

Integrating Massage Therapy Into Mainstream Medicine

How providers can meet patient demands for medical massage and help move the massage industry forward.

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July 19, 2020 - By Sabrina A. Wagganer, LMT

Massage therapy has become increasingly popular each year as an alternative method to treat and manage pain, stress, and aid in post-operative recovery and rehabilitation. 71% of Americans believe that therapeutic massage should be considered a form of healthcare, and 70% of patients who received massage in 2019 did so for its medical benefits (American Massage Therapy Association [AMTA], 2020)

While there is no current data available to show the number of therapists considered medical massage practitioners versus relaxation specialists, it should still be alarming to see that patients who are receiving massage for its medical benefits are doing so in spas, hotels, massage franchises, or in their homes rather than in a medical environment or a massage clinic specializing in medical therapies (*Massage Therapy Industry Fact Sheet* 2019). The significance of this data and how it relates to successful patient care will be discussed later in this report.

With so many patients receiving massage for medical benefits, the involvement of healthcare practitioners in patient education regarding therapeutic massage and referrals to appropriately licensed and certified massage therapists is more important to the health of patients than ever before.

Joint research efforts of professional organizations such as the Massage Therapy Foundation and the American Massage Therapy Association have helped propel the industry forward by making educational materials available to aid therapists in implementing an evidence-based practice. Evidence-based massage protocols can be applied and replicated, thereby increasing treatment success rates.

Massage Therapy has been shown to have profound physiological and psychological effects on the body and can be a fundamental part of an integrative approach to patients health and wellness.

Research suggests that massage can be helpful as a non-invasive approach to preventing or postponing surgeries related to musculoskeletal pains (Pugazhendi, et al., 2020) as well as decreasing postoperative pain and the need for analgesics (Kennedy, 2008). In Fibromyalgia studies, massage has shown to not only decrease pain symptoms, but also improve the quality of sleep (Castro-Sánchez, et al., 2011) and decrease concentrations of Corticotropin Releasing Factor-Like Immunoreactivity (CRF-L) found in urine, which is believed to be a biochemical marker of stress in chronic pain patients (Lund, 2006).

Massage has also been proven to relieve stress, decrease occurrence of migraines, lower blood pressure, relieve symptoms related to chemotherapy, and improve quality of life, balance, sports performance, and cardiovascular health (25 *Reasons to Get a Massage* 2020).

In addition to benefits, all treatments come with risks. Massage is no exception.

For example, this year has seen the rise of a new pandemic, COVID-19. This pandemic has brought a unique set of problems to the massage field due to the virus' asymptomatic nature, high communicability rate, and 14-day incubation period (Center for Disease Control [CDC], 2020).

Under "normal" circumstances and without the risk of COVID-19, patients who may be symptomatic of contagious infections, as well as those patients who have been diagnosed with deep vein thrombosis (DVT), are contraindicated for massage therapy due to an increased risk to their health and the health of others. In instances where DVT is present, modalities that promote circulation of blood are contraindicated due to the increased risk of a pulmonary embolism. Pathologists have recently found that COVID-19 has a coagulation effect on the blood similar to what is seen in patients diagnosed with disseminated intravascular coagulation (Connors & Levy, 2020). This blood clotting can cause multiple organ failure, myocardial infarction, or cerebrovascular accidents. It's a reasonable conclusion that circulatory massage may increase this risk in asymptomatic patients.

We've learned that there are in fact some symptoms associated with COVID-related coagulation that can be recognized by massage therapists who are privy to them. These symptoms include rash, petechiae, and unilateral inflammation that you'd see in DVT (Werner, 2020).

Educated therapists who stay current on pathology research, and who take time to do a proper intake with their clients can greatly minimize the risks certain massage modalities may pose to patients' health and wellbeing. However, in settings such as

spas, massage franchises, and other “relaxation” environments, limited time, unsupportive management, and a lack of therapists’ clinical expertise may prevent proper infectious disease screening and consultations with patients regarding their medical history.

It’s also common to encounter patients who withhold important medical information from massage therapists because they don’t understand how it may be relevant to their treatment, or because it’s “just a massage.” Having the support of and being viewed as a means of healthcare by mainstream medical practitioners may impact how patients view and interact with the massage industry.

