

# Preface

*Medical Conditions and Massage Therapy* is for massage students, teachers, therapists, employers, standard-bearers, and ultimately for massage clients. At various times in my life, I have been all of these, and hold them in high esteem.

In 20 years of teaching, I have met many seeing, feeling, imaginative learners. Together we have navigated long lists of medical conditions and contraindications that aren't always easy to see, feel, or imagine. Actual clients make these conditions real, but “what ifs?” crowd the classroom: hypothetical clients and unfamiliar diseases with long, intimidating names. Massage therapy contraindications can be overwhelming, especially when there are many different presentations of a single medical condition and there is so much information to know.

I am mindful of the client on the other side of all that information, each condition, and each disease. My own clients have been my truest teachers, and their stories inspired this text. They have taught me about shifts in symptoms, changes in medications, and the deep and difficult experiences of illness. My clients have shown me how differently a single condition can present itself in different people.

This text prepares massage therapists for that range of real and hypothetical clients, and for multiple disease presentations. To that end, easy-to-use tools are presented for managing contraindications in any massage setting. These tools simplify massage planning. With a streamlined way to manage information, a therapist can better attend to the client: that whole, unique person, much greater than the disease, who has come for help, and to be touched.

## THE AUDIENCE

This book serves all levels of massage students and therapists. The format makes it usable as a quick reference or as a textbook for deeper clinical thinking:

- As a text, it can be easily used in courses on pathology, massage technique, special populations, medical massage, or student clinic.
- As a reference, it can be consulted quickly in various settings, including the spa, the hospital, the student clinic, or the private massage practice.

No prior medical knowledge is needed to use this book as a text or a reference. Simple vocabulary and clear instruction help students and therapists at any level grasp what is important about a medical condition and how to work safely with it.

Massage teachers are always on my mind as I write. I know what it's like to teach at the edges of massage therapy and medicine. Even with substantial texts in the field, we are still defining how massage affects the body in health and disease. Massage teachers are uniquely responsible for the well-being of their students' future clients. They may feel pressured to

master a huge volume of information—medical conditions, signs, symptoms, and massage contraindications—and to be able to rattle it off on demand.

For those of you who teach, *Medical Conditions and Massage Therapy* can help change your role from an encyclopedia of medical information to a guide in the decision-making process. Liberated from having to have all the answers, you can teach concepts and information-gathering strategies rather than hard-and-fast data, use the general principles, and learn alongside the students as I have. Together, imagine a client scenario and then plot your course and massage plan. Students will then develop the invaluable skill of sorting it out on their own.

## ORGANIZATION

The book is divided into three parts. Part I lays a foundation for good decision making, Part II discusses conditions organized by system, and Part III addresses two special topics—cancer and medical treatments—that are brought to bear on many conditions and body systems.

### Part I—Foundations

In Part I, a framework for managing massage contraindications is presented. The Decision Tree—the central tool of the book and a roadmap for massage contraindications—is introduced in Chapter 1. In Chapter 2, massage adjustments are described in universal elements, such as pressure, joint movement, speed of stroke, contact, client position, whether a physician should be consulted before a session, and the therapeutic intent of the massage.

General principles for massage contraindications are described in Chapter 3. In Chapter 4, the steps of massage planning are carefully spelled out: questions for the client, information gathering, decision making, explaining the plan to the client, and charting. A sample client health form is introduced, a jumping-off point for conversation.

Chapter 5 presents strategies for involving the client's physician in the massage plan, laying groundwork for productive exchange about massage for the client. Several formats for good physician communication are offered.

Part I concludes with essential information for evaluating massage research (Chapter 6). Clear diagrams and language are used to demystify basic research concepts. This lays the foundation for using the massage research cited throughout the book.

### Part II—Conditions by System

Part II (Chapters 7–19) is organized by body system. For each system, sample medical conditions are given full discussion,

with complete, “pre-made” Decision Trees. Interview questions are presented for each condition, with massage guidelines based on the client’s possible answers. Where available, support for massage is described in the form of research, theory, or clinical observation.

Space limits full discussion of every illness and injury, so each Part II chapter includes a substantial table of additional Conditions in Brief. There, conditions are summarized along with abbreviated interview questions. Massage therapy guidelines are described for common presentations of each condition.

## Part III—Special Topics

Part III is devoted to cancer (Chapter 20) and the effects of medical treatments on the body (Chapter 21). Specific types of cancer are presented in Part II chapters by system. Chapter 20 addresses general patterns of cancer spread, cancer treatment, and the effects of treatment. Decision Trees, interview questions, and massage therapy guidelines are presented for typical sites of cancer metastasis and for standard cancer treatments.

Chapter 21 explains common medications and medical procedures in the same format, with Decision Trees and massage guidelines. Both Chapter 20 and Chapter 21 should be used to support specific conditions in Part II.

