MASSAGE TECHNIQUES FOR PEOPLE WITH DIABETES
Clinical Reasoning: Developing a Treatment Plan
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Stage 1: Intake and Assessment
• Monitor blood sugar, blood pressure, heart rate pre and post tx (note in chart)
  • patient can self-test glucose levels
  • self-test blood pressure and heart rate with wrist cuff
• Intake questions to include: pain, numbness/tingling; swelling, stiffness; sweating, disorientation, irritability; frequency of urination, thirst (note in chart)
• Check skin for cuts, bruises, lesions. Monitor healing over time. (note in chart)
• Assess ROM ankles, knees and hips; wrists, elbows and shoulders (measure quantity and quality, record in chart). Note balance by level of confidence.

Stage 2: Treatment Goals (measurable: 0-10; L, M, S; frequency/duration):
• Reduce pain, numbness, tingling
• Reduce swelling
• Increase joint mobility, ROM, balance, strength
• Improve function (self-report)
• Relaxation (heart rate, self-report)
• Normalized blood glucose and pressure (mechanical measurement tools)
Treatment Goals (less measurable):
• Improve immune function (monitor frequency of illnesses)
• Improve circulation (skin temperature)
• Reduce risk of complications such as heart disease, kidney failure, neurological disease, chronic ulcers
• Improved digestion (self-report)
• Maintain foot health

Stage 3: Massage techniques to accomplish treatment goals
• Reduce pain, numbness, tingling:
  • connective tissue massage, myofascial massage, trigger point therapy
• Reduce swelling, stimulate relaxation:
  • manual lymphatic drainage, cold therapy (no-ice, yes-Biofreeze)
• Increase joint mobility, ROM, balance:
  • compression/traction, bone/fascia unwinding

Stage 4: Self-Care
• Foot Health—Goals: prevent ulcers, improve mobility, increase circulation, improve balance, enhance nerve flow, increase function
  • monitor lesions
  • self-massage, foot roller (soft)
  • cold therapy (Biofreeze)
  • balance training (Thera-band pads)
• Improve monitoring: blood glucose, heart rate, blood pressure
• Support physician/chiropractor’s goals for prevention and management
Manual Lymphatic Drainage (MLD) for Diabetes

MLD is a technique that supports the body's own immune system and response.

- Lymphocyte secretion, white blood cells released from the blood stream, is encouraged through abdominal, thoracic and pedal pumping, with abdominal pumping yielding the largest load
- Lymph nodes are massaged to decrease any blockages or adhesions caused by excessive antigen removal, allowing new waste to be filtered
- Lymph vessels are stretched to increase the contractibility of the smooth muscles and increase lymph fluid flow
- Fluid flow is encouraged with strokes to increase the efficiency of waste elimination
- MLD is supported with rhythmic strokes that trigger a parasympathetic response, relaxing tight muscles
- Scar tissue impedes lymphatic flow and must be treated, or lymphatic flow must be encouraged to seek a new pathway unobstructed by scar tissue

MLD consists of basic Swedish massage strokes: circular friction, petrissage, compression/pumping, and effleurage. Combined in the correct sequence, in a relaxing rhythmic fashion, and coupled with fascial stretching and scar tissue release as necessary, these techniques become a powerful tool for reducing inflammation and improving immune response.

Keep in mind the following when applying Swedish strokes to enhance lymphatic flow:

- Most lymph lies just deep to the skin. MLD is in effect a skin massage.
- Pressure is light, rhythmic, and responds to the condition of the skin
- Treatment begins with abdominal pumping
- Hand placements begin proximal to the lymph nodes and move distally
- All fluid should be moved to the closest, most proximal lymph node, or to the closest watershed

Treatment Sequence:

- Abdominal pumping for 4 minutes
- Chest compressions with breath
- Axillary compressions/inguinal compressions
- Neck Sequence:
  - clavicle scoop
  - petrissage from clavicle to mastoid
  - drain cervical vertebrae
  - open waterwheel
  - drain mandible, cheeks, eyes
- Arm sequence/leg sequence:
  - drain pecs, detoids into axilla/lower abdomen into inguinals
  - drain upper arm, elbow, lower arm/upper leg, knee, lower leg
  - mobilize and drain hands/feet