

25188 Genesee Trail Rd, Ste 200 Golden, CO 80401 800-458-2267 fax 800-667-8260 www.abmp.com

An ABMP Position Statement

A comment on the **Prevention Strategy** of the National Prevention, Health Promotion, and Public Health Council
December 2010

1. What are your general suggestions on the development of the National Prevention and Health Promotion Strategy?

• Thank you, Council members, for the opportunity to comment on the national effort to advance prevention, wellness, and health promotion practices. The following comments are submitted on behalf of Associated Bodywork and Massage Professionals (ABMP), the largest association for massage professionals in the United States with more than 75,000 members nationwide. In responding to your call for feedback, we partnered with Washington state massage therapist Diana L. Thompson, past president of the Massage Therapy Foundation. For several years now, she has been a pivotal voice speaking on the efficacy of massage and working to raise the profile of massage and bodywork at the same time our nation is seeking to reinvent healthcare and wellness initiatives.

Massage therapy traditionally resides in the prevention and wellness domain and therefore we believe we have much to contribute to this endeavor. Please note that, as we reference massage research on specific conditions, our primary assertion is that massage therapy has many positive effects on *healthy* people. There are studies on massage for caregivers and other stress-related situations that come close to demonstrating our position that massage is an effective adjunct for health and wellness practices in healthy adults and children, but few that truly reflect our contributions to prevention and helping healthy people stay healthy. Perhaps, as a result of these efforts, funding will become available to investigate questions to help policy makers more fully appreciate the benefits of regular massage therapy as part of a commitment to wellbeing and a healthy life style.

The citations referred to in this response will be included in the Additional Comments or Suggestions section.

• Thank you, President Barack Obama, for the Patient Protection and Affordable Care Act, specifically:

- Section 2706 non-discrimination with respect to licensed or certified providers acting within their scope,
- Section 3502 establishing community health teams that include complementary and alternative medicine (CAM) practitioners,
- Section 4001 establishing the National Prevention, Health Promotion and Public Health Council, and
- Section 6301 promoting patient-centered outcomes research and providing for a patient-centered outcomes research institute.

Section 2706: Massage therapists are regulated through licensure or certification in 41 states; two additional states have passed legislation that is currently being implemented. The scopes of practice of each state, as summarized by the Massage Therapy Body of Knowledge Task Force, assert the following: massage therapy is a healthcare and wellness profession involving manipulation of soft tissue. The practice of massage therapy includes assessment, treatment planning, and treatment through the manipulation of soft tissue, circulatory fluids, and energy fields, affecting and benefiting all of the body systems, for therapeutic purposes including, but not limited to, enhancing health and wellbeing, providing emotional and physical relaxation, reducing stress, improving posture, facilitating circulation of blood, lymph, and interstitial fluids, balancing energy, remediating, relieving pain, repairing and preventing injury, and rehabilitating. Massage therapy treatment includes a hands-on component, as well as providing information, education, and non-strenuous activities for the purposes of self-care and health maintenance. The hands-on component

of massage therapy is accomplished by use of digits, hands, forearms, elbows, knees, and feet with or without the use of emollients, liniments, heat and cold, hand-held tools, or other external apparatus. It is performed in a variety of employment and practice settings. (www.mtbok.org)

The 2007 National Institutes of Health (NIH) survey on CAM use finds that massage therapy is the second most-used practitioner-based CAM therapy. One third of adults used some form of CAM; consumers who choose CAM approaches are seeking ways to improve their health and wellbeing or to relieve symptoms associated with chronic, even terminal, illness or the side effects of conventional treatments for them. In the 2009 survey of the American Massage Therapy Association (AMTA), 97% of consumers who use massage therapy agree that massage therapy should be considered a part of health care.

