

Massage for the Medically Fragile, Chronically Ill or Wounded Patient

By Pam Pennington, CLT, LMT

Trauma (from the Greek word for “a wound”) can be a life altering illness, a body altering injury, or a mind altering, life-threatening situation. Trauma inherently comes with a certain amount of pain. If we ignore or minimize the pain, it can feel, to the patient, like being re-traumatized.

Ethics:

It is important to have clearly defined boundaries while being flexible when necessary. Your health and well-being are as important as those of the patient. Compassion is a wonderful thing. Empathy can be an effective tool in treatment. Compassion and empathy in a person with poor definitions of self (therapist) and other (patient) can lead to problems for both.

People with trauma, no matter the type, may already have issues with boundaries. Those with emotional trauma may have had their personal space, personal power and other issues ignored. They may try to infringe on your boundaries. Remember to honor yourself. Understand, those who have not been allowed to have boundaries of their own, may not know how to honor them in others. Be gentle, yet firm in your boundaries, when necessary.

People with debilitating illnesses can often feel as though they no longer have the right to say “no” to treatments or procedures. Many of my clients have told stories of procedures that, though they may have been life-saving, the patient was left feeling powerless and dehumanized.

There are times when a patient comes to me, and depending on what needs to be done, I tell them that I can work through their clothes. “Oh it’s okay”, they may say. “Everyone in the hospital has seen me naked at some time. I’m not bashful anymore.” It is almost as though they have resigned themselves to humiliation for the sake of health.

I make it my goal to restore a sense of dignity. While I am treating them, I do my best to respect their physical boundaries. This is the breast cancer survivor with lymphedema, who I carefully drape, so only the area that needs to be exposed for the work, will be. This is the house fire survivor with severe scarring from burns or the returning vet with a missing limb. In these people, scars are often more than skin deep. There may also be emotional trauma, old or new, that must be respected.

Communications:

Most practitioners get some kind of health history from the client on the first visit. You can count on the fact that the intake document may not be complete. People hold back information for a variety of reasons. Perhaps the greatest reason is trust. Trust must be earned.

I have a very extensive intake form that asks about medical history. Sometimes, I am asked why I need so much information to do a massage. I usually reply, “It is for your safety and comfort that I need to know so much of your medical history. I will give you the best massage possible. My motto, as a massage therapist is, “First do no harm”. I will adapt the massage to fit your needs.”

From the moment that a person walks in the door to see you for treatment, there is a power difference. There is an assumption that you are the person that is going to help him feel better, maybe even fix what is wrong. The client will always see you as knowing more than him. I make an effort to try to narrow the gap in power. I help him to understand that this will be a co-operative venture. Together, we will find what works.

After the initial paperwork, the patient is interviewed. I tell him what I expect from the session. I ask him to tell me immediately if there is pain or any type of discomfort, so that we can find another way of doing things. We sit face to face so that we both evaluate each other’s responses. Usually, (s)he is coming to me for some particular reason: (s)he has sore muscles, scar tissue, and lymphedema, or muscle spasms etc. We communicate before I evaluate the extent of the problems.

It is important that (s)he understand that this is not a session where I do something **to** him and he simply must endure it. I try to reinforce the concept that we will co-operate with one another through communications to find solutions to any discomfort. There is often another way to accomplish our goal. Everything can be paced for his sense of comfort. I tell him that I will only expose the area necessary for the intended work. I will leave the room while (s)he gets ready and knock before I enter. We agree on the length of time and that the patient is in control of the session pace.

People with trauma often have Post Traumatic Stress Disorder (PTSD). They probably will not tell and may not even know they have it. People who are coming for massage or bodywork, may not be comfortable discussing any sort of psychological or emotional issue.

In bodywork, there may be physical signs of a stress response. You need to pay attention to the subtleties and the not so subtle signs: skin crawling when you

touch a certain area of the body, jerking when touched, holding a body part in a rigid position in anticipation of touch. If it appears that the person is anticipating pain, stop and ask if indeed he or she is experiencing discomfort. If the answer is “no”, I will assume there is some kind of anxiety, or physical or emotional pain is discomfort in discussing. I stop for a moment and tell the person that I will ask permission before doing anything else. I want her (him) to feel in control of the session. I repeat, “If I do anything at all that makes you uncomfortable, I want you to let me know. We can usually find an alternative method of doing things.” Working with a person, to help create a bond of trust may take a little longer to do the bodywork. It will ultimately have a longer lasting effect on person with PTSD or anyone with issues of trust and touch. Those with chronic conditions or serious illnesses, are already facing some stress surrounding a lack of control in their lives. You can make life a little easier for an hour.

