REMEDIAL MASSAGE THERAPY

Student Manual

HLTMSG003  Perform remedial massage musculoskeletal assessments
HLTMSG005  Provide remedial massage treatments
HLTMSG006  Adapt remedial massage practice to meet specific needs
HLTMSG008  Monitor and evaluate remedial massage treatments
CONTENT

1. CONTRAINDICATIONS FOR REMEDIAL MASSAGE THERAPY .......... 5
   Contraindications for Massage Therapy ........................................ 5
   Neurological disorders ..................................................................... 5
      Stroke ......................................................................................... 5
      Transient Ischaemic Attack .......................................................... 5
      Severe Headaches ....................................................................... 6
      Epilepsy ....................................................................................... 6
      Disorders that affect motor nerve supply ...................................... 6
      Parkinson’s disease ....................................................................... 6
      Myalgic encephalitis (ME) ............................................................. 6
      Multiple sclerosis (MS) ................................................................. 6
      Neuralgia ..................................................................................... 7
      Shingles ...................................................................................... 7
      Trigeminal neuralgia ................................................................. 7
      Lumbago ..................................................................................... 7
      Sciatica ....................................................................................... 7
      Migraines ................................................................................... 8
      Conditions That Affect Awareness of Reality .................................. 8
      Recreational Drugs – Alcohol ..................................................... 8
      Autonomic Nervous System ........................................................ 8

   The Heart – Vascular Disorders .................................................... 9
      Angina ......................................................................................... 9
      Heart attack ............................................................................. 9
      Heart failure ............................................................................ 9
      High blood pressure ................................................................... 10
      Low blood pressure .................................................................. 10
      Blood Vessels Disorders ............................................................. 10
      Deep vein thrombosis (DVT) ....................................................... 10
      Varicose veins ........................................................................... 11
      Phlebitis .................................................................................... 11
      Oedema ..................................................................................... 11

   Blood disorders ............................................................................. 11
      Haemophilia ............................................................................... 11
      Anaemia .................................................................................... 11
      Leukaemia ................................................................................ 12

   Factors for consideration when providing Palliative Care .......... 12

   Lack of working diagnosis .......................................................... 13
   Patient Non-compliance ............................................................. 13
   ASSESSMENT 1.1 .......................................................................... 13

2. WORKING WITH CLIENT HEALTH STATUS ............................. 14
Recognising treatment limitations ................................................................. 14
Case specific research report ........................................................................ 14
Case Study 1 .................................................................................................. 16
ASSESSMENT 2.1 .......................................................................................... 16

3. PROFESSIONAL DEVELOPMENT ............................................................ 16
   ASSESSMENT 3.1 .......................................................................................... 17

4. CONTINUATION OR VARIATION OF TREATMENT ................................. 18
   ASSESSMENT 4.1 ASSESSMENT 4.2 ............................................................. 18
1. CONTRAINDICATIONS FOR REMEDIAL MASSAGE THERAPY

Contraindications for Massage Therapy

Neurological disorders

Some disorders, especially those that involve the blood supply to the brain such as meningitis, brain haemorrhage and brain tumours are potentially life threatening. Note also that meningitis can be contagious.

**Massage:** Although most forms of massage are unlikely to precipitate a fatality, these disorders are total contra-indications in order to protect the practitioner. People who have recovered are perfectly fine to receive a massage.

Stroke

Occurs when the blood supply to the brain tissue is affected, either by a clot (thrombosis) or by a blood vessel bursting. Some of the brain tissue may be damaged, which may result in loss of speech, movement, thinking ability, and sphincter control.

**Massage:** There is a high risk of a second stroke occurring within one month of the first; do not massage someone at all during this period, for their and your own protection. The risk of a stroke occurring up to six months after the first is lower but the therapist is still required to ask the doctor regarding the advisability of massage.

Transient Ischaemic Attack

TIA- a mini-stroke from which the person recovers with little or no damage. More often caused by clots in the vessels in the neck, than clots in the head.

