UNCOVERING

the Hidden Risks

IN YOUR PRACTICE

Massage therapy is gaining popularity and credibility with the masses, bringing into sharp focus new safety concerns.

by Robin Weidner    photos by James Balodimas

In the first part of this two-part series you’ll learn how to identify the inherent risks in your practice and begin to look toward preventing them.

In the second part, you’ll learn more on how to combat these risks through proactive communication, ongoing learning and best practices.

*This article does not represent an all-inclusive list of risks, and shouldn’t replace an in-depth examination of these conditions and their treatment.
You might not think about risks on a daily basis, but it can creep into your practice in a variety of ways on any given day. Perhaps you work at a spa and your program director announces that the spa has set up a “cancer weekend,” and special spa packages will be offered to clients dealing with the disease. Should you voice a concern? Or maybe you’re on the phone with a prospective new client and there is something distinctly unprofessional about the way he is approaching you. What should you do? Perhaps you are a new massage therapist starting your first job at someone else’s practice. How can you know if the environment and equipment are safe?

And the list only gets more sobering. You do intake with a new client and find out that she is on Glucophage, a medication for diabetes. Should that influence your planned treatment? Or a client comes in for a Swedish massage and you find out that he has heart disease. What safety implications does that hold?

Regardless of what setting you work in, some clients will walk in the door thinking: “It’s just a massage.” What is the inherent misunderstanding that lies behind those words, and how does it make you responsible?

So why think about safety? From the perspective of a long-time massage consumer who is looking from the outside in, I had no idea that safety was an issue with massage therapy. I certainly didn’t understand that the condition of my health could have implications for the type of treatment that is most appropriate. I feel confident that I’m not alone.

What safety issues do you need to be concerned about as a massage therapist?

**Hidden Risk 1: More massage consumers than ever are unhealthy.**

As massage therapy has become more mainstream as a complementary and alternative medicine (CAM) therapy, it has become less relaxation-oriented and more problem-oriented. Even though massage therapists may envision working with healthy people doing relaxation massage, the reality is that they see clients who bring complaints, as well as other medical conditions that they don’t realize impact their treatment.

**An Inadequate Client History**

This becomes even more problematic in settings where patients are in and out quickly, and where an intake process is not well developed or simply doesn’t exist. Ruth Werner, author of *A Massage Therapist’s Guide to Pathology* and an instructor at the Myotherapy College of Utah, worries that “…a lot of massage therapists are unaware of the risks that they take by not getting a good client history, especially around the issues surrounding heart disease.”

Massage Therapist Rose Marie Soraich (above) always tells new clients upfront that she only provides therapeutic, nonsexual massage.
High Blood Pressure and Diabetes

This is especially important since an estimated 31 percent of all Americans older than 21 have high blood pressure. Many cases of high blood pressure are undetected, and even those who do know that they have it, don’t always manage it properly. High blood pressure is dangerous because it causes the heart to work harder. This strain puts pressure on veins and arteries, potentially causing them to lose their elasticity. That means they are more likely to build up plaque that leads to the formation of clots. In a worst-case scenario, the pressure put on a patient during a massage could potentially cause the plaque to erupt, releasing the clot into the bloodstream where it could travel to the heart or the brain.

Diabetes is another health condition that presents special concerns. For instance, diabetes can cause peripheral neuropathy—numbness in the extremities—a huge risk for a therapy like massage that depends on accurate client feedback.

Prescription Drug Use

In her experience teaching in massage clinics across the nation, Werner has found that many therapists are unaware of the implications that prescription drugs have on safe practice. "For the most part, massage therapists are severely undereducated on the interaction of bodywork and medication," Werner says. "And when it comes to medication, what you don’t see has a huge impact!"

"For instance," Werner continues, “if one of your clients is on a painkiller or an antiinflammatory when she comes to see you, then basically everything her tissues tell you is a lie.” Werner goes on to explain that drugs that mask pain are especially troublesome, because massage therapists rely on client feedback to determine pressure and tolerance for massage. Something as simple as a hot pad can become a risk to someone who doesn’t feel pain.