An important aspect of communications with your patient, is an understanding of medical terminology and the pathologies. Someday, a patient may hand you a report from their doctor and ask you to interpret it for them.

Infection Control / Environment Control

Review infection control protocols. If your patient/client has a disease or infection, know if it is contagious and by what means it is spread. Take appropriate steps to protect yourself and your clients from contact. Pay special attention to skin lesions. There are many drug resistant infections that begin with only a pimple-sized lesion. Understand when to modify the physical location where you work on the client, when to modify how the work is done and when to say “No” to working on a client.

If a client has a disease or injury that could put any of your other clients at risk (because they are immuno-compromised), and you do not feel that you can adequately control your work environment, consider going to the client if it is appropriate to give therapy. Use universal precautions for chronic conditions such as Hepatitis C. After leaving, change your clothing, and put the used clothing in a bag to be transported to where you do your laundry. Do not wear those clothes around other clients or your family, until they have been washed. Remember the reason for changing location and be sure to protect others from disease.

If the client needs adaptations to the **type** of bodywork, or **length of time** for the massage/bodywork, due to the nature of injury or illness, you may need to pay close attention to responses from the client, to know how deeply and how long to work. If the client’s physical or mental condition would be worsened by contact, it is up to you the professional, to make the decision in the best interest of your

client. Read everything you can to make yourself familiar with the client's pathology. Be willing to switch modalities or modify them. Use critical thinking.

As you can see, boundaries and communications are vitally important in treating the medically compromised client.

Maintain a clean environment, including handles of doors and even pens. Anything that people regularly touch, needs to be cleaned regularly with an antimicrobial solution. Remember that people who are chronically ill or medically fragile may have a compromised immune system. As much as possible, take this into consideration in your work environment.

People who are contagious (whether patients or workers) should not even walk into the office, **especially, if they have a fever**. Make sure that all of your other clients understand that requirement. A person with a compromised immune system should feel safe walking into your space.

Gloves are a protective barrier. They protect you from pathogens carried in the patient's bodily fluids, keeping those pathogens from entering your body through your hands. Your hands, if they get dry from frequent washing can get cracks in the skin. If you have a hangnail, a cut or any other compromise in the integrity of the skin, wear gloves. Your clients don't need to get something from you.

Wash your hands frequently for at least 20-30 seconds at a time. If you use hand sanitizer, be sure it contains alcohol. Only the ones with alcohol have been proven effective against most viral and bacterial contagions. Put a dollop about the size of a nickel in the palm of your hand and vigorously rub your hands together until it is gone. Do not wipe it off. You should still wash your hands periodically with soap and water.

Hand sanitizer is drying to the skin and may cause your hands to get micro cracks in the skin. Get a good lotion to use between clients. Don't forget your fingers and cuticles need moisturizing also.

Keeping your nails trimmed is essential for the safety of the patient's skin. If you have long nails, the chance of scratching someone with fragile skin is high. You could also put a hole in your gloves. Keep your nails short and pay attention to your cuticles as well. For your safety, protect yourself from openings in your skin, where microbes can enter.

Be sure that your massage table is cleaned after each client and that the surfaces of your treatment room are clean.

Be aware that many people are allergic to latex. Use Nitrile gloves instead when gloves are indicated. Get properly fitting gloves and your clients will not

even notice that you are wearing them.

You should not avoid wearing gloves for fear that the patient will be offended. Gloves do not only protect you from the patient, they protect the patient from you. Tell your patient this and they will love you for it.

If you work with people who may have multiple chemical sensitivities, be aware that any chemical that you use in your office has a potential to trigger an immune response. Get a thorough history of allergies, what an allergic response may look like and who should be contacted in case of emergency.

Find out if the patient with allergies, has an “Epi-pen” (or some other form of epinephrine) and where it is. While you may not be licensed to give medications, you can get it for them. Contact 911 for emergencies. **Do not transport a client to an emergency room by yourself.**

Ask before applying any lotion or oil. This includes essential oils. Aromatherapy is contra-indicated when working around people with multiple chemical sensitivities. No matter how “pure” the product, it can still be an allergen. Do not wear them yourself either, if you intend to work around chemically sensitive people.

