

Massage and myotherapy's part in palliative care

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My academic efforts include educating doctoral students in my school's Health Rehabilitation Sciences program. In the foundation course for the program, I teach students about four health strategy contexts within which rehabilitation efforts can be administered: preventative, curative, rehabilitative, and supportive.¹ Within this framework I often substitute the term palliative for supportive because its primary goal is quality of life optimisation and palliative care by definition is focused on improving the quality of life not only for patients but also for their families.

As well highlighted in this issue, massage and myotherapy have an obvious place as a part of palliative care for patients and more and more research is examining massage benefit for particular palliative care populations such as those admitted to hospital or those with cancer. The increases in research focus is great and bodes well for the progression of the field. However, there are other populations related to palliative care recipients for whom massage and myotherapy would also benefit including informal caregivers. Informal caregivers - or as y'all refer to them in Australia: Informal carers - are those who provide unpaid, 'informal' care for family members or friends with temporary or permanent conditions that limit functional independence.²

Evidence is building for massage's benefit with regard to anxiety, depression, and stress which are generally experiences informal caregivers have in abundance. Caregivers in general often prioritise the needs of those they care about; particularly when those loved ones are vulnerable. In the health care environment, informal caregivers tend to suppress their needs while focus is heightened on their loved one who is recovering from a serious illness or injury, or whose health is deteriorating.³ Recently

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published research sought to examine massage for informal caregivers in the rehabilitation hospital setting and points to positive supportive/palliative impact.

'Therapeutic massage to enhance family caregivers' well-being in a rehabilitation hospital' describes a research study with two goals: understand the impact of massage dosage on the psychological functioning of family caregivers and identify implementation barriers and challenges along with caregivers' perceptions of the program.⁴ Caregivers of adult and pediatric in-patients were randomised to either receive one 60-minute massage per week for two weeks or three 60-minute massages per week for two weeks in a private massage room in or near the hospital. Massages followed a standardised protocol that allowed for individualisation based on each participants' needs, engaged moderate pressure, and addressed the whole body. Caregiver well-being and stress as well as acceptability were measured. Participants were interviewed after study completion so participants could provide more detailed responses about what they liked and didn't like about the massage and the program, what they would change, and how they would describe the program to a loved one.

Thirty-eight people were enrolled and randomised. The hour long massage protocol indicated the body area addressed, order, and time allotment for each portion of the massage session. Most of the participants (53%) were mothers of patients in the hospital while another 34% were spouses; and almost all participants were White (92%). Sixteen percent of participants (n=6) were unable to complete the intervention due to their loved one being discharged earlier than anticipated or feeling too overwhelmed with their loved one's medical condition and treatment/support needs. Most participants had 100% compliance (two or six total massages). Both groups had less depression, anxiety, somatisation, and perceived stress at post-intervention compared to baseline, but massage three times per week for two weeks was not better than once per week.

The program exit surveys provided meaningful feedback about the program's acceptability for this population. Participants reported pain and tension relief, better sleep, and relaxation from the massages in addition to nearly all participants indicating their mental health improved during the program. Several participants indicated the massage induced breaks helped them to rejuvenate, have a better attitude, and feel more focused with their caregiving responsibilities. Finally, participants indicated that being a part of the study and being able to participate in the massage program benefited their perception of the hospital and the care team. Several highlighted quotes from the exit interviews pointed to the appreciation participants had of being valued and affirmed as a caregiver by the hospital and the program.

A key application-to-practice point this research highlights is the important impact of supportive care for caregivers and how patient care can be improved by including informal caregiver palliative approaches. Participants in this study indicated the research and affiliated massage program reflected well on their view of the hospital and supported them in their caregiving role with the patient. We as massage therapists are well aware of the challenges faced by our clients who are themselves caregivers for the various people in their lives and in many cases, are indeed informal caregivers for loved ones with temporary or permanent conditions that limit functional independence. We have these clients' 'attention' in relation to their own self-care and renewal needs, but other avenues may exist to support other caregivers in need through caregiver support services or programs such as the one highlighted in this research. Ideally, hospitals and other patient advocacy proponents can take up a public service approach of 'self-care through massage' message to accompanying caregivers of admitted patients. This study is an evidence based example of how even once weekly massage for caregivers is beneficial for individual well-being and perspectives on continued caregiving capacity. To learn more about the challenges faced by informal caregivers and various support programs for specific caregiver populations

of interest, check out the robust information available from the Australian Institute of Health and Welfare at <https://www.aihw.gov.au/reports/australias-welfare/informal-carers> .

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