Issues that Need to be Addressed in Massage Therapy

Mateusz Romanowski 1,2*

- ¹ Rheumatological Center in Śrem, Warta River, Poland
- ² Academy of Physical Education in Poznań, Warta River, Poland

ARTICLE INFO

Article type: Letter

Article history: Received: 25 Jan 2012 Revised: 3 Apr 2012 Accepted: 4 Apr 2012

Keywords: Massage Critical Care Unit Family

▶ Please cite this paper as:

Romanowski M, Issues that Need to be Addressed in Massage Therapy. *Nurs Midwifery Stud.* 2012;1(2):109-10. DOI: 10.5812/nms.8773

Published by Kowsar Corp, 2012. cc 3.0.

Dear Editor,

I read with great interest the recent study by Adib-Hajbaghery et al. (1). The authors have clearly shown that massage therapy (MT) which is by the patients' relatives, decreased systolic blood pressure, pulse and respiration rates of patients admitted in Critical Care Unit. The Adib-Hajbaghery et al. findings corroborate recent studies that suggest a significant role of massage therapy in the management of vital signs besides body temperature. This research is really valuable because it shows the importance of the active support of relatives in the treatment process. Massage is a form of therapy which employs the kinetic and potential energy on tissues to cause a reaction. In order to provoke this reaction in the body by manual massage, various techniques are used which take into consideration specific structure and functions of the massaged tissues and organs. MT responds to problems of a modern man - tired, stressed out, disoriented and living the fast life. MT may have a beneficial effect on several physiological variables, specifically salivary cortisol and heart rate (2). It also appears to be a useful method of reducing pain, tension, and anxiety in patients recovering after cardiac surgery (3). Bost and Wallis have shown that weekly sessions of massage therapy, over a five week period, appear to decrease levels of anxiety (4). Because anxiety is a very common symptom associated which acute coronary syndrome and acute myocardial infarction use of massage might be useful. There are, however, several issues that need to be addressed.

- 1) How efficient would be massage done by patient relative compared to one done by a therapist with formal training? Without answer to this question it is difficult to define results and compare them with other studies where massage is usually done by professional therapist.
- 2) Massage is not entirely risk free (5) and must be done with right pressure (6). It should be considered whether a person without proper training in the field of anatomy, physiology, and biomechanics is able to learn these essential elements within short training?

DOI: 10.5812/nms.8773

© 2012 Kashan University of Medical Sciences; Published by Kowsar Corp.

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/3.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

^{*} Corresponding author: Mateusz Romanowski, Academy of Physical Education in Poznań, Warta River, Poland. Tel: +48-61512046048, Fax: +48-61512046048, E-mail: mateuszromanowski@onet.pl

3) Human mannequin probably does not give similar biofeedback to therapist as human tissues and organs. That is why it is not the best way to practice massage's techniques.

Clearly, massage therapy has a significant adjunctive role to play in the management of a spectrum of Critical Care Unit patient. There is a clear need to increase awareness about the usefulness of massage therapy both among medical doctors as well as patients so as to fully make use of its beneficial effects. Results from Adib-Hajbaghery et al. study have shown that massage performed by a patient relative may be in comprehensive treatment. Further research is needed to verify the results.

Financial Disclosure

None declared.

110

References

- Adib-Hajbaghery M, Abasi A, Rajabi-Beheshtabad R, Azizi-Fini I. The Effects of Massage Therapy by the Patient's Relative on Vital Signs of Males Admitted in CCU. Nurs Midwifery Stud. 2012;1(1):16-21
- Moraska A, Pollini RA, Boulanger K, Brooks MZ, Teitlebaum L. Physiological adjustments to stress measures following massage therapy: a review of the literature. Evid Based Complement Alternat Med. 2010;7(4):409-18.
- Bauer BA, Cutshall SM, Wentworth LJ, Engen D, Messner PK, Wood CM, et al. Effect of massage therapy on pain, anxiety, and tension after cardiac surgery: a randomized study. Complement Ther Clin Pract. 2010;16(2):70-5.
- Bost N, Wallis M. The effectiveness of a 15 minute weekly massage in reducing physical and psychological stress in nurses. Aust J Adv Nurs. 2006;23(4):28-33.
- Ernst E. The safety of massage therapy. Rheumatology (Oxford). 2003;42(9):1101-6.
- Field T, Diego M, Hernandez-Reif M. Moderate pressure is essential for massage therapy effects. *Int J Neurosci.* 2010;120(5):381-5.