Keeping Your Clients Safe

Rose Marie Soraich, LMT, owner of Bodywork Massage Therapy and Stress Reduction Center in Wheaton, Illinois, protects herself with a rigorous intake process she’s developed throughout 18 years of practice. The first thing on her mind when new clients call is whether or not they are safe for her to take into her office. Soraich uses a double-intake process that starts with an initial phone screening coupled with an intake interview that happens at the beginning of the patient’s first visit.

Prevention Tip: Protect yourself with careful intake, continual research into the interaction between massage and medications, and practice conservative treatment.

A lot of massage therapists are unaware of the risks that they take by not getting a good client history, especially around the issues surrounding heart disease.

What does a UL listing mean?

You many see UL listed on your massage table. This stands for Underwriters Laboratories, Inc., which is an independent, nonprofit organization that tests products for public safety. If your massage table has a UL listing, it means it has been tested for fire and mechanical hazards and meets UL’s requirements for safety and is reasonably free from foreseeable hazards.
When in doubt, choose a modality that moves energy and work for small, cumulative improvement in function rather than big immediate changes.

Hidden Risk 2: Many will not know if the treatment they ask for is appropriate.

Whenever you see your personal physician, you most likely assume that your doctor knows more than you. Because of that, you have a sense of what kind of questions you should ask.

In massage therapy, this balance of power is more hidden. In fact, the average massage therapy client may not have any idea that risk is involved.

They also may not know that there is a difference between a massage therapist who works primarily with relaxation and one whose approach is more therapeutic. This means that a client who’s had a heart attack could misinterpret symptoms of recurrence (I must just be stressed), make a same-day appointment with a massage therapist who is trained for stress relief, and ask for a therapy that could harm him or her.

Learning to Say No Even If Your Clients Say Yes

How do you decide what modality is appropriate? One way to approximate risk, according to Werner, is to figure out if the work you are planning to do fits within your client’s activities of daily living.

For instance, if your client has had a previous heart attack and is a diabetic, but is currently training for a marathon, then your therapy most likely will not put any greater strain on his or her cardiovascular system than what he or she does every day. On the other hand, if someone pulls an oxygen tank into your office, you had better work with extreme caution.

According to Werner, practicing safely in these situations also hinges on understanding the difference between the two basic types of massage therapies—those that move fluids and those that move energy. Obviously the massage modalities that move fluids or exert significant pressure present more risks. When in doubt, choose a modality that moves energy and work for small, cumulative improvement in function, rather than big immediate changes.

Don’t Step Outside of Your Specialty

Although clients don’t know your limitations, you should.

Ask your clients if they took antiinflammatory drugs before their appointment. Such drugs mask pain, which is a problem since therapists rely on client feedback for pressure and tolerance.
<table>
<thead>
<tr>
<th>CONDITION</th>
<th>SYMPTOM</th>
<th>RISK</th>
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<tbody>
<tr>
<td>Melanoma</td>
<td>Unusual marks, etc., on skin</td>
<td>Moving cancer cells into lymph or bloodstream</td>
</tr>
<tr>
<td>Deep Vein Thrombosis (DVT)—blood clots in the legs</td>
<td>Legs that are asymmetrical in temperature (one warm, one cool)</td>
<td>Releasing the blood clot into the system where it moves into the lungs</td>
</tr>
<tr>
<td>Ringworm/Herpes (cold sores)</td>
<td>Itchy lesion, blisters on a red base</td>
<td>Highly contagious in the days right before a breakout</td>
</tr>
<tr>
<td>Cancer/Chemotherapy</td>
<td>Skin becomes thinner, more transparent</td>
<td>Could tear already stressed tissue</td>
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A good rule of thumb is to work on clients in a way that fits with their everyday activities.
And that makes you responsible. Attorney Richard Koefod of Plunkett & Cooney, PC, in Bloomfield Hills, Michigan, specializes in defending medical practitioners accused of general negligence and medical malpractice. In his opinion, one of the greatest risks massage therapists can take is to step outside of their specialty.