**Massage:** High risk of further TIA’s, so medical advice should be sought before giving massage.
Severe Headaches

Severe headaches that come on suddenly, with no previous history of similar headaches, and dizziness or numbness or sleepiness.

**Massage:** Massage is contraindicated; these need medical attention for diagnosis.

Epilepsy

Caused by abnormal electrical activity in the brain. It ranges from momentary lapses in attention, to the ‘grand mal’, or major fits.

**Massage:** General massage is probably safe, but it is advisable to seek GP input prior to massage treatment.

Disorders that affect motor nerve supply

Disorders that affect motor nerve supply often result in muscle tremors or weakness.

**Massage:** can be beneficial to stimulate circulation bringing nutrients to the muscles and removing wastes. Negotiate the treatment with the client, since symptoms vary from person to person, and may vary for the same individual over time. If in doubt, ask the client to get medical clearance from his/her doctor. Take care with pressure and joint movements, as there may also be sensory loss and the client may not be able to give accurate feedback.

Parkinson’s disease

Parkinson’s disease is a progressive disease, caused by degenerative abnormalities in the brain and characterised by a tremor, or shaking in the hands and limbs and by stiffness in movements.

**Massage:** is indicated, under medical supervision, to maintain flexibility and reduce anxiety. Sufferers usually have restricted movement so may not be able to get on and off the massage table, in this case work with the client in a chair.

Myalgic encephalitis (ME)

This is a chronic fatigue syndrome resulting in fatigue and general aches and pains in the muscles.

**Massage:** negotiate the pressure and quality of touch, because the pain may be severe at times.

Multiple sclerosis (MS)
Multiple sclerosis is caused by degeneration of nerve sheaths. Severity of symptoms can vary, and may include loss of vision, weakness and numbness in the legs.

**Massage:** is indicated in sub-acute stages, when the client is in remission.

### Neuralgia

Neuralgia (also called neuropathy), refers to any condition affecting the peripheral nerves. Neuritis is inflammation of a nerve. Nerve entrapment occurs when a nerve presses against surrounding soft tissue and nerve impingement when it is trapped against hard tissue like bone or cartilage. Symptoms range from the familiar pins and needles, and tingling, to pain, numbness and loss of muscular function. Muscles contract protectively around painful sites.

**Massage:** Light massage to relieve muscle tension can be beneficial. Deep massage on the site is contra-indicated.

### Shingles

Shingles is a viral infection of the sensory nerves, which causes a blistery rash, usually around the ribs, but sometimes on the face.

**Massage:** This is a local contra-indication. Areas of broken skin are contra-indicated.

### Trigeminal neuralgia

Trigeminal neuralgia is a disorder of one of the facial nerves causing acute pain.

**Massage:** is locally contraindicated during acute episodes. At other times, use massage with the client’s guidance and doctors permission.

### Lumbago

Lumbago is a general term for lower back pain.

**Massage:** Massage is useful for muscular causes and for the soft tissue tensions that develop due to other causes. Refer the client to an appropriate professional to address any underlying spinal problems.

### Sciatica
Sciatica is a condition that refers to pain along the sciatic nerve. It is most often felt in the buttocks and thighs, and is commonly caused by entrapment of the long sciatic nerve as it exits from the spine.

**Massage:** Massage is indicated for sciatica due to muscular or ligamentous causes. For spinal causes, massage can be helpful at non-acute times. Ensure underlying cause is diagnosed by medical practitioner.

**Migraines**

Migraines are a particularly potent form of headache, in which constriction of the blood vessels around the temples is followed by dilation of the blood vessels of the brain, putting pressure on the meninges. This can produce a ‘throbbing’ headache with sensitivity to light and nausea from a few hours to days.

**Massage:** Massage during a migraine is not advisable (and wouldn’t be wanted). Daily massage of the temporalis and masseter muscles can be useful as part of an ongoing preventative treatment programme. Regular massage can help reduce stress levels.

