CHAPTER 07

Knowledge Review

Q1: What is the difference between sports massage and remedial

massage?

A1:

Sports massage is the systematic manual manipulation of the soft-tissues, designed to produces specific responses in the athlete and improve their performance. Sports massage is used in training, preparation, recovery and injury management. Remedial massage is a closely related physical therapy method that incorporates a selection of well-documented manual techniques which have been developed to improve certain ailments or conditions, and in particular musculo-skeletal problems. The experienced sports therapist will be able to call upon a variety of sports and remedial massage techniques when working to improve function and performance, injuries, postural problems, restrictions and other conditions.

Q2: List 10 potential benefits of sports massage.

A2:

- 1. Stripping out tight muscles
- 2. Loosening restricted joints
- 3. Warming up and stimulating the body before a competition
- 4. Relaxing and decongesting the body after exertion
- 5. Improving recovery between training and competition
- 6. Restoring energy when fatigued
- 7. Treating strained muscles and sprained ligaments

- 8. Helping to keep a minor injury from becoming a more serious problem
- 9. Breaking up adhesions
- 10. Releasing tight connective tissues
- 11. Improving lymphatic circulation
- 12. Increasing blood circulations
- 13. Reducing swelling
- 14. Toning muscles
- 15. Muscle balancing
- 16. Treating postural deviations
- 17. Relieving pain
- 18. Deactivating trigger points
- 19. Treating orthopaedic and arthritic conditions
- 20. Enhancing body awareness
- 21. Reducing stress and anxiety
- 22. Providing psychological boost
- 23. Helping to keep the athlete in peak condition
- 24. Improving performance generally
- 25. Improving performance during competition
- 26. Injury prevention
- 27. General relaxation
- 28. Increasing well-being

Q3: Describe the main safety issues relating to the client, the therapist

and the environment in the practice of sports massage.

A3:

Safety issues to consider will include:

- 1. Preparation of all equipment and facilities beforehand.
- 2. Creation of the best possible environment for sports therapy, whether it is in the treatment room or at an event.
- 3. Performing consultation and assessment, and obtaining informed consent prior to the provision of any treatment.
- 4. Documenting all treatment methods and advice offered.
- 5. Ensuring all hygiene and health and safety issues are attended to.
- 6. Ensuring first-aid facilities are available.
- 7. Explaining the nature of treatment to the client.
- 8. Encouraging feedback from the client during the treatment.
- 9. Being aware of the possibility of contra-indications.
- 10. Being careful not to aggravate any presenting injuries or problems.
- 11. Maintaining clients dignity, and minimizing their embarrassment at all times.
- 12. Only treating minors with the parents or guardians approval and with a suitable chaperone present.
- 13. Selecting the most appropriate treatment techniques for the client and their condition.
- 14. Taking care to not overtreat.
- 15. Being aware of the possibility of contra-actions.
- 16. Offering any particular advice carefully and clearly.

Q4: What are the advantages and disadvantages of using: i] no lubricant; ii] massage oil; iii] massage lotion; iv] talcum powder A4:

i] No lubricant: advantages include more control, less slippage, cleaner [less greasiness and residue], less costly, and some clients may prefer it; disadvantages include the fact that it will not allow for classical effleurage or stroking techniques and there will be increased friction on the skin, also the client will not receive any of the potential benefits associated with particular lubricants.

ii] Massage oils: advantages include the fact that they allow for smooth gliding movements, they can help make the treatment more relaxing, they can help moisturize dry skin, essential oil blends offer their own benefits, and clients may also gain psychological benefits; disadvantages include the cost, the potential messiness, the storage issues, and the possibility of allergic reactions.

iii] Massage lotions: similar to massage oils, but advantages also include the fact that they are less greasy and more absorbent; disadvantages include their cost and the possibility of allergic reactions.

iv] Talcum powders: advantages include the fact that they can be useful where clients dislike the feel of oil or cream, where the client has very oily or hairy skin, if they perspire easily, and they can also be useful in pre-event situations; disadvantages include the cost, the possibility of nasal and respiratory irritation and skin sensitivities, and they can be quite dusty and messy.

Q5: Describe the following techniques: i] wringing ii] muscle rolling iii] hacking iv] longitudinal stroking v] connective tissue manipulation vi] traction vii] manual lymphatic drainage

A5:

i] Wringing is a kneading [petrissage] technique where the therapists hands alternately compress, lift and stretch the soft-tissues. Wringing increases the local blood flow, decongests, warms and relaxes the tissues and helps to separate tissue layers and adhesions.

ii] Muscle rolling involves lifting the superficial muscles with the hands and stroking through the tissues with either the tips of the thumbs [away] or fingers [towards]. Muscle rolling is usually classified as a petrissage technique causing increased circulation and localized stretching and relaxation of the tissues.

iii] Hacking is a percussion [tapotement] technique where the therapist alternately strikes the client with the ulnar border of their hands and fingers. The technique is normally performed quite rapidly, but not heavily, and the movement for the technique comes more from the wrist than from the elbow or shoulder, and the hands should be relaxed so as to spring back after striking the skin. The effect can be to stimulate and tonify the muscles, but when performed more slowly and lightly can be very relaxing.

iv] Longitudinal stroking stretches and decongests specific muscles along their length. It differs from effleurage in that the techniques are more specific and searching, and it also tends to be deeper. Deep stroking [muscle stripping] addresses particular muscle tensions and because it is applied directly into specific muscles it is useful diagnostically. It may be applied with