It is not unusual for people who have had any kind of prolonged medication or who are chemically sensitive, to have some alteration in the sense of smell. It is best not to wear any kind of perfumes or oils that would bother the patient. Keep your space as scent neutral as possible.

Temperature control is important. People, who are immuno-compromised, anemic or are otherwise compromised in the ability to regulate temperatures adequately, will need you to be sensitive to their comfort level. Remember that chills can create muscle contractions in order to increase body heat. Sweating can also create chills. Both could be counter productive if relaxation and reduction of muscle hypertonicity is the goal.

Preparation of an environment is important. Keep the environment neutral if possible.

Medications and Co-Morbidities:

Today we live longer, with more diseases and more medications than our ancestors. We take prescription medications, herbs and natural remedies to self-treat. Knowing the effects of them is important to client and therapist.

Many clients with serious illnesses or injuries are taking some sort of pain medication or an anti-depressant. Clients come to your office taking antibiotics, muscle relaxants and anti-inflammatory agents. And they may be taking a lot more.

According to the NIH elderly patients with multiple morbidities, may take as many as 50 pills per day. Find out what your clients are taking and why they are taking it.

Often your patient has multiple health issues. The cancer patient may have had other problems before they got cancer. The emphysema patient often has multiple system compromises. The person with MS may have other forms of autoimmune disease concurrently. In other words, be aware of all of your client's health issues: how those issues affect daily life, what medications are being taken and what are the symptoms of each disease process. Understand some basics of pharmacology and the pathological implications.

Research the side effects and warnings for the medications that your clients are taking. There is a great web page that gives you information on almost any medication. It is "Rx List The Internet Drug Index". www.rxlist.com/

Positioning, Pressure and Other Adaptations

Most massage therapists and body-workers do the work because they believe they can help people. When working on a person who is wounded, medically fragile, or chronically ill, the pace of the work changes. The goal is not always to "fix" what is troubling that person, right now. The patient has more than sore muscles. So the goal is often more palliative: alleviate some pain, or help her to relax enough to sleep through the night. How that goal is accomplished, is through the adaptations of what you may already know. Chances are, deep tissue therapy is not indicated here. In this case, less is more.

Depending on the pathology, the ability to move, positioning restrictions, or requirements, energy levels, co-morbidities, and pain, will all influence how you proceed with the massage.

Positioning considerations are important not only for injured patients but also for those whose pathologies may not be tolerant of the usual massage table positions. They may need to have the head of the table elevated to avoid gastric reflux or for ease of breathing. There may be other reasons for position concerns. (I.E. recent mastectomy with post-surgical edema, or post-traumatic stress disorder.) There could be any number of reasons to consider position adaptations. Critical thinking is key here. What are the needs of the patient? How can I, as the therapist, accommodate those needs?

Pressure may need to be adapted. A person with fragile skin should not have a vigorous massage. Neither should someone who is extremely fatigued because of a disease process or injury. Those with blood dyscrasias like thrombocytopenia and others, will need pressure adaptations.

How is your patient/client feeling **today**? Just because the last time you were able to do a certain type of massage for an hour, does not mean that your patient can handle that today. Today, your patient may need a very gentle touch for only a half hour. Today your patient may feel overwhelmingly stressed. They may really need a comforting and gentle massage more than anything else. Today they may be experiencing new symptoms. Communication is important. You may need to refer them back to the treating physician.

Does your client have a medical device? (I.E. pacemaker or internal defibrillator, IV port, central line, anastomosis for dialysis patient, permanent or temporary drains from wounds or altered organs, colostomy or ileostomy bag, gastric tube, stoma of any kind, cochlear implant or other devices not mentioned. Be very careful not to disrupt these in any way. Keep your distance from any kind of opening that could be infected. **There is a potential for life-threatening injury to the patient, if you disrupt them.** Do not use oils or lotions around any of these. Stay away from them, no matter what the complaint is. It is outside of your scope of practice. Refer them back to the treating physician if there are complaints regarding these devices.

Length of the session is not determined by the opening you have in your schedule. This session is for the benefit of the client. If fifteen minutes is all that would be beneficial, then that is the length of the session. If you make the person feel worse, he will not return. Set aside a reasonable time and be willing to adapt to the needs of the client.

There will be times that you will not be able to do much more than gentle holding, Reiki , Therapeutic Touch or some other type of energy therapy. Be sensitive to your patient's needs. Use critical thinking to decide how (or if) the session should progress.