**Conditions That Affect Awareness of Reality**

Some neurological disorders affect a person’s sense of reality, or the ability to comprehend or communicate about what is happening.

**Massage:** When treating people with severe learning difficulties, or autism or dementia, it is important to ensure as much as possible that the treatment and procedure is fully understood. Be sensitive to non-verbal cues from the client, and also seek guidance from any carers to interpret these.

**Recreational Drugs – Alcohol**

Recreational and some prescription drugs have an effect on the nervous system, and can distort perception of sensory input.

**Massage:** It is advisable to avoid massaging a person whose perception is seriously distorted.

**Autonomic Nervous System**

The autonomic nervous system can be stimulated or soothed by massage, depending on the techniques used. Relaxing massage stimulates parasympathetic activity. Regular treatment may facilitate an improvement in the balance of
autonomic nervous system (ANS) functioning in someone with a tendency towards high stress levels. Massage (especially petrissage - kneading, squeezing and wringing) can also relieve chronic muscular tension resulting from elevated sympathetic nervous system activity.

The Heart – Vascular Disorders

Heart disorders can be caused by a restricted supply of blood to the heart, or by faulty heart structure, or by disease of the heart tissues. Never put heavy or prolonged pressure on the major superficial arteries, such as the carotid artery at the side of the neck, the radial artery on the inner surface of the wrist, and the arteries on the inner surface of the elbow joint and the back of the knee.

Angina

Caused by inadequate blood supply to the heart muscle. Symptoms are cramp-like pains in the chest, which are made worse by exercise or stress, and relieved by rest. Unstable angina - a severe form of angina, which can be a precursor to a heart attack.

Massage: Relaxing massage is beneficial for people with angina because it can reduce stress. Massage for anyone with unstable angina should only be carried out with permission from the person’s doctor. Keep the client warm, since cold can bring about an attack.

Heart attack

Heart attack (myocardial infarction) - occurs when part of the heart muscle dies due to inadequate blood supply, caused by blood clots, or arteriosclerosis. These deposits clog the vessels, and can break free. Heart attack symptoms include - sudden severe pain in the chest and, sometimes, the left arm.

Massage: Because there is a very high risk of a reoccurrence in the two to three months after the attack, massage is contra-indicated for client / practitioner protection. After that period massage can be given with permission and advice from the client’s doctor.

Heart failure

Heart failure occurs if the heart is unable to perform its function as a pump properly, and fluid can back up in the lungs, causing pulmonary oedema (‘water on the lungs’) or oedema in the ankles and legs. Heart failure can be caused by a
number of different factors, including previous heart attacks or chronic high blood pressure.

**Massage:** Get medical permission, and then give only gentle massage to avoid stressing a weakened heart.

### High blood pressure

High blood pressure (hypertension) - when long-term, can lead to damage of the heart or brain. Once diagnosed, it is usually controlled with medication.

**Massage:** Deep abdominal massage is contra-indicated, but relaxing massage is probably beneficial to keep stress levels down. If someone has high blood pressure that is not controlled by medication, get medical permission, for client/practitioner protection.

### Low blood pressure

Low blood pressure (hypo tension) is not considered a medical problem.

**Massage:** Take care helping someone with low blood pressure off the table because moving from lying to sitting too quickly may cause them to faint.

### Blood Vessels Disorders

Blockage of blood vessels occurs when a blood clot forms on the wall, or when an obstruction such as a clot (a ‘thrombus’), or air bubble, or a dislodged particle of plaque is moved in the bloodstream to another site. Anticoagulants are given to prevent clots growing larger. Thickening of the arteries (arteriosclerosis) - a general hardening and loss of elasticity of the walls of the arteries. Atherosclerosis (which is a specific type of arteriosclerosis) is caused by a build-up of plaque in the arteries, which could lead to clot formation.