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pads or tips of fingers and thumbs, the ulnar border of the forearm, the olecranon process, the heel of hand or the knuckles, and the treated muscles are normally placed in a shortened position.

v] Connective tissue manipulation [CTM] is a technique designed to treat restrictions, adhesions and circulatory impairments affecting the skin, subcutaneous tissues, superficial fascia and deep fascia. No lubricant is used, and in effect, the skin moves with the therapist's hands, and the treated tissues are typically stretched to the point of being palpably taut, and held for a second or a few seconds, often until a sense of give or relaxation occurs. Variations include skin rolling and myofascial release.

vi] Traction is a technique that gently decompresses or separates structures that are normally very closely associated. Commonly used for the neck, back, hips, shoulders and lower limbs, manual traction must always be performed slowly and with great care. It is in itself an assessment technique [when traction brings on pain it may be seen as a positive sign that the stabilizing ligaments are affected, and when it relieves pain it can be a positive sign that compressive forces are involved in the cause of the problem. Sports therapists who perform manual traction must be careful to support the body well, and to not cause any unnecessary discomfort or aggravation of problems. Manual traction is usually eased into and held for a few seconds at a time.

vii] Manual lymphatic drainage [MLD] incorporates gentle techniques aimed at reducing oedema and improving fluid reabsorption into the general circulation.The main basic techniques include light effleurage, gentle intermittent pressure stroking, gentle muscle pumping and gentle joint mobilizations. For

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these massage techniques to greatly assist lymphatic circulation, the therapist must have knowledge of positions of major lymphatic channels and nodes. They must also be aware of all possible contra-indications. A classic MLD strategy is to begin by working to clear the proximal and any unaffected lymphatic regions, which could typically begin at the neck, contra-lateral limbs and torso. By clearing all proximal lymphatic channels [contra-lateral and ipsilateral] first, the fluid congesting the affected region[s] has somewhere to go when manually drained. In the case of sports injury, the drainage techniques will be applied to the most proximal regions, and gradually worked down towards the affected area. The therapist must take care to avoid aggravating the injury site in early the stages of healing. The systematic approach can be repeated several times during a treatment. Elevating the limbs during and between treatments can enhance the effects.

Q6: In what ways can sports or remedial massage treatments be made more individualized?

A6:

It is important to individualize sports massage treatments. Every client is different and the objectives vary each time, especially for different sports and whether there are injuries to contend with. A massage routine is really only a guide, or basic structure, upon which specific adaptations can be applied. The therapeutic objectives may include: helping to prevent and detect injuries; aiding the recovery from intensive training; improving the flexibility, mobility, tone and responsiveness of the body; helping to improve individual body awareness. Massage techniques should be refined and adjusted to suit the

presenting requirements and objectives. The therapist can adapt their approach by altering: the choice of technique; the depth of pressure; the degree of localized movement; the direction of stroke; the speed of stroke; the repetition of stroke; the positioning of the client; the duration of treatment.

Q7: Explain how pre-event massage differs from post-event massage. A7:

Pre-event massage can be a useful part of the athlete's preparation for competition. It normally takes place between 20 minutes and an hour before the event, and may last for between 5 and 15 minutes. It should form a part of the active warm-up. Benefits of pre-event massage include: enhancement of warm-up; increased circulation; warms muscles and joints; improves neuromuscular responsiveness; tones up muscles; provides psychological boost. Techniques of pre-event massage typically include: effleurage; petrissage; vibrations; shaking; tapotement; mobilizing; stretching.

A post-event massage session will ideally take place ½ an hour to 2 hours after athletic activity. It should not take the place of an active cool-down, merely enhance it. It is generally a relaxing treatment, somewhat deeper and more searching than pre-event, and therefore a useful hands-on diagnosis and identification for minor injuries, muscle spasm and pain. It should be performed with care so as not to aggravate any acute problems, and the depth of techniques can be progressively increased as the superficial muscle relax. The benefits of post-event massage include: enhancement of cooldown; helps the recovery from exertion; helps the athlete to return to pre-

exercising state; helps to remove the accumulation of metabolic waste products; helps to relax the athlete; helps to identify and treat minor injury problems; helps to reduce pain and delayed on-set muscle soreness; maintains and develops the working relationship of the therapist and athlete; provides psychological boost. Typical techniques used in post-event treatments include: effleurage; petrissage; longitudinal and transverse stroking; shaking; vibration; stretching. In the ideal situation all major muscles are attended to.

Q8: Why is after care important?

A8:

Once treatment has finished, it is important to offer after care because, as a professional, the therapist will want to inform the client of any particular issues that may relate to their overall response to the treatment, additionally there may be specific recommendations that are in the clients interests. The initial basic advice offered following a therapy session might be to drink some water, take further rest, eat light and avoid alcohol. If there are any particular objectives to work towards such as with the rehabilitation of an injury, then it is usual to make further recommendations [specific exercises; avoidance of certain activities; etc.]. Whatever is advised, the therapist should make sure it is the right advice, and explain everything clearly, and then clarify the client's understanding. After care recommendations may include: further treatment or referral; avoidance of all aggravating activities; support, taping or orthotics; self massage; cold or heat applications; specific mobility, flexibility, strength, endurance, stability and proprioceptive exercises; explaining the importance

of adequate warm-up, cool-down and appropriate intensity, duration and frequency of exercise; particular adaptations to training routines; possible adaptations to existing exercise equipment; purchase of new equipment; relaxation techniques; dietary adaptations.