HIPPA

When working on medically fragile, chronically ill or traumatized clients, you may need information from another health care worker to proceed with a care plan. There are laws about what can be shared and how to obtain information. Shared information must have patient/client permission. If you are unfamiliar with HIPPA regulations, get online and learn about them. Take an ethics class that includes HIPPA regulations. Protect your client information. Protect yourself from legal actions against you.

Pharmacology

Knowing what your client is taking in terms of medications, is more than

just being nosy. If you remain familiar with certain common medications and the side effects, you can make better decisions in terms of care. Again, it is important to be able to do critical thinking to decide how to proceed, based on your knowledge of pathologies and the medications prescribed for them.

Analgesics/ Anti-inflammatories/ Antipyretics-

Analgesics reduce pain. Anti-inflammatories reduce inflammation and antipyretics reduce fever. Not all analgesics have antipyretic and/or anti-inflammatory qualities.

Analgesics work in a variety of ways. They may stop the inflammatory cascade (a series of chemical reactions that take place in the body resulting in inflammation). They may reduce fever, or they may simply block the perception of pain in the brain. Some may have only one quality or they may have all three. It is important to know how they work and the potential side effects. Some side effects include: constipation, nausea/vomiting, decreased platelet count, increased kidney or liver enzymes, bleeding of the stomach or intestines and more. You do not want to challenge an already challenged system.

Aspirin is an analgesic, with anti-inflammatory and antipyretic qualities and is also used to reduce the ability to form clots or plaque, so the potential for bruising may be increased.

Aspirin is a non-steroidal anti-inflammatory drug (NSAID). This classification of drug may also be effective as an anti-pyretic and is effective for moderate pain reduction.

Steroidal anti-inflammatory drugs are not as effective as immediate analgesics. Analgesic effect may depend on the reduction of inflammation first. Long-term use can cause osteoporosis and suppression of the adrenal cortex. (These are corticosteroids. These are not the same as anabolic steroids, which stimulate the growth or manufacture of body tissues- testosterone etc.)

Acetaminophen is an analgesic with anti-pyretic qualities but is not as effective as an anti-inflammatory. It is included in many medications and therefore if taken for pain also, has a potential for overdose. Overdose can lead to elevated liver enzymes or liver failure. If taken concurrently with alcohol, it can lead to liver failure.

Analgesics that occupy the opiate receptors block the perception of pain. They have a potential for causing nausea and constipation as well as other side effects.

The most important thing to note when you ask your client if they take any pain medication, is that the ability to give feedback in regard to sensation

is reduced.

Antidepressants and Psychotherapeutic Drugs

These can range from medications to treat anxiety or sleep disorders, to those that treat disorders such as bi-polar depressive disorder, OCD and others. Psychotherapeutic drugs are often given to treat a physical disorder that can result in a psychiatric disorder. They work by changing the chemistry of the brain.

Many long term debilitating diseases, life threatening diseases or chronic pain can result in depression or anxiety disorders. Some of these can be the result of changes brought about by the pathology, or by the medications required for treatment. Depression and anxiety can also be related to Post Traumatic Stress Disorder (PTSD).

People with depression related to anxiety or PTSD can be hyper-vigilant. You will need to work more slowly with good communications in regard to what you are doing and why. The client needs to feel as though they have control. Give it to them as much as possible. Work with your client.

Your client is not a massage therapist and may not know the particular technique that you will be using. Take the time to explain.

Be patient and peaceful. Don't take emotional reactions personally. Listen to what is being said and what is not. Maintain clear boundaries. You are not a psycho-therapist. While letting someone express herself is important, know when to refer her back to the physician, or counselor. Stay within your scope of practice.

Cardiac Regulators

When you see that someone is taking one of these, ask questions about the pathology. If the patient doesn't know the answer, do light work and contact the health care provider for more information if possible. The reason for these can range: mild arrhythmia to congestive heart failure.

You should know how to perform CPR. Take regular classes for this from American Heart Association or a reputable institution. You should be familiar with the signs and symptoms of someone having a heart attack or stroke. Remember, women do not always present with the same symptoms of heart attack as men.

If someone takes Nitrostat, (a potent vasodilator used for angina -chest pain) ask if they have some with them. You may need to get the bottle for them. If three are taken, 5 to 10 minutes apart and there is no change in the pain level, call 911. Stay with your client, until help arrives. There are **no exceptions** to this. **Stay with your client.**

Anti-coagulants

Plavix, Coumarin (Warfarin), Heparin. If the Coumadin or Warfarin levels go past 3-5, use caution and no deep tissue massage.