## HOW TO USE THE FEATURES IN THIS BOOK

Several unique, classroom- and clinic-tested tools are presented to help students and therapists work with different conditions. The features presented here can be used in different combinations, all in the service of good decision making and customized massage therapy:

- *The Decision Tree.* This is a simple, visual roadmap for massage contraindications. It divides complex medical issues into small, easier-to-solve parts. It holds a range of client presentations for conditions as diverse as diabetes, hypertension, and prostate cancer. Clear action steps describe concrete massage adjustments for each symptom, complication, and side effect. Consult the pre-made Decision Trees in each chapter for quick highlights of the important massage concerns, or use the Decision Tree as a problem-solving format. The format is easy to learn and quickly becomes automatic, supporting independent thinking in unfamiliar territory. The Decision Tree provides rich detail, picking up where the statement, “Massage is contraindicated,” leaves off. It answers the questions, “What is it about the condition that contraindicates massage?” and “What is it about massage that is contraindicated?”
- *The Pressure Scale.* A simple description of five basic massage pressure levels is offered in plain, accessible language. Each pressure level is shown visually and described in down-to-earth terms. Use it to specify the best overall pressure for a certain condition, or the maximum pressure on a specific body area. Many hospital massage programs and clinics are already using it to enhance communication among massage therapists, physicians, nurses, and clients. The pressure scale can be used as a standard in classrooms, clinics, and while working in tandem. It can simplify massage planning and charting.

- *Interview Questions.* Brief, purposeful interview questions are provided for each condition, with follow-up questions throughout the book. Each question is used to identify or explore a possible massage contraindication and is worded at a suitable level for students as well as experienced therapists. Start with the general health questions in Part I (Chapter 4) in a standard intake format. Use the follow-up questions for common health concerns such as pain, medications, injuries, infection, and even diagnostic tests. Questions are sensibly grouped and organized for easy use in fast-paced settings. Adapt the wording to your own personal style, and work these questions into a natural conversation with clients.
- *Massage Contraindications, Linked to Interview Questions.* Clear massage therapy guidelines are presented in specific terms. This text goes beyond one-size-fits-all massage contraindications, because these are often too broad for actual practice. Instead, customize massage contraindications to the client’s unique *presentation* of a condition, based on your interview with the client.
- *Principles of Massage Contraindications.* Because a handful of principles are easier to remember than a host of diseases, they are easy to recall and use with a range of client presentations. Use the Vital Organ Principle anytime a major organ is functioning poorly. Use the Sensation Principle whenever sensation is compromised. With these, you can navigate a host of conditions affecting the vital organs (end-stage liver disease, congestive heart failure, or an advanced brain tumor) and a similar range of conditions affecting sensation (diabetic neuropathy, a spinal cord injury, or multiple sclerosis). Some principles have memorable names (The Cardiovascular Conditions Often Run in Packs Principle or The Ask If It’s Contagious Principle). Other principles take the guesswork out of hidden conditions (The DVT Risk Principles, The Bone Metastasis Principle, and The Waiting for a Diagnosis Principle).
- *Massage Research.* Check these brief reviews of available massage research to see if there is evidence supporting massage for a condition. Data from clinical trials are summarized modestly, without overstating any claims. Here, research concepts from Chapter 6 are reinforced. To see additional research references, go online at <http://thePoint.lww.com/Walton>.
- *Possible Massage Benefits.* Even without research, one might make a case for the benefits of massage in certain conditions. Here, look for clinical observations and theories supporting massage for wellness, support, and companionship during illness and injury. There are no sweeping conclusions, just compelling, common sense.
- *Medications and Massage.* Specific drug treatments, side effects, and corresponding massage guidelines are discussed along with each medical condition in this book. But drug treatments change frequently, and massage therapists face a dizzying array of medications, procedures, and massage guidelines. To manage this information, this book supplies several tools: Table 21-1 gathers over 60 common drug side effects into an alphabetized list. Look up each side effect, such as nausea, flu-like symptoms, or bruising, for corresponding massage guidelines. You can also use the Four Medication Questions (Chapter 4) and the Medication Principle (Chapter 3) to decide how to modify the massage plan for a client’s medications.

## ADDITIONAL FEATURES

- *Therapist's Journals*: Brief, poignant stories of clinical practice, are contributed by massage therapists and written in the first person. These stories reinforce the concepts in each chapter.
- *Selected Clinical Features*: Innovative drawings of human figures show complex conditions such as Parkinson disease, muscular dystrophy, and breast cancer. Areas of the body that are affected by the disease are labeled with key signs, symptoms, and complications, along with factors to consider in the massage plan.
- *Self Test*: A set of study questions is provided at the end of each chapter.

### Online Features

The following features are online at <http://thePoint.lww.com/Walton>:

- The Bibliography lists additional resources for each condition, along with available massage research.
- The Glossary provides definitions for key terms from the book (these terms are shown in blue type throughout the text).
- Detailed discussion and art (including Decision Trees) for four *additional* conditions: *eczema*, *diverticular disease*, *thyroid cancer*, and *cerebral palsy*.
- Answers to the Self-Test questions.

