosteroids.

Pathologic Conditions and Indications for Massage

Massage especially beneficial for:

- Chronic inflammation
- Pain management
- Impingement syndromes
- Psychological dysfunctions
  - Somatization – anxiety disorders related to the ANS that manifest with physical symptoms

The indications for massage often are based on the beneficial effects of massage that target the body's ability to resolve inflammation, manage pain, reduce pressure on nerves, and sooth anxiety.

Inflammatory Response

Inflammatory response—processes that minimize tissue injury and promote healing

- Active, important part of healing process
- Four primary signs: heat, redness, swelling, and pain
- Occurs in response to injury and may also accompany specific immune system reactions
- Can be suppressed if more intense or prolonged than desirable

Inflammation is a healthy part of our body's natural healing process. For minor fevers or injuries in a healthy person, inflammation should be allowed to run its course. Measures can be taken to increase comfort, and the inflammation should always be monitored

Heat and redness

- Histamine, prostaglandins, and kinins are associated with inflammation.
- Dilated blood vessels increase blood volume and bring WBCs.

Swelling and pain

- Edema results from increased permeability of vessel walls.
- Increased pressure triggers pain receptors.
- Inflammatory exudate is the fluid that accumulates.

The traditional Latin words for the four signs of inflammation can help you remember them because they rhyme:

Calor—heat

Dolor—pain

Rubor—redness

Tumor—swelling

Tissue Repair

Tissue repair is a combination of two processes:

- Regeneration with similar cells
- Replacement with fibrous connective tissue (scar tissue)

Healing process goals:

- Promote regeneration, minimize replacement
- Slow the formation of scar tissue
- Keep scar tissue that does form pliable

The increased circulation of inflammation brings white blood cells and nutrients to the site of tissue damage to fight infection and regenerate or replace damaged cells. Inflammatory exudate dilutes and removes the irritant, cycling through the lymphatic system.)

Inflammatory Disease

- Productive local inflammation
  - Occurs in a limited area (e.g., small cut that becomes infected)
- Productive systemic inflammation
  - Occurs when irritant spreads throughout body
  - Occurs when inflammatory mediators cause changes throughout body
- Chronic inflammation
  - Inflammation that is persistent without benefit

Inflammatory conditions such as arthritis, inflammatory bowel disease, asthma, eczema, and chronic bronchitis are among the most common.

Indications for Massage

- Acute inflammatory conditions
  - Indicate cautions
  - Avoid massage during fever
  - Avoid local areas of inflammation
- Systemic inflammatory conditions
  - Avoid any approach that adds any more adaptive strain than the client can manage
  - When in doubt—don't massage

If you are in doubt about whether to massage, wait until the person is feeling better or has received clearance for massage from his or her health care provider.

Theories about how massage benefits prolonged inflammation:

- Activates release of body's antiinflammatory agents
- Triggers completion of process
- Increases lymphatic flow to dilute and remove irritant

Therapeutic massage seems to be beneficial in cases of prolonged chronic inflammation.

Therapeutic Inflammation

Therapeutic inflammation creates a controlled, localized area of inflammation to jump start healing processes.

Types of therapeutic inflammation include:

- Deep friction
- Connective tissue stretching
- Moxibustion: burning the skin
- Acupuncture

These methods are most beneficial in resolving connective tissue dysfunction, particularly fibrotic changes of muscle tissue and areas of scar tissue adhesion.

Contraindications for therapeutic inflammation include:

- Suppressed healing mechanisms
- Conditions of impaired repair and restorative functions (unless carefully monitored)
- Use of antiinflammatory medications

Pain

Utility of pain sensations:

- Cue us to protect ourselves from further hurt
- Initiate a search for medical assistance
- Help pinpoint underlying cause

Understanding the various types of pain helps the massage practitioner recognize when to refer the client to a physician.

Pain mechanisms are very important to understand.

- Pain is a complex, private, and abstract experience.
- Effective management is a major challenge.
- Pain has physiologic, psychologic, and social aspects.
- The client defines the pain experience.

Why is it important for the client to be the one to define the pain experience?

The client is the one feeling the pain. The subjective and individual experience of pain means that objective or outside observation cannot properly assess the sensations felt.