Section 3502: Research is a critical component for the inclusion into integrative health care. CAM practitioners have been shown to improve patient outcomes in a variety of areas. For massage therapy in particular, research shows that it constructively addresses the following:

- Pain—acute (headache, pre and post-operative)^{1, 2, 3, 4, 5, 6}, chronic (back, neck)^{7, 8}, muscle pain⁹, joint pain (osteoarthritis, TMJ)^{10,11, 12, 13}, bone pain¹⁴, nerve-impingement pain (sciatica, carpel tunnel)^{15, 16, 17}, non-inflammatory pain (growing pains, cancer)^{18, 19, 20} fibromyalgia^{21, 22}
- Stress, anxiety, depression, mood disorders, agitated behavior^{23, 24, 25, 26, 27}
- Well-being, self-esteem, self-awareness^{28, 29, 30, 31, 32, 33}
- Loss of sleep, relaxation^{34, 35, 36}
- Balance, range of motion, flexibility^{37, 38}
- Nausea and fatigue associated with cancer^{39, 40, 41}
- Immune function^{42, 43, 44}
- Constipation, digestive disorders^{45, 46, 47, 48}
- Circulatory disorders^{49, 50, 51}
- Reduced hospital stays—post-surgery, premature babies^{52, 53, 54}
- Reduced work-place health-related expenses⁵⁵
- Prevention^{56, 57, 58, 59}
- Support for rehabilitation from substance abuse^{60, 61, 62}

These findings, in combination with the prevalence of use, indicate the importance of making massage an integral part of a coordinated health care plan.

Section 4001: Three of the four top purposes and duties of the National Prevention and Health Promotion Council directly reference integrative health care. The definition of integrative health care or integrative medicine, as developed and refined by the Consortium of Academic Health Centers for Integrative Medicine (CAHCIM), is: the practice of medicine that reaffirms the importance of the relationship between practitioner and patient, focuses on the whole person, is informed by evidence, and makes use of all appropriate therapeutic approaches, healthcare professionals and disciplines to achieve optimal health and healing. (www.imconsortium.org/about/home.html) Massage therapy is relevant to this pursuit and is informed by evidence.

Section 6301: Massage therapy is the number one out-of-pocket expense for consumers who use CAM modalities (excluding product-based expenditures), and the second most-used CAM practitioner-based modality (NIH 2007 survey on CAM use). However, research dollars do not reflect this consumer prioritization. Massage therapy research represents less than one percent of NCCAM's funding. The emphasis on patient–centered outcomes should include adequate studies on massage therapy that reflect how massage is practiced. In addition, massage therapy is rarely used in isolation. Perhaps funding should include studies of combinations of care, and fewer reductionist comparative studies. For example, chiropractic and massage are commonly used in tandem, as are massage and physical therapy. ^{63, 64, 65}

- Thank you, U.S. Surgeon General Regina Benjamin, MD, for convening the National Prevention, Health Promotion and Public Health Council, and calling for comment.
- Suggestion: In addition to calling for comment, it may be useful to consult specific documents, such as the Massage Therapy Body of Knowledge document. It was published in May 2010, after a year of development and stakeholder vetting, and is collecting comments as the profession tests and explores its applications. (www.mtbok.org)
- Suggestion: In summary, the following comments reflect these requests:
 - Include CAM practitioners, specifically massage therapists, in the planning and implementation phases of these strategies
 - Ensure that integrative health care strategies reflect the true meaning of the word *integration*, not parallel care (referrals to massage therapists without consultation on treatment planning) or restrictive care (limiting the scope of massage therapy to only address pain conditions, for example)
 - Consider the full scope of massage therapy and the contribution massage therapists can make to prevention and wellness strategies, the foundation of most massage therapy practices
 - Consider the need for compliance strategies, an issue that massage therapy can influence. For example, include strategies to enhance self-awareness and self-esteem in an attempt to enhance change motivation and promote healthier choices.
 - Take action on factors that impair quality of life such as chronic pain (not only those factors that result in death and disability)
 - Consider allocating funds for research on combinations of therapies, adjuncts, or add-ons, not simply comparative either/or studies.

2. What are your thoughts on the following elements of the Draft Framework:

- **a. Draft Vision:** Working together to improve the health and quality of life for individuals, families, and communities by moving the nation from a focus on sickness and disease to one based on wellness and prevention.
- Thank you for a vision that promotes teamwork, pooling the knowledge and resources of health promotion practices, the public health system, and integrative health care disciplines.
- Suggestion: Ensure that the integrative health care strategies reflect integrated practices—conventional medical providers and CAM providers interacting, seeking input from each other, and jointly contributing to the development of a patient's care plan—and not parallel care or restrictive care. Much of the conversation at, for example, the Institute of Medicine's symposium on Integrative Medicine and the Health of the Public, centered on identifying what CAM providers do well in order to replicate it within the conventional medical model, rather than integrating CAM practitioners into conventional medicine's health care protocols. At a time when general practitioner physicians' numbers are depleted, we have an opportunity to fortify the base of support with CAM practitioners, provide patients with options, and tailor health care to meet individual needs. Adequate health care often requires a team of providers, not one provider, to strategize together and address the various needs of an individual.