**Massage:** Seek medical permission, and then give gentle massage only.

### Deep vein thrombosis (DVT)

Deep vein thrombosis is a much more serious condition, where a blood clot forms in a vein, often when someone has to stay in bed after surgery, a stroke or childbirth. If the clot breaks lose it can travel through the system to the lungs, known as a pulmonary embolus with fatal results.
**Massage:** Totally contra-indicated for 3–6 months after diagnosis, for client/practitioner protection. After that period, seek medical permission, and give gentle massage only.

**Varicose veins**

Varicose veins usually in the legs are the result of valve failure in the veins, and accumulation of pockets of blood. The vein walls, being thin, stretch and become flabby.

**Massage:** Massage is contra-indicated in the area directly over, or immediately below the veins. The affected area can be held gently while the rest of the leg is massaged.

**Phlebitis**

Varicose veins can become red, tender and inflamed, painful, and there may be a risk of clots. It affects the superficial veins only, with virtually no risk of clots entering the circulation.

**Massage:** Massage of the affected area is contra-indicated.

**Oedema**

Oedema is an accumulation of fluid in the tissues, due to lack of draining.

**Massage:** depends on the cause of the swelling, so needs to be discussed with a medical practitioner.

**Blood disorders**

**Haemophilia**

Haemophilia is an inherited failure of the blood to clot.

**Massage:** severe haemophilia is a total contraindication to massage. Mild forms - gentle massage, consult a doctor.

**Anaemia**

Results from a lack of red blood cells or haemoglobin and the capacity of the blood to carry oxygen to the tissues is reduced. It is a sign of an underlying disorder. Sickle cell anaemia - an inherited condition found in peoples of Black African descent, in which the red cells are deformed, and the ability to carry oxygen reduced. Thalassaemia another inherited form of anaemia common to
people of Turkish or Cypriot descent. Symptoms of all types of anaemia are fatigue, headaches, insomnia and joint pain.

**Massage:** Massage is fine for mild anaemia, but contraindicated for severe anaemia. Underlying causes should be investigated with medical practitioner.

**Leukaemia**

Leukaemia (‘cancer of the blood’) - develops when immature white blood cells multiply excessively, interfering with the ability of normal white cells and platelets to do their work.

**Massage:** Seek medical permission and then use gentle massage.

**Factors for consideration when providing Palliative Care**

Palliative care is aimed at relieving pain and discomfort during treatment for cancer. Palliative care is aimed at relieving suffering and improving quality of life in patients undergoing treatment for the primary condition. Palliative care addresses symptoms such as pain, shortness of breath and nausea but also other non-physical symptoms such as sadness, depression and anxiety. Palliative care focuses on the whole person to enhance comfort and preserve dignity and respect.

Massage as part of oncology treatment focuses on palliative care as part of symptom management, especially the side effects of treatment

Cautions for massage generally arise from changes in the client’s skin as side effect of treatment

Recommendations for gentle soothing palliative massage include:

- Make sure the client is comfortable and physically supported
- Use oil or lotion to reduce friction and add moisture to the skin
- Target areas of most discomfort e.g. areas of prolonged pressure from immobility by sitting or lying such as the neck, shoulders, low back and calves
- Determine the pressure or movement that is most helpful and adjust in response to observed or reported client feedback
- Gentle hand and foot massage can provide a sense of comfort and well-being
- Encourage the client to communicate what feels helpful and any method of discomfort immediately
- Maintain and intention to reduce suffering by focusing on the client and what feels good.
- Keep massage sessions shorter 15-30mins in targeted areas and no longer than 45mins

**Lack of working diagnosis**
Lack of working diagnosis occurs when the current diagnosis is showing to be inaccurate and the condition is not responding according to diagnosis guidelines.

**Massage:** When you experience a lack of working diagnosis it is an indication that the diagnosis could be inaccurate or there could be further complications surrounding the condition that are resulting in a variation/s from normal. It is important for a therapist to have an accurate diagnosis and condition understanding so they can appropriately provide intervention. In the case where the diagnosis is showing to be not working and or inaccurate the therapist should refer the client to the relevant professional to seek further diagnosis. Massage in this situation is contraindicated.