Pain Sensations

Four processes involved in pain sensation:

- Pain transduction—noxious stimuli lead to electrical activity in pain receptors
- Pain transmission—pain impulses travel through PNS to CNS
- Pain modulation—neural activity can influence pain transmission at spinal cord; also involves activity in primary afferent pain receptors
- Pain perception—subjective experience

Nociceptors – receptors for pain

- Found in almost every tissue of body
- Sensitive to any type of stimulus
- Little to no adaptation
  - Adaptation – decrease or disappearance of the perception of a sensation even though the stimulus is still present

Because of their sensitivity to all stimuli, pain receptors perform a protective function by identifying changes that may endanger the body.

What is the benefit of lack of adaptation in nociceptors? (Pain nociceptors provide a protective function by identifying changes that may endanger the body. If adaptation to pain occurred, pain would cease to be sensed and irreparable damage could result.)

Fast pain

- Local and specific
- Sensation is on surface
- Prickling, sharp, electrical

Slow pain

- More diffuse
- Felt in deeper tissues
- Burning, throbbing, aching
- Usually associated with tissue damage

"Fast" and "slow" describe how fast the sensation travels along the nerves. Fast pain travels between 6 and 30 meters per second, and slow pain travels between 0.5 and 2 meters per second.

For example, your thumb is about a meter from your brain. When you hit your thumb with a hammer, you would probably feel fast, stinging pain in the first tenth of a second.

After one second, you would begin to feel the slow, throbbing pain in the entire thumb and even in the hand.

Pain transmission to cerebral cortex

- Neospinothalamic tract carries type A (fast pain) nociceptors to thalamus
- Paleospinothalamic tract carries type C (slow, chronic pain) nociceptors to brainstem

Pain is called a thalamic sense, because it is probably brought to the consciousness in the thalamus.

Influences on perception of pain:

- Emotional interpretation—hypothalamus and limbic structures
- Rational interpretation—frontal cortex
- CNS mechanisms
- Neurotransmitters and neuromodulators (substance P, acetylcholine, norepinephrine, epinephrine, dopamine, serotonin)
- Endorphins

Mechanisms stimulated by massage to reduce pain perception include gait control, counterirritation, hyperstimulation analgesia, and changes in neurotransmitters and hormones.

The pain threshold is the point at which a stimulus is perceived as painful.

- Varies somewhat among individuals
- Perceptual dominance—some pain overshadows other pain; can be activated by massage that "hurts good"

Pain tolerance is the duration or intensity of pain endured before relief is sought.

- Varies widely among individuals

Pain tolerance can be increased by warmth, cold, distraction, alcohol consumption, hypnosis, and religious beliefs or faith. It can be decreased by repeated exposure to pain, fatigue and sleep deprivation, or stress.)

Origins of Pain

Origins of pain

- Somatic—from stimulation of skin, skeletal muscle, joints, tendons, and fascia
- Visceral—from stimulation of internal organs

Cortex accurately locates origin of most somatic and some visceral pain

Types of Pain

Acute

Chronic

Intractable

Phantom

Referred

Acute Pain

Acute pain is a disease symptom or a temporary treatment aspect.

- Warning signal that arouses sympathetic nervous system
- Temporary, sudden onset, localized
- Client is often able to describe it
- Arouses sympathetic ANS

Some examples of treatments that, with no anesthesia or analgesia, would cause temporary acute pain?

Surgery, stitches, chemotherapy treatments, immunizations, IV's or shunts.

Chronic Pain

Chronic pain persists or recurs for indefinite periods, longer than 3-6 months

- Major health problem for many
- Obscure onset
- Character and quality can change
- Anxiety, sleep disturbances, depression common
- Multidisciplinary approach to treatment

Often, because the onset of chronic pain is so gradual, a patient will be unable to pinpoint a date or time when the pain started.)

Intractable Pain

Intractable pain is persistent with treatment or without demonstrable disease.

- Poses greatest challenge to health care providers
- Massage provides temporary relief through distraction.

The word intractable describes something that cannot be cured, changed, or moved.

Phantom Pain

Phantom pain after an amputation

- Pain or other sensations seem to originate from amputated extremity.
- Brain misinterprets stimuli from proximal portions of sensory nerves.

Phantom pain is different from "stump" or residual pain, which occurs at the site of the surgery.

Certain conditions, especially ones that involve pain in the limb before amputation, are more likely to result in phantom pain afterward.

Phantom pain can be triggered by changes in weather, pressure on the remaining part of the limb, fatigue, or stress.