“You may feel good about helping people and truly believe that what you are doing is beneficial, but that does not mean that you can start willy-nilly branching over into traditional medicine,” Koefod says. “In other words, you cannot start taking the role of a chiropractor and begin manipulating the spine, or take the role of a DO (doctor of osteopathic medicine) by doing osteopathic manipulation. This could easily be construed as practicing medicine without a license.”

Prevention Tip: Work for incremental improvement, always err on the conservative side. Only provide the treatment that you’ve been trained and licensed to provide.

Hidden Risk 3: A few clients might be looking for “extras.”
In Rose Marie Soraich’s practice, she has had some unfortunate run-ins with clients who thought they were going to get more than just a massage. In fact, when she told one client that the massage was finished, he asked repeatedly, “What about the extras?” Shocked, she quickly affirmed that she only did non-sexual, therapeutic massage. Since then, she’s come to understand that some cultures attach no stigma to asking for “extras” in relaxation or therapeutic massages.

On another occasion, Soraich had a client who started making odd movements in the middle of the session. At first she thought he was just having trouble with the amount of pressure, but when he ignored her request for feedback, she realized that “he was having a close encounter with the table.” She quickly excused herself, saying that she was sick and that he could let himself out.

Something as simple as a heating pad can become a risk to someone who doesn’t feel pain. Likewise, an air purifier and properly laundered sheets can help prevent the spread of contagions.
Conversation that is Invasive

In retrospect, Soraich realized that both of these clients had given warning signs that something wasn’t quite right all along—they got more personal than the setting called for. She says a good way to gauge how clients should talk with you is to ask yourself, “Would they get this personal with another medical professional?”

But overall, she’s found that the best offense is a good defense. On the first inquiry from a new client, Soraich always asks the same question: “This is a therapeutic, nonsexual massage—is that what you are looking for?” As a reminder, she has a sign for her treatment room that she uses as needed. The sign says: “For those of you who like to chat…any inappropriate words, jokes or suggestions or coming in under the influence of alcohol or any other substance will immediately terminate your session and we will close our practice to you.”

Reference books that every therapist should own:


People are more unhealthy than ever, so taking a thorough client history should be a routine part of your client intake process.
Measures like these can not only help protect you from unwanted advances from clients, but also will make your intent clear if a client accuses you of sexual impropriety.

Mike Jones, an instructor at the Soma Institute in Chicago, is continually surprised by how many former students report that they have been victims of sexual misconduct by clients. In fact, in his own practice, he has a red phone that he keeps in his treatment room. If there is any suspicious behavior (or even if the client has a medical emergency) he can pick up the receiver and be connected with the front desk immediately.

Minimizing Risk
Soraich believes that using a little common sense can also help reduce risk. For instance, if she will be working on the groin of a male patient, she suggests upfront that he keep on his underwear. If she’ll be working extensively on the hip area of a patient, she does the work through the sheet. Lastly, she advises massage therapists to remember to never leave their purses or wallets in the same room where they are working on someone.

Prevention Tip: Listen and watch for inappropriate talk or behavior. When in doubt, terminate the session.

Hidden Risk 4: Sometimes risks can come from the most unlikely places.
As a massage therapist, the onus is on you to make sure that the environment you practice in and the equipment you use poses no risk to your clients. Koefod cautions that any practitioner who uses equipment or devices that could cause injury should exert extreme caution. In fact, it is up to practitioners to choose equipment (i.e., tables, heating pads, etc.) that they are absolutely sure will not hurt anyone. “You better not cheap it out,” Koefod says, “because if something happens, you’re going to have a lawsuit on your hands.”
**Burns and Bruises**

Koefod cautions practitioners to be especially cautious about products and/or equipment that generate heat. Through his litigation experience, he has learned that some people are very susceptible to burns, especially since equipment can malfunction. And if the client is on a medication that masks pain, she could be getting burned and not know it.

