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EXPLORATIVE STUDY

Thai traditional massage: Efficiency-assessment of three traditional massage methods on office workers: An explorative study



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Summary Thai Traditional Massage (TTM) is popular and widely spread in Thailand. This project is aimed at studying the physiological efficiency of three popular TTM methods based on acupuncture Meridian basal lines: the Sen Sib(SS) ten lines, Ratchsamnak (RS), Royal style; and Chaloeysak (CS), Folk style. Thirty healthy female administrative employees participated as patients. All were treated for 30 min with the 3 types of massage with a two-week interval between each treatment. Muscle strain was objectified by measuring strength and endurance with surface electromyography of muscle put under stress during office work: the M. Trapezius (static postural load) and the wrist muscles (M. flexors & extensors Carpi-Radialis) (dynamic contractions) as well as measuring the subjective Visual Analogue Scale (VAS) before and after the sessions. An ANOVA-statistical analysis showed that strength in shoulders was not significantly different, but some forearm fatigue was decreased significantly among the three massage techniques.

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Introduction

Humanity is currently confronted with a fast evolution in living conditions of which the psycho-somatic impact on citizens affect the equilibrium between load-related factors and the individual's adaptive capacity. Sustaining imbalances in the coping process may result in gradually increasing physical and psycho-mental strain, starting initially with discomfort and pain, but may evolve into a dysfunction or injury.

In order to relieve the strain symptoms, people develop an individual strategy which is influenced by the importance of the complaints: if obvious and serious, they consult their ad-hoc expert for a classic treatment (physician, psychologist, psychiatrist). In less obvious cases however, many prefer to contact acquaintances, friends, or drug-stores for several reasons (which may be financial, a lack of trust, and fear) and prefer alternative ways such as herbal medicine and/or ancient massage techniques. At present, the formal Thai Traditional Massage (TTM) has become very popular for residents of Thailand and for visitors (tourists and professional employees).

In Thai Traditional massage (TTM) it is believed that health and well-being relies on the balance of life energy throughout the body via invisible pathways. The core treatment is built on releasing stress affecting the energy flows by pressing and stimulating correct pressure points (blockages) situated along the theorised energy Meridian basal lines. These energy lines are inscribed graphically in marble tablets which were brought to and kept in the 'Wat Pho' temple in Bangkok during the reign of King Rama III (1824–1851, A.D.). In 2010, there were approximately 19,440 recognized therapists (male, female, some of whom were blind) but the information about a large amount of heritage-educated 'massagers' active in the informal sector is not available. Official Thai Traditional Massage (TTM) education is offered by many organizations such as schools, temples, universities, clinics, hospitals, and private enterprises. In 2014, 108 organizations were certified by the Ministry of Public Health to be the training center of professional therapists in Thailand. Conditions are 330 h training for an assistant massage therapist and 800 h for massage therapist.

Thai Traditional Massage (TTM) gained in importance during the last decades and has spread world-wide. In the USA, approximately 6% of the population in 2002 used complementary and alternative medicine to treat back pain and sixty percent perceived it as a "great deal" of benefit (Anup et al., 2010). The three TTM-methods are described by Tyroler (2013).

The Sen Sib method focuses the manual treatment on perceived blockages occurring along ten (10, 'Sib') basic life energy lines originating from the center point (underneath the abdominal surface (umbilicus), 2 fingers width deep). Each of the essential acupressure points on the assumed energy paths is stimulated for about 1–15 s, repeated three times. The total treatment time is about 15–30 min.

The Ratchsamnak method, or 'Royal style', concerns deep muscle massage exerting slow, increasing pressure with fingers, thumbs, stretched arms, and elbows on taut palpable nodules, 'trigger points', along the Meridian lines. The concentration is put onto the back, inner legs, outer

legs arms, shoulders, abdomen, and the frontal and occipital parts of the head, and includes stretching exercises of the upper limbs. The normal therapy-time depends on the specific symptoms and lasts about 30–60 min.

The Chaloeysak method: the 'folk style', includes a progressive series of movements to loosen and stretch muscles and joints, and includes deep muscle acupressure, stimulating the flow at more than 200 possible points along the main theorised energy lines with fingers, thumbs, palms, elbows, knees and feet. The treatment is robust and very thorough, enabling energetic and physical release at a very deep level. The therapist varies his/her posture frequently during treatment. Total massage time is about 30–60 min.

All methods claim to revitalize mind, body, and spirit – and are aimed to impart a definite visceral feeling of wellbeing. The physiological and therapeutic effects – questionable due to a lack of scientific evidence – are often classified as 'placebos' (Evans, 2006), especially when fighting 'pain' and 'discomfort-complaints', and therefore TTM is often considered as quackery and the practitioners as frauds.

In comparison to other Western methods, such as the somewhat comparable Swedish massage, TTM is a rather metaphysical treatment concentrating on invisible energy channels throughout the body, whereas the Swedish method starts from Western concepts of anatomy and physiology, also involving pressing and kneading but with additional effleurage, friction and tapping.

In studying the effects of these traditional massage techniques, researchers concentrated their focus on the methods used in sports medicine: blood composition and flow, œdema, connective tissue, muscle, and the nervous system. However when evaluating, the ancient massage art the need for a scientific basis became obvious (Goats, 1994). Tasaki et al. (1967) studied the influence of massage on the skin and the intramuscular circulatory changes in using lumbar massage; Mori et al. (2004) found a significant difference between massage and rest in localized muscle fatigue and VAS with effects on skin temperature increase and improved blood flow in local regions. Donoyama et al. (2008) studied the physical and psychological effects of the Japanese 'Anma' massage in healthy female volunteers in their fifth decade who had problems of chronic muscle stiffness in the neck and shoulders. Two interventions of 40-min Anma therapy followed by a 40-min recovery lead to significantly reduced scores for VAS, lower anxiety and an increase of immunoglobulin (S-IgA) in mucous secretion. Moraska et al. (2008) reviewed the literature on physiological adjustments to stress. Despite some positive effects on diastolic blood pressure, on urinary cortisol and catecholamines, the research data were insufficient to make formal conclusions regarding efficiency.

Additionally, Kenny and Marc (2011) made a randomized review of massage efficiency including modalities such as acupressure, lymphatic drainage, myofascial release, reflexology, Swedish massage, sports massage and trigger point therapies. Their key findings showed positive indications as to efficiency in managing sub-acute/chronic low back pain, delayed onset muscle soreness (DOMS), anxiety, nausea, stress, and relaxation and support for the

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