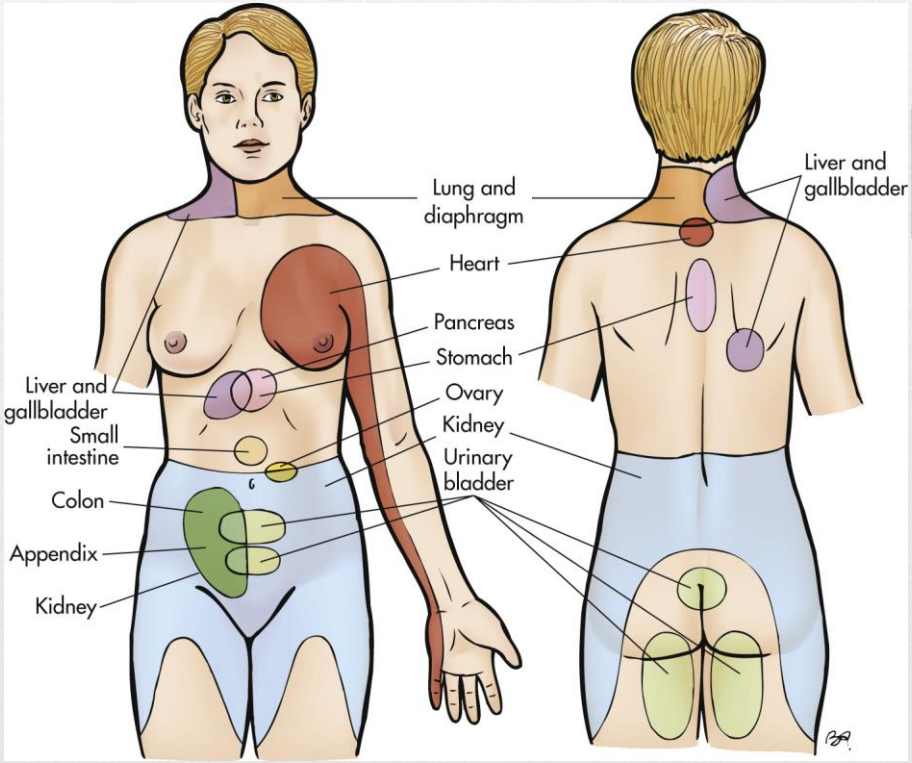
Referred Pain

Referred pain is felt far from its origin.

Visceral pain and deep somatic pain can refer.

A diagnosis must be obtained from a physician.

Because somatic pain is much more common than visceral pain, the brain has "learned" to project the pain to the somatic area.