Massage therapists do not have diagnostic scope (nor do we strive to that end) but because we typically spend an hour with each patient in an intimate setting (undressed but modestly draped, hands-on with purposeful and informed care, probing for meaningful details) we are well-positioned to learn important aspects of what is affecting the patient's condition and lifestyle. Our insights can positively influence the overall treatment plan and should not be overlooked.

- Thank you for taking a stand to move the nation from a focus on sickness and disease to a focus on wellness and prevention.
- **Suggestion:** Massage therapists traditionally serve the public using a wellness and prevention approach and could contribute to the development of the plan. Studies not only reflect the use of massage therapy for

treatment purposes (back and neck pain, headaches, arthritis, constipation^{1, 2, 7, 8, 10, 11, 45, 46, 47, 48}) but also for functional and wellness purposes (balance, mobility, stress, sleep^{9, 34, 35, 36, 37, 38}). By improving balance and mobility in older adult populations, massage therapists can help prevent falls, encourage activity, and help maintain active lifestyles. By reducing stress and improving sleep in healthy adults, massage can help reduce the onset of stress-related disease such as heart disease, digestive conditions, and headaches, and reduce work-place health-related expenses^{49, 50, 51, 52, 53, 54, 55}.

- **Suggestion:** Massage therapy and other CAM professions and disciplines that function historically in the realm of prevention and wellness might provide helpful input on the implementation of the strategies, as well as the creation of the plan. Conventional medical practitioners may not be aware of the full scope of CAM professions and may therefore miss opportunities to employ cost effective and efficacious CAM services. For example, massage therapy is often not prescribed for acute care. There are increasingly common applications of massage therapy that are just beginning to be reflected in the research, for example, pre and post-surgical massage, massage for acute inflammation due to trauma, and massage for labor and delivery^{3, 4, 5, 6, 66, 67, 68}. By treating acute injuries we may be able to circumvent nervous system dysfunctions that lead to chronic pain.
 - **b. Draft Goals:** In order to achieve the vision for the National Prevention Strategy, efforts will be targeted toward the following goals. Each goal can be applicable to every member of the Council and to many public and private partners.
 - i. Create community environments that make the healthy choice the easy and affordable choice.
 - ii. Implement effective preventive practices.
- Suggestion: Recognize that making healthy choices "easy and affordable" does not ensure that people will abandon previous lifestyles for healthier options. Low self-esteem and depression, coupled with a lack of self-awareness often interfere with change motivation. Massage therapy has been shown to increase self-esteem and self-awareness and decrease depression^{29, 32, 33}. This type of shift in orientation may prompt healthier choices: people who are aware of the impact of their actions may be more apt to make choices that help them feel better physically and emotionally, especially when they believe they deserve to feel better. In addition, massage therapists typically spend one hour with patients, 1 to 4 times per month, at relatively low cost, providing effective and efficient support for change management as prescribed by primary health care providers.
 - **c. Draft Strategic Directions:** The intent is to use the Strategic Directions
 - i. to frame specific actionable proposals to meet the goals and achieve the vision for the Strategy, and
 - ii. as a lens through which to view federal and non-federal activities in order to identify how they can best promote wellness and effective prevention.
- Thank you for recognizing that in order to focus on prevention and wellness it is necessary to go beyond early diagnostic testing and take action on identifying and influencing the factors that underlie causes of death and disability.
- Suggestion: Include action on the factors underlying disease that can result in chronic pain and impact quality of life, not just conditions that result in death and disability. Many of the stages or levels of impairment used to define disability are excluded from health care coverage or workers' compensation yet significantly alter one's quality of life. It is important to go beyond the standard inclusions of disability and include those who suffer from chronic pain. Chronic pain is said to be more widespread, misdiagnosed and undertreated than any major disease.
 - 3. What recommendations should be included in the National Prevention Strategy to advance the Draft Strategic Directions?
- **Active Lifestyles:** Massage therapy has been shown to reduce factors that limit activity, such as pain, loss of mobility, impaired balance, limited self-awareness, low self-esteem, and depression. ¹⁻⁵¹