**Patient Non-compliance**
Patient non-compliance refers to when a client is unwilling for treatment of any kind to be performed. In this case treatment is contraindicated. Treatment should only be performed to a client is completely compliant and has given informed consent.

**ASSESSMENT 1.1**
## 2. WORKING WITH CLIENT HEALTH STATUS

<table>
<thead>
<tr>
<th>UNIT:</th>
<th>HLTMSG006 Adapt remedial massage practice to meet specific needs</th>
</tr>
</thead>
<tbody>
<tr>
<td>ELEMENT:</td>
<td>2. Respond to unfamiliar presentations</td>
</tr>
<tr>
<td>PERFORMANCE CRITERIA:</td>
<td>2.1 Recognise situations where presenting cases or aspects of presenting cases fall outside current knowledge base or expertise</td>
</tr>
<tr>
<td></td>
<td>2.2 Refer Client to other practitioners when case is not appropriate to own scope of practice</td>
</tr>
<tr>
<td></td>
<td>2.3 Identify, access and interpret sources of additional information and advice when appropriate to continue with the case</td>
</tr>
<tr>
<td></td>
<td>2.4 Enhance own capacity to deal with the case by conducting case specific research</td>
</tr>
<tr>
<td></td>
<td>2.5 Integrate findings into client treatment plans and record details</td>
</tr>
</tbody>
</table>

**PERFORMANCE EVIDENCE:** Conducted case specific research for at least 3 cases, where key aspects of the condition are not known to the candidate

As a remedial therapist you will provide the application of massage as a form of therapeutic intervention towards better health for clients. This includes providing massage as a form of remedy to treat injuries, ailments and other indicated health conditions. As a part of using massage as a professional service you will need to be able to provide a treatment from an educated and structured treatment basis. This includes having an understanding of the presenting symptoms, conditions and health status and how they relate specifically to your professional services.

### Recognising treatment limitations

Professional therapists need to be aware of the limitations of their scope of practice. This should be a consideration of whether the presenting client condition falls outside of their scope of practice because:

1. Remedial massage as a therapeutic intervention cannot or should not be performed on the presenting condition (contraindications).
2. Remedial massage is indicated but the presenting conditions falls outside the therapist current education or technical expertise.

Both will indicate that treatment at that present time is not indicated but depending on the reasoning it will indicate how the therapist should proceed. In scenario 1 where remedial massage is contraindicated the therapist should refer the client to the appropriate professional better suited and or recommended to treat their presenting condition. In scenario 2 where remedial massage is indicated but the therapist is not professionally equipped to perform treatment the therapist will need to seek further professional development to be able to perform the appropriate services according to the presenting condition.

### Case specific research report

The following case studies are client cases where the presenting condition/s would fall outside your current education and technical expertise. In these cases you will need to first determine if massage as a therapeutic intervention would be indicated or contraindicated followed by performing an appropriate referral or professional development process.

For the following 3 case studies evaluate the presenting client health status and
answer the relevant questions in the Evolve Hub.

Each question will support you to:
- Determine the condition
- Evaluate if treatment is indicated or contraindicated
- Research condition
- Advise on referral or not
- Create treatment plan based on research and education

Refer to the Evolve Hub to complete the following questions for each case study
- What has the client said is the presenting condition/s
- Based on your current expertise or knowledge base are you educated and equipped to provide professional services to the client. If yes why, if not why?
- Conduct case specific research to educate yourself about this condition anatomically and how the condition relates to massage therapy. Include details of the anatomical information about the presenting condition. Include information of how this condition is treated by massage therapy
- What resources did you use to find your additional research and education information?
- Based on the presenting condition would treatment be indicated or contraindicated for a remedial massage therapist
- If treatment is contraindicated, please list details of the exact professional you would refer your client too
- If the treatment is indicated please detail what treatment you would provide including a summary of the area to be treated, summary of techniques, treatment reasoning and ongoing treatment plan
Case Study 1