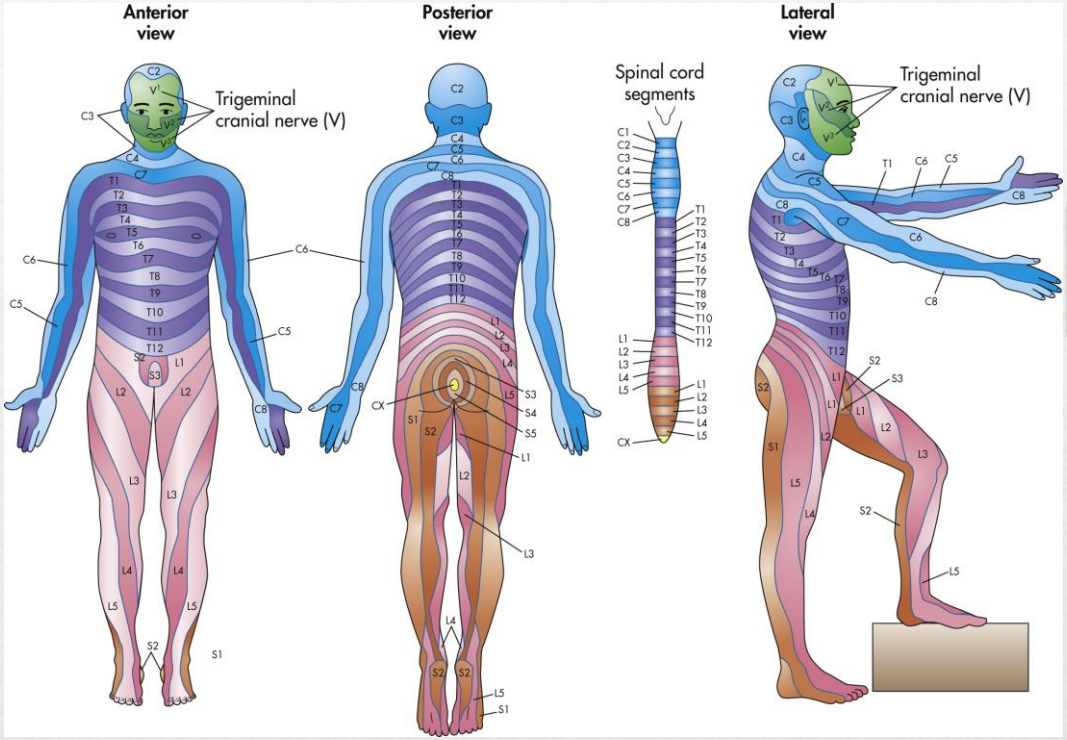


Referred area and origin innervated by same spinal nerve

Usually, both structures from same dermatome

If a client complains of pain of unknown cause at the proximal lateral thigh, what are some possible causes based on the chapter reading?

Referred pain from the kidney, lateral muscle pain, or nerve impingement at L5.



Evaluation of Pain

By location—localized, projected, radiating, referred

By type—pricking or bright, burning, aching, deep (pain-spasm-pain cycle), muscle

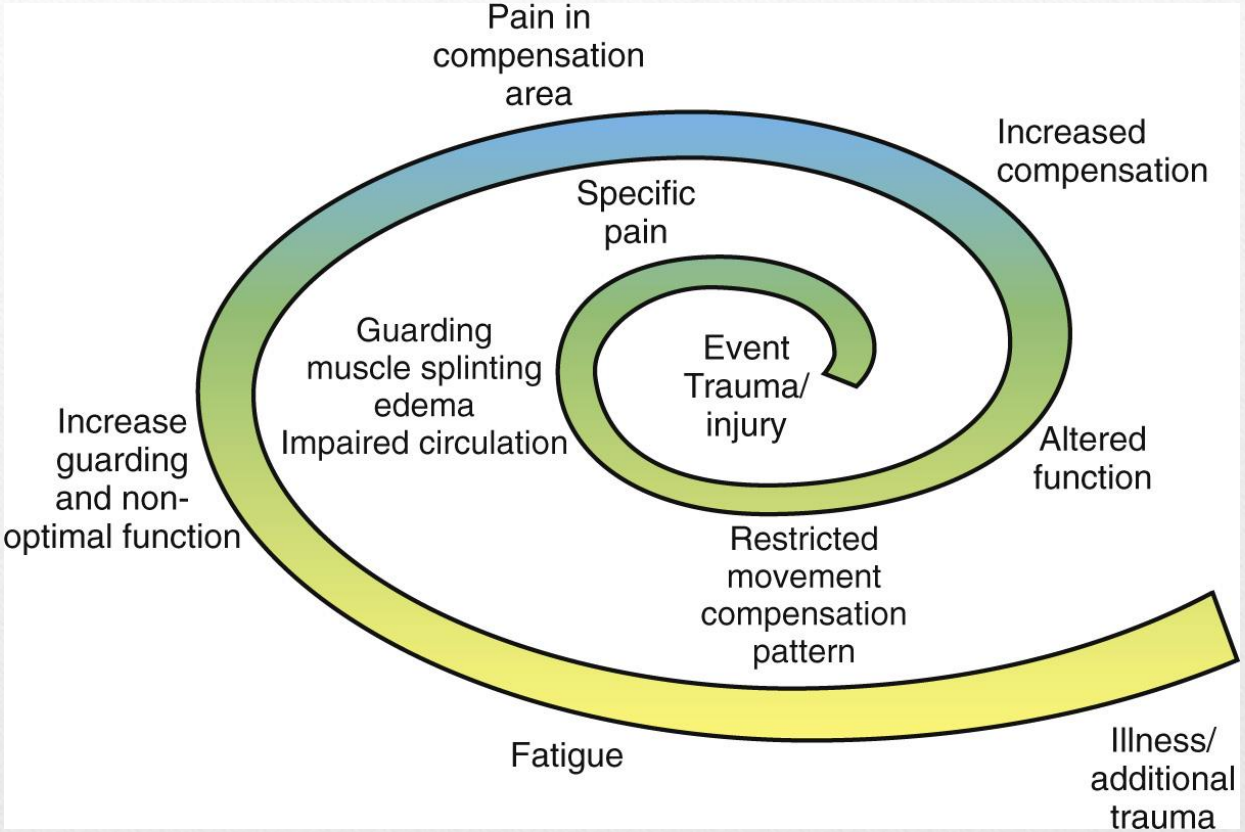
Pain is referred away from the origin and felt only at the referred site, often quite removed.