- Address Specific Populations' Needs to Eliminate Health Disparities: Massage therapy has been shown to positively impact low income, at-risk populations, and youth through community service efforts (www.massagetherapyfoundation.org/grants_community.html).
- **Counter Alcohol/Substance Misuse:** Massage therapy has been shown to affect the recovery efforts of those in drug and alcohol treatment. ^{60, 61, 62}
- **Healthy Eating:** Massage therapy, combined with exercise and dietary coaching, may influence healthy choices in obese adolescents, resulting in choosing water over sugary drinks, and fruits and vegetables over salty snacks. ^{70, 71}
- **Healthy Physical and Social Environment:** Massage therapy has been shown to reduce stress and increase productivity in caregivers, both in nurses' stations and with family members when a relative requires 24-hour care. 72, 73, 74
- **High Impact, Quality Clinical Preventive Services:** Massage therapy is a cost- effective, safe, and efficacious modality to treat pain, which in turn may reduce the complications of pain medications. ⁷⁵ Massage therapy has been shown to reduce hospital stays, and reduce agitation in dementia, and relieve anxiety associated with cancer treatment. ^{24, 25, 26, 52, 53, 54, 76} All of these may result in cost savings and improve quality of life.
- **Injury-Free Living:** Massage therapy may improve balance, reduce pain, and improve mobility. Massage can increase awareness around movement limitations and lead to less risky behaviors. ^{37, 38}
- **Mental and Emotional Wellbeing:** Massage therapy has been shown to reduce anxiety and depression and improve mood. ^{23, 24, 25, 26, 27}
- Strong Public Health Infrastructure: Emergency Response Massage International (ERMI) and Massage Emergency Response Team (MERT) have been used to deploy massage therapists who can provide on-site massage to workers responding to disasters—working long hours under difficult conditions—to provide relief and support. (www.ermassage.org, http://asoft617.accrisoft.com/freedomweb/index.php?src=gendocs&ref=massage-emergency-response-team&category=Main)
- **Tobacco-Free Living:** Massage therapy may improve self-awareness and self-esteem that may influence people to make healthier choices. ⁶²
 - 4. Do you have suggestions for how the National Prevention Council can work with state, local, and tribal governments, non-profits, or private partners to promote prevention and wellness?
- Fund research on massage therapy as an alternative to pain medications; as a strategy to combat falls in the elderly by improving balance and increasing mobility; as a tool to enhance compliance in making healthier choices and limit high-risk or violent behaviors; as a tool to educate children about safe touch, anatomy, and physical health; and to increase self-awareness when identifying physical maladies to encourage early detection and prevent complications of illness left untreated.
- **Provide massage therapy** to populations in need who may not otherwise have access. Populations who have benefited from community service projects providing massage therapy include, for example, the homeless, torture survivors, single parents with infants, elderly, people living with terminal illnesses, people in recovery from addictions, obese adolescents. Success stories with extreme risk populations may lead to the adoption of self-care modalities among the healthy, such as self-massage and massage among family members. Such healthy touch behaviors may strengthen family bonds and promote wellness.

- In media campaigns for healthier choices, **recommend massage** to people when they first **identify signs of stress**, such as tension headaches, back pain, teeth grinding or jaw pain, or changes in sleep patterns. If the symptoms are not alleviated by massage therapy, it may be necessary to see a doctor to rule out a more serious condition. Relieving symptoms of stress could reduce doctor visits and prevent the onset of more serious conditions, while encouraging early treatment.
- Promote alternatives to pain medication: **educate doctors to recommend massage therapy**. Research is showing that pain medications can have serious side effects and decreased effectiveness over time in alleviating pain, especially with long-term use. As a result, patients are often reluctant to use them. A compassionate and effective suggestion from a doctor may go a long way in strengthening the patient/practitioner relationship and provide relief that does more than mask the pain.