Client Mrs. DW has come to you for evaluation and treatment of fibromyalgia. Mrs. DW experiences every symptom of fibromyalgia but her condition has not been officially diagnosed. Mrs. DW, age 52, experiences pain in all of her joints especially the knees and ankles. Mrs. DW has also reported that she experiences pain after prolonged standing (30 minutes) or walking long distances (more than 15 minutes). The pain sensation in the legs is described as dull pain and muscle stiffness. Occasionally Mrs. DW experiences muscle spasms in the legs without any notable cause. Mrs. DW has also reported difficulty in sleeping and has, in the past, experienced chronic depression.

Mrs. DW would like you to provide remedial massage to her legs and arms with the aim of easing muscle pain and tension long term. She has not experienced massage before and is unsure how the treatment will be provided along with what benefits/results she could expect.

Case Study 2

Mr LA has come to you for a remedial massage treatment. He has indicated he would like to receive a massage to the back and legs. Mr LA has reported being diagnosed with acute lymphangitis. The condition is current and was officially diagnosed 8 weeks ago when he noticed swelling in his right ankle. Mr LA is currently under the support of a general physician and currently taking a mild analgesic daily as prescribed. Mr LA would like to receive massage but is unsure how it will interact with his condition.

Case Study 3

Mr JF has come to you for a remedial massage treatment to the back, shoulders, arms and legs. He mentions recently been diagnosed with rheumatoid arthritis. Mr JF is 46 years old and in his early teens played a lot of competitive sport. He complains of having symptoms including fatigue, joint pain, joint tenderness and joint swelling. Mr JF would like to be put on a treatment plan over a 12 month period to see if remedial massage can support his condition.

ASSESSMENT 2.1

3. PROFESSIONAL DEVELOPMENT

UNIT: HLTMSG006 Adapt remedial massage practice to meet specific needs
Remedial massage therapists work in an industry that is constantly growing and changing. This is due to working with client health management and the ongoing research and development involved with the health sector. This means that information known to a therapist could change at any time as new research and development takes place and becomes available. Specifically, for massage therapists this becomes prominent as industry expertise and research continues to validate the benefits of massage therapy and stipulate guidelines for condition management.

As a professional remedial massage therapist you are required to keep up to date with the most recent and relevant information regarding your professional services. Keeping your education up to date is an important part of being able to provide the best possible services to your clients.

ASSESSMENT 3.1
4. CONTINUATION OR VARIATION OF TREATMENT

Remedial massage is an educated and structured bodywork therapy used for condition intervention and management towards better health. As such remedial therapists need to be able to effectively monitor and evaluate treatments as a part of ongoing treatment management. Therapists are required to monitor the effectiveness of treatments according to predetermined treatment goals and objectives. As a part of this therapist need to determine if a treatment is:

- On track and or achieving predetermined treatment goals and outcomes
- Not achieving key treatment markers towards treatment goals and outcomes

To accurately monitor the effectiveness of treatment according to treatment outcomes therapists will need to ask themselves the following 4 underpinning principles:

1. Body positive feedback: Is the body responding with indicators of improvement to condition?
   - Yes: Treatment is indicated to continue in the same treatment plan
   - No: The treatment plan needs to be re-evaluated

2. Body negative feedback: Has the client had any reactions occur during or after treatment?
   - Yes: The treatment plan will need to be re-evaluated to determine what is causing the reaction
   - No: Treatment is indicated to continue in the same treatment plan

3. Therapist observations: Are your reasonable expectations of treatment progress being met?
   - Yes: Treatment is indicated to continue in the same treatment plan
   - No: The treatment will need to be re-evaluated to assess why treatment expectations are not being met

4. Client feedback: Are the client’s reasonable expectations for treatment progress being met?
   - Yes: Treatment is indicated to continue in the same treatment plan
   - No: The treatment will need to be re-evaluated to assess why treatment expectations are not being met

ASSESSMENT 4.1
ASSESSMENT 4.2