Radiating pain is diffused around the origin and is often not well localized.

Projected pain is a result of nerve compression and is felt in the tissue supplied by the nerve.

Pain-Spasm-Pain Cycle

The figure shows how splinting inhibits healing by reducing circulation.



The pain-spasm-pain cycle is a result of reflexive contraction of skeletal muscles near the site of pain. If the muscles are relaxed, the pain returns, and the cycle starts over.

Splinting, or muscle guarding, is an extended, protective muscular spasm that braces the area against pain-inducing movement.

Pain Assessment

Sources of information for assessment:

- Subjective information from the client
- Direct observation of verbal and nonverbal information
- Gender and cultural differences in expression

Sympathetic responses to acute pain:

- Decreased ROM
- Muscle guarding
- Trigger points
- Areas of increased or decreased sensitivity

What are some pain assessment questions a therapist might ask?

How long have you felt the pain?

Is the sensation intermittent or steady?

Describe the quality: sharp, throbbing, burning, etc.

How severe (on a scale) is the pain?

Where is the pain?

Does the pain move?

Does anything help relieve it? Make it worse?

Indications for Massage

Pain is a complex problem.

- Subjective pain scales best measurement of intensity
- Many interventions available for pain relief
- Extreme pain must be monitored by physician

Match the treatment plan to the type of pain.

- For acute pain, intervention to support healing process
- For chronic pain, symptom relief or therapeutic change process

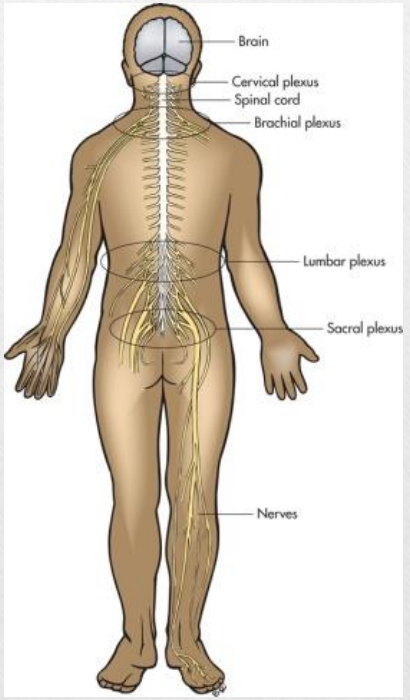
Impingement Syndromes

Two types of nerve impingement:

Compression—pressure on a nerve by a bony structure

Entrapment—pressure on a nerve by soft tissue

Impingement classified by plexus affected



In anatomic terms, a plexus is a place where a network of nerves branches and rejoins. A chakra energy node is also known as a plexus.

The solar plexus, located below the diaphragm and behind the stomach, is not shown on the figure for two reasons. First, the nerves that radiate from the solar plexus are part of the autonomic nervous system, not the somatic nervous system. Second, they are rarely subject to impingement (except in the case of a severe blow aimed halfway between the navel and the heart).

Cervical Plexus

The cervical plexus includes the phrenic nerve and the ventral branches of four upper cervical nerves.

Symptoms: headaches, neck pain, breathing difficulties, and pain sensations in neck, ear, and shoulder (transmitted by cutaneous branches of nerves)

Origins of pressure can include suboccipital and sternocleidomastoid muscles and shortened connective tissues at cranial base

The phrenic nerve controls the diaphragm.

Brachial Plexus

The brachial plexus is situated in the neck and axilla.

Symptoms include pain in the shoulder, chest, arm, wrist, and hand, and thoracic outlet syndrome.

Origins of pressure can include scalenes, pectoralis minor, subclavius, and arm muscles.

The two most common nerve impingement injuries among massage therapists are carpal tunnel syndrome and thoracic outlet syndrome.