5. What prior federal prevention and health promotion efforts could serve as a model for the National Prevention Council?

- Previous ad campaigns have successfully promoted healthy choices and deterred at-risk behaviors, such as the anti-smoking, teen pregnancy, and safe-sex campaigns. Other successful campaigns encourage self-diagnosis alongside early detection through testing, as with the breast self-exam and regular mammogram campaign.
- New campaigns are just beginning to have an impact: Michelle Obama's childhood obesity campaign, encouraging gardens (while acting as a role model for home and community gardens at the White House), requiring nutritional content disclosure on fast food, and reaching out to grocery store companies to build stores near low income neighborhoods.
- Massage therapists always speak to the benefits of hydrating—drinking water—after a massage to aid in waste elimination, and educating patients that soda, coffee, and alcohol do not suffice. Much can be done to expand on this theory, that drinking water can improve health, especially when combined with a reduction of sugary drinks and caffeinated beverages.

6. Additional Comments or Suggestions:

In summary, we would like to emphasize the **benefits of massage therapy**:

- Massage therapy is safe. Dramatically lower malpractice insurance costs for massage therapists as compared to medical doctors, chiropractors, and several other categories of health care professionals reflect the relative safety of massage procedures. Manipulation of soft tissue simply does not entail risk levels associated with prescription of medication, surgery, or aggressive manipulation of body parts. There are comparatively few documented cases where someone has been harmed in a massage therapy session. Massage therapists are well aware of the potential discomfort caused by pressure and work closely with patients to monitor the cost/benefits of using pressure to treat pain. Massage therapists are trained to work cautiously around areas of potential impingement, sites of trauma, and to work within referring caregivers' guidelines. In juries still occur, particularly as a result of inadequate therapist-client communication, but injury frequency is modest.
- Massage therapy is cost effective. Reimbursement rates for massage therapy from managed care plans, workers' compensation and personal injury plans range from \$65 to \$125 per hour. This is less per hour than any other hands-on licensed practitioner. Thanks to the use of massage, cost savings have been documented by research and reported by hospitals in the areas of caring for pre-term babies and addressing chronic low-back pain. Cost-benefit analyses are being compiled for pre and post-operative massage, and massage for osteoarthritis. 78, 79
- **Massage therapy is efficacious**, both as a preventative measure—to maintain balance, mobility, fluid movement (blood, lymph), and provide tools for managing stress^{37, 38, 42, 43, 49, 50, 51, 56, 57, 58}—and as a treatment modality—to decrease pain, depression, anxiety, sleep disorders, constipation, and increase

function. 1-27, 34-51 Massage therapy is particularly helpful in alleviating many types of chronic pain—a challenge that has been identified as an increasingly dynamic element of rising health care costs.

• People enjoy receiving massage as therapy. Patients often report that they look forward to their massages, they can keep going through a tough week knowing there is a massage at the end to help them feel better, that massage during cancer treatments gives them the will and the strength to continue to fight, that being touched with healing, compassionate care makes them feel like a human being again. Hospitals are beginning to report on patient satisfaction as a result of inclusion of CAM therapists. NIH's survey speaks to consumer's preference of massage therapy over many other CAM modalities. 80,81

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- 71. WIN WIN Hands On, Elizabeth Ann Sommers, Pathways to Wellness, Boston, MA Massage Therapy Foundation Research Grant: \$20,000. 2008. The focus of this project is to determine the feasibility and benefits of incorporating massage into a community health program for adolescent girls ages 12 to 17 who are overweight and at risk for diabetes. The researchers hypothesize that offering regular massage can be an effective way to improve girls' well-being, self-worth, and body image, encourage healthier behaviors related to nutritional habits and common risk-taking behaviors, and thereby reduce the risk for diabetes. The researchers will recruit 30 to 35 adolescent girls who participate in a health and nutrition program called "Win Win" (Weight Initiative Now) at a major metropolitan health center offering integrative care. Each participant will

receive a minimum of six massage sessions over a period of three months, will be surveyed about their experience and will participate in focus groups to gather additional data to evaluate their experiences and the project. This program received a community service grant from the Massage Therapy Foundation in 2006.

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