### Instructor Resources

Online, instructors can find the following:

- Lesson plans with objectives and sample exercises for each chapter, including ideas for building Decision Trees in class.
- An image bank including all Decision Trees and other illustrations.
- The client intake form and physician communication formats, available in printable form.
- Blank Decision Trees.
- Principles of Massage Therapy Contraindications.
- Massage Therapy Guidelines for Common Side Effects of Medications and Procedures (Table 21-1).

## CLASSROOM TESTING

I have shared the information in this book during two decades of teaching massage students, practitioners, employers, and teachers. The tools have been used successfully in a variety of settings, including spas, hospitals, massage schools, and private practice settings. The concepts have been taught in various courses: pathology, student clinic, special populations, massage technique, and theory courses.

These tools have been warmly received, often with a sigh of relief. There is no longer a need to memorize impossible volumes of information. The burden lifts, as the method is easy to learn and use. Sorting information in this format is straightforward. Once a clinical problem is laid out in a Decision Tree, the gaps in information need only be filled in with a quick search, a reference, a well-placed question to a client, or a focused communication with the physician. Where information leaves off, principles and good interview questions support the therapist.

## A NOTE ABOUT LANGUAGE

Mention of specific massage therapy modalities in this text is minimal, and it's a deliberate omission. For one thing, modality names are not always descriptive, and we don't all agree on their meaning. I have watched therapists argue vehemently over exact pressures and strokes, even when they studied with the same teacher! Although these variances reveal a rich, textured, and dynamic profession, the language for describing it can be confusing.

Instead of modality names, I use more descriptive language and divide massage therapy into its elements: contact, pressure, joint movement, duration, client position, speed, rhythm, and so on. In turn, I steer clear of the debate over terms such as "relaxation massage," "therapeutic massage," and "medical massage." These terms are still being sorted out in the profession.

Throughout this book, massage therapists are referred to as "therapists" or "practitioners." I use "he" and "she" interchangeably to describe therapists, other health care providers, and clients. Health care providers are usually called "physicians" for simplicity, even though a therapist might consult with a client's nurse or nurse practitioner, physician's assistant, or other provider, depending upon the situation.

Under "Massage Research," the benefits of massage for a given condition are supported with research data where available, but a critical analysis of each study is beyond the scope of this book. I tend to use "Research supports..." or "Research suggests," rather than "Research proves..." to more accurately reflect the available data.

Under "Massage Benefits," any statements about the helpfulness of massage are based on my own observations, others' clinical stories, and common sense. Please take care not to confuse my own opinions with fact or with well-researched outcomes.

## COMTA

As of this writing, schools and programs served by the Commission on Massage Therapy Accreditation (COMTA) are required to address six competencies. The concepts in this book support many elements in competencies 1, 2, 5, and 6. There is significant emphasis on the first COMTA competency, planning and organizing a session. Elements of competency 2 (performing massage therapy and bodywork for therapeutic benefit) are addressed in the foundation chapters as well as in specific conditions. Elements of competency 5 (professional referrals and relationships) and competency 6 (research literacy) are reviewed and reinforced throughout this text.

## A WORD OF CAUTION

I have made extensive efforts to ensure that the information about each condition in this book is accurate, but medical information changes constantly, and authorities in the massage field have reasonable differences in opinions about the safest, most effective massage approach in each case. As with any textbook, it has not been possible to account for the unique aspects of each client's individual condition. This is particularly true of Conditions in Brief tables that appear in Part II of the book.

As you make your massage plan, I urge you to consult and compare information from multiple sources. If there is any doubt, work conservatively, and direct a focused question to

a client's physician, where possible. The more we do this, the more we cultivate productive partnerships with other health care providers.

## **INTUITION, CONFIDENCE, AND MASSAGE**

This book will help therapists get to their destination—the massage table—with purpose and confidence. Good information management and clinical decision making have a powerful place in the daily life of the massage therapist, and acquiring these skills doesn't have to be grinding or difficult. With the right tools, honest work can be pleasurable, even joyful. I've watched therapists, initially intimidated by vast information about a disease, develop mastery over familiar conditions, and

soon they are able to extend their skills to unfamiliar conditions with ease. They move almost effortlessly across the Decision Tree.

There is great satisfaction in this process. And best of all is the beauty of the end-product. Once any concerns and contraindications are laid to rest, massage therapists are free to practice with intuition and full presence. With sound clinical thinking, they clear a path for a session with the best of touch, full contact, and heart. Real connections are formed. Therapists provide caring, corrective touch. Clients are healed and inspired. They are fully seen, felt, and heard. This is massage therapy at its best.

Tracy Walton  
Cambridge, Massachusetts