Jones routinely instructs his students to move cautiously with any heat source. His instruction is that hot packs are wrapped in a minimum of four layers of dry toweling or other qualified wrap and cold packs are wrapped in one layer of moist toweling. Jones also says that massage therapists should never leave the room when hydrotherapy is being applied, and that they should check in with clients frequently, as the situation can change rapidly. Likewise, practitioners who use hot rocks need to understand the risks involved, make sure they are properly trained and using reliable equipment, and move forward with extreme caution. On a similar note, Koefod notes that patients who are on blood thinners (one example is Coumadin®) are very susceptible to bruising. With that in mind, it would make sense to take a thorough history in regard to medications.

**Caution: Candles and Sheets**

Candles can present a risk of fires. A table, especially one that hasn’t been UL-listed (see sidebar, page 47) for safety, could collapse and cause injury. Sheets present the risk of infection, especially if practitioners take short cuts, like double-sheeting the table (putting layers of sheets that they remove one at a time). If practitioners who choose to wash their own sheets are careless, contagions could remain. People who come into your

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**UNDERSTANDING FLUID MOVEMENT**

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<tr>
<th>MODALITY</th>
<th>MOVEMENT OF FLUID</th>
<th>RESPONSE</th>
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<tbody>
<tr>
<td>Swedish and sports massage</td>
<td>Function is to move a lot of fluid through the body</td>
<td>Requires more adaptive response. Over-treatment could lead to bruising or tearing tissues, to even throwing a clot</td>
</tr>
<tr>
<td>Craniosacral*</td>
<td>Minimal to profound movement of fluid depending on technique</td>
<td>Not as much risk but could be contraindicated after a recent head trauma</td>
</tr>
<tr>
<td>Manual lymph drainage</td>
<td>Moderate movement of fluid</td>
<td>Not as much risk; not appropriate when infection is present</td>
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*Information on craniosacral therapy from Elaine Stocker, DN, Healing Hands, Chicago.
office with contagious conditions could leave you with a problem you didn’t count on, so managing this risk needs to be an ongoing day-to-day commitment.

Prevention Tip: Educate yourself on using candles safely, buy equipment that has been rated for safety, and screen patients carefully before using heat-related treatments.

Where to Go from Here
Although it can be sobering, and even a little scary, to look at the hidden risks in your practice, it can also be empowering. A healthy understanding of the risks of practicing massage therapy can help protect your clients, your practice and the reputation of your profession. That respect can move you to make continual learning an ongoing part of your practice. As Ruth Werner says: “The best way to arm ourselves against risk is to give ourselves good information.” And that’s good advice for anyone.

Knowing your limitations as a massage therapist is important. Stepping outside the area you are trained and licensed in is one of the greatest risks you can take, according to attorney Richard Koefod.

Statistics Every Massage Therapist Should Know

- 45 percent of American adults (91 million) take prescription medication on a regular basis (Source: PEW Internet & American Life Project)
- 32 percent (65 million) of the adult population in the United States have high blood pressure, but 30 percent of them don’t know it, according to the American Heart Association.
- Another 59 million adults (28 percent of the population) are estimated by the American Heart Association to have pre-hypertension (borderline blood pressure).
- According to the Centers for Disease Control & Prevention, 18.2 million people in the United States have diabetes (6.3 percent of the population). Nearly one-third are unaware that they have the disease.

Watch for Part 2, “Combating the Hidden Risks in Your Practice,” in the next issue of MTJ.

Robin Weidner is the owner of Robin Weidner Copywriting and Consulting and is based in DeKalb, Illinois. Her primary niche is writing marketing communications for health-oriented associations, including the American Massage Therapy Association and the National Council of the State Boards of Nursing. She can be reached at rwcopywriting@comcast.net.