Lumbar Plexus

Lumbar plexus

- Symptoms: pain in lower back, belt area, lower abdomen, genitals, thigh, and medial lower leg
- Origins of pressure can include quadratus lumborum, psoas, and lumbar dorsal fascia

Sacral Plexus

The sacral plexus includes the sciatic nerve and serves the pelvic structure, buttocks, and lower limb.

- Symptoms: gluteal, genital, leg, and foot pain
- Origin of sciatic pressure can include piriformis muscle and ligaments of the sacroiliac joint

Indications for Massage

Massage can reduce pressure on nerves:

- Soften and stretch connective tissue
- Normalize muscle tension patterns
- Restore normal resting length to shortened muscles

Psychological Dysfunctions

Mind/body link—interaction and interdependence of physical and mental processes

Major types of mental health dysfunctions:

- Trauma
- Posttraumatic stress disorder (PTSD)
- Pain and fatigue syndromes
- Anxiety and depressive disorders
- Stress-related illness

A person's physical state has a strong influence on mental functioning.

Usually when people feel well physically, they also feel well mentally.

The reverse, too, is often the case; feeling bad mentally results in physical dysfunctions.

Indications for Massage

Massage can physically influence mental state though compassionate touch:

- To soothe ANS hyper- or hypoactivity
- To manage pain
- To normalize breathing patterns
- To provide support for return to homeostasis

Establish and honor boundaries

Work in conjunction with mental health providers

Breathing pattern disorder is one of the signs associated with PTSD and contributes to episodes of panic and anxiety. Normalizing breathing patterns can mitigate or reduce the severity of panic attacks.)

Contraindications for Massage

Massage therapists recognize indications and contraindications, not diagnose

- Reference medical and therapeutic guidelines
- When in doubt, refer client to his or her physician

Types of contraindications:

- Regional—conditions related to a specific area of the body
- General—possible serious underlying condition; physician's approval required before massage is indicated

Generally accepted contraindications such as infectious disease and severe psychologic disorders are important; however, the therapist should not rely on a list, but rather keep up with current research and develop guidelines for individual assessment.)

Cautions

Caution – condition that requires the massage therapist to adapt the massage process so that the client's safety is maintained

Adaptations include:

- Type of massage lubricant used
- Depth of pressure
- Duration of the massage
- Client positioning
- Avoidance of a type of massage application

Medications

Massage and medications can interact synergistically or antagonistically to

- stimulate a body process,
- inhibit a body process, or
- replace a body function.

Massage professionals must be able to assess medication and massage effects.

Over-the-counter medications, herbs, and vitamins should be assessed.

Tumors and Cancer

Tumors—benign (usually localized and slow-growing) or malignant (can metastasize)

Detection of cancer

- Point out abnormalities or changes
- Suggest medical evaluation

Cancer not always a contraindication

- Massage can support immune function as part of comprehensive treatment program
- Important not to overtax body's systems

Warning Signs of Cancer

Box 6-2 Warning Signs of Cancer

- Sores that do not heal
- Unusual bleeding
- A change in the appearance or size of a wart or mole
- A lump or thickening in any tissue
- Persistent hoarseness or cough
- Chronic indigestion
- A change in bowel or bladder function

Endangerment Sites

Endangerment sites include

- Areas where nerves or blood vessels close to the surface are not well protected
- Areas containing fragile, bony projections