Find out what the platelet levels are. Thrombocytopenia (low platelets) begins at 100. At 50, you should take serious precautions. At 20 or less, there should be no drag or friction on the skin. You may want to just do energy work until levels come back to more normal.

If your client is taking these medications and does not know what their values are, ask them if they bruise easily. If so, proceed with caution. If you see large bruised areas, you may want to be very cautious, until you know otherwise. If the client was being treated for a clot, do not massage that limb until you have spoken to the referring physician and know that it is safe (that may be several months after diagnosis).

(Wible, Jean. Pharmacology for Massage Therapy

MacDonald, Gayle. Massage for the Hospital Patient and Medically Frail Client)

Cholesterol Regulating Drugs

These include Statins, Niacin, Bile Acid Resins and Fibric Acid Derivatives. They act to lower the formation of cholesterol.

If you have a client/patient that is taking a Statin-type drug and Coumarin, use caution and alter the depth of stroke until you know how they will handle it. Statins can elevate blood levels of Coumarin (Warfarin).

Be aware that there is a risk of myopathy or rhabdomyolysis in persons who are taking Statins and are diabetic. If there is sudden unexplained diffuse muscle pain, have them report it to the prescribing physician immediately. These conditions can be life threatening. Do not massage but refer to the physician.

Also have them report liver pain to the physician. (www.rxlist.com)

These are only a few of the many types of pharmaceuticals your client may be taking. Take time to investigate for your clients' sake. Also remember, that **you may not prescribe medications of any type**. Practicing medicine without a license is illegal. Listen to your client and get them to report unusual symptoms to their physician.

Burn Out - Self Care

When you find yourself feeling overwhelmed by the suffering around you, find someone to talk to. There are many ways you can do this. Seek help from a mental-health specialist, go to a peer counselor, or a minister. When you are stressed, you are less effective and you put your health at risk.

Know the signs of depression and anxiety. Get online and research. If you are anxious or depressed, talk to your Doctor or Naturopath. Don't suffer in silence.

Develop a spiritual practice. Take up yoga, Chi Gong or Tai Chi. Pray. Scientist agree, that development of a spiritual practice is healing to body and mind. You do not have to carry all the cares of the world on your shoulders. Learn how to let go of your clients at the end of the day. If you feel the desire to pray for them, do so and then let go.

If you need a break from the really intense cases, take one, as often as you need to. Be sure to take care of you. If you don't, you will have nothing left to give to your patients.

Exercise regularly. Exercise is not only good for the body but also for the mind. Recent studies indicate that clarity of thought improves after mild exercise (walking, belly dancing or ballroom dancing, use a hula hoop, or biking etc.). According to Dr. Mehmet Oz, Author of You the Owners Manual, we need to get at least a half hour of exercise per day.

Get plenty of rest - at least 7 to 9 hours a night. When you sleep, it is believed that the body repairs itself. When you dream, it is believed that the mind repairs itself and solves problems.

Lack of continuous sleep can reduce the effectiveness of the immune system, and influence how your body handles blood pressure and depression. One of the worst effects of the lack of quality sleep is fatigue which can reduce your effectiveness at your job, effect your memory and ability to concentrate, effect you willingness to exercise, effect your relationships and many other aspects of your daily life.

Maintain good sleep hygiene: Don't eat or drink things with stimulants in them before bedtime. Avoid alcohol before bedtime. Sleep in a quiet, dark room. If you have trouble getting to sleep, don't watch a thriller on the TV before going to bed. Allow yourself enough time to sleep. If you have problems with frequently awakening, find out why. Seek medical help when lack of quality sleep becomes a problem.

Eat healthy foods. A balanced diet is best. Fresh fruits and vegetables are better quality than canned or frozen and have fewer additives. Eat what is in

season. If you are a vegetarian, get a balanced diet and make your calories count. If you are not, remember that the body requires very little meat per day. Variety is good.

Discover what gives you joy. Set aside time for that regularly, as though it is medicine or a necessary health appointment.

Learn to have some fun. Join a laughing club. Go online and find a laughing yoga class near you. Laughter is not just good for the soul; it is very good for the body. Learn how to take yourself just a little less seriously. Play!

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