Mainstream medical practices all include rigorous intake processes. In order for massage to fit into this model, therapists should be conducting in depth intakes with their patients prior to each session. In some states, such as Missouri, it is required that therapists document and update patient files to include the following:

- (A) Purpose for visit to include presence of pain;
- (B) Allergies, preexisting conditions, recent surgeries, and current medication;
- (C) If the client is currently under the care of any health or mental healthcare professional;
- (D) Date, type, and length of massage therapy service(s);
- (E) Outcome assessment;
- (F) Consent for treatment that is signed and dated by client;

(Missouri Secretary of State - IT)

Too often, massage therapists in spa or franchise settings feel that they don't have enough time between patients to utilize this process due to the pressure placed on them by management to have a high volume of clients during their shifts. Therapists are booked with clients back to back, leaving 5-10 minutes for them to provide an exit interview with one client, thoroughly clean the room, perform self-care, review the next clients medical history and perform an intake prior to their session. This high volume model does not lend itself to creating a healthcare team in which therapists share information within the clinic through proper documentation, adhere to the universal precautions and standards of procedure laid out by the Center for Disease Control and the local government rules.

This high volume also leads to an astronomical burnout rate amongst therapists with the average career length being 3-5 years (Massage Therapy Schools Information, 2018).

3-5 years is not enough time to gain clinical expertise, yet it's also the number of years that the majority of massage educators have (AMTA, 2020). This could help explain why our industry, also too often, fails to educate therapists about what questions to ask, how to document intake, massage procedures, findings, and how to form and document therapeutic treatment plans.

This is a hurdle that we will have to jump over in the near future, and many of these problems seem to be internal to our industry. Indeed, massage therapists have discussed ideas to move away from this model for years to no avail. I believe that with the help of mainstream medical practitioners, we can. We're at a unique time in history

where people, being quarantined and isolated, are seeing the value in touch. They're seeing the value in preventative medicine and are seeking methods of pain management outside of pharmaceutical products. Insurance payers and places of employment are seeing the value in a wellness model as a way to cut healthcare costs. Our healthcare landscape is changing.

The statistics in this report should be enough for medical practitioners to consider who they're sending their patients to. Patients who are seeking massage for the medical benefits, who need a healthcare *team*, and who need quality care and clinical expertise from massage professionals. Again, 71% of those who receive a massage do so for medical purposes. 51% of people who receive massage are doing so at a massage franchise or spa and another 30% at a massage clinic (AMTA, 2020). There's no data available to discern if the massage clinics are focused on relaxation or therapeutic benefits. There is data showing where massage therapists work, with 7% being in franchises and 24% being in spas, but I don't feel that the numbers reflect the fact that many therapists work consecutively in multiple locations. Nevertheless, those who work at the locations where the majority of patients receive their treatments have the least amount of experience. This should be concerning!

Massage franchises have a place in the industry. We have giants like Massage Envy to thank for increasing visibility and legitimacy of the field, and there are many wonderful therapists of different ranges of experience who will work in these chains.

I've been a massage therapist since 2007, and for the last few years have worked in a franchise while also working as an educator. 100% of the students who

graduated our program and passed their licensing exam would work for a massage franchise or spa upon graduation. The more experienced therapists I've worked with in franchises do so because it's part-time and they don't have to do any administrative duties associated with being a self-employed sole practitioner, but compared to those just entering the field these therapists are few.

It's my belief that if massage were to be integrated into and treated as a healthcare rather than a simple luxury, then the massage industry would begin to move forward. If medical professionals will become better educated about the therapeutic benefits of massage based on scientific research, referring their patients to therapists who have a high level of knowledge of how the body works and how to apply massage modalities in order to achieve the desired therapeutic outcome, I believe that our industry would rise to meet that demand. I believe the wheels would begin to turn for there to be higher educational requirements in areas that currently don't require a degree and/or only require completion of a 500 hour massage therapy certification program. More value would be placed on research, yielding more funding and participation in research projects. Therapists could begin shaping our industry standards in the way that physical therapists have shaped theirs in recent years. Less burnout would be occurring due to standardized compensation, rather than only being paid for the number of hours we have our hands on people.

Research proves massage is effective for patients who receive it, and the benefits are exponential for those who receive massage as a regular part of their wellness routines. Patients are already demanding medical massage and they're

speaking with their physicians about it. 46% of physicians recommend massage (AMTA, 2020), and I think that number can and should increase. Massage treatments could enhance the credibility of surgeons and physicians. If you're already great in your discipline, imagine how much more your patients will tout about your work when you refer them to a massage therapist to aid in their recovery and decrease the amount of medications they are required to take!

The American Massage Therapy Association has a *Find A Massage Therapist* database that can be recommended to patients seeking medical massage. I would also encourage medical professionals to work towards building relationships with therapists, by reaching out to local massage clinics, including franchises, as well as receiving massage regularly from different therapists in order to discover those you could feel comfortably referring your patients to.

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