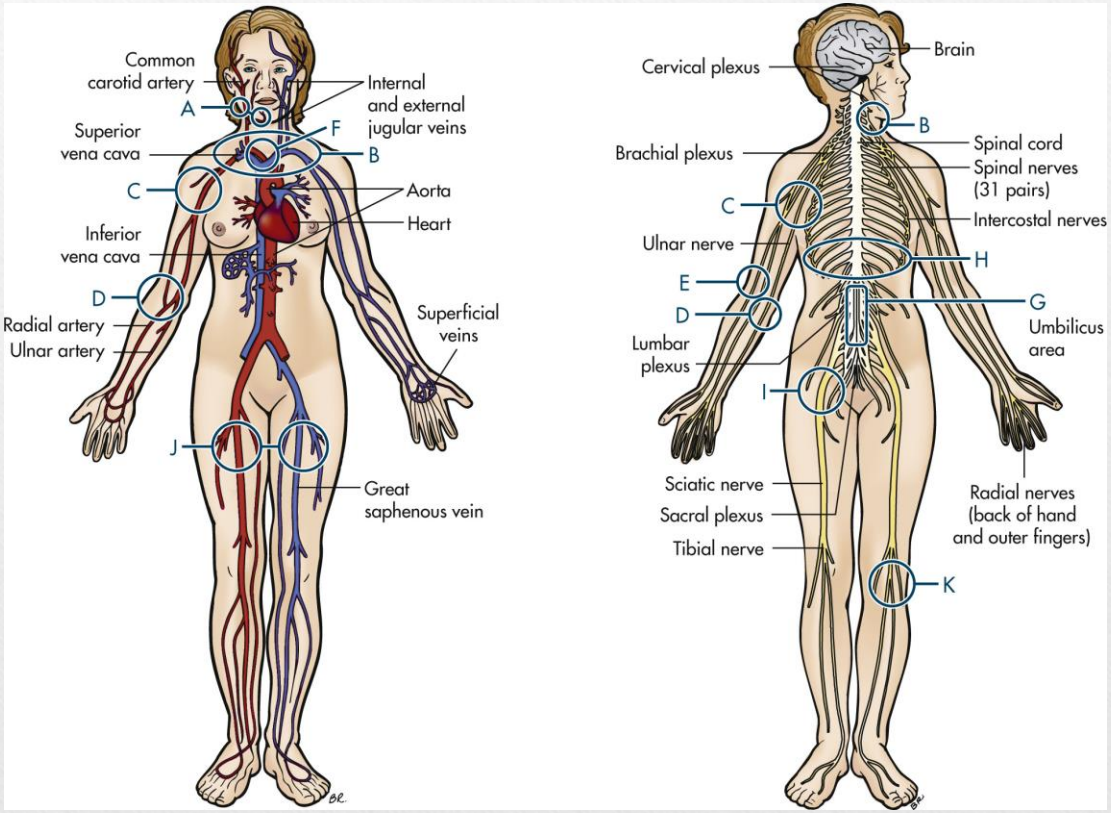
Avoidance or light pressure is indicated when working over an endangerment site.

Endangerment sites include the following: Eyes; Area inferior to the ear (fascial nerve, styloid process, external carotid artery); Posterior cervical area (spinous processes, cervical plexus); Lymph nodes; Medial brachium (between the biceps and triceps); Musculocutaneous, median, and ulnar nerves.)

Nervous and Cardiovascular System Endangerment Sites

Why is the kidney area an endangerment site?

The kidneys are loosely suspended in fat and connective tissue, so deep-tissue massage techniques like Rolfing could cause organ damage.



Referral

Get to know health care providers:

- Contact and set up a short meeting
- Discuss feelings about massage and leave information

Referring clients to their personal providers:

- Provide a list if client doesn't have a provider
- Explain that observations you've made should be evaluated
- Supply client with contact information

A therapist can issue a blank personalized referral form to be completed by a physician or nurse practitioner authorizing massage therapy treatment. The authorization must be for massage therapy (not physical therapy).

Referrals completed on another massage practitioner's form are acceptable—the client has the right to choose which therapist to visit.

All paperwork and notations should go into the client's file.

- Referral reason and date
- Signs, symptoms, and unusual reactions
- Release of information form
- Written permission or prescription to continue massage treatment

Follow directions and recommendations of health care professionals exactly.

Indications for Referral

Box 6-4 Indications for Referral

If any of the following conditions are present and cannot be explained logically, the client should be referred to a health care professional:

- Pain (local, sharp, dull, achy, deep, superficial)
- Fatigue
- Inflammation
- Lumps and tissue changes
- Rashes and changes in the skin
- Edema
- Mood alterations (e.g., depression or anxiety)
- Infection (local or general)
- Changes in habits (e.g., appetite, elimination, or sleep)
- Bleeding and bruising
- Nausea, vomiting, and diarrhea
- Temperature (hot [fever] or cold)

A client should always be referred for diagnosis if the symptoms listed do not have a logical explanation (e.g., if the client has been up late or working long hours, naturally he or she will show the symptom of fatigue).

Massage practitioners should use common sense tempered with accurate information and caution.

To Test

Access Code: 49EENWY

Please write down code. You will be asked for it

Once you have successfully passed the test (70% correct), please email Kim Jackson at kim_hotschool@yahoo.com. We will email you your CE certificate within 7 business days.