



# From the Practice Editor's Perspective ...

Welcome to the Practice Section of the *International Journal of Therapeutic Massage and Bodywork*. Having served on the committee that developed this journal, I am delighted to see the first issue in electronic print. We have a new vehicle to share our knowledge and experience that is available to everyone without any fees involved—let's use it! The science and practice of massage therapy are evolving; we need to continue this trend to best serve our increasingly informed consumers. In this editorial, I address the content areas that are appropriate to the Practice section, the people who potentially make and are affected by scientific contributions, and how the knowledge and experience of massage therapists lead to evidence that informs how we care for clients.

## CONTENT AREAS FOR THE PRACTICE SECTION

When discussing categories of anticipated content for the Practice section, the main question to ask is what are the important elements of massage therapy practice?

I'll begin this conversation by suggesting that once initial education is complete, these elements include personal and practice characteristics, clients, education, relationships with others and marketing efforts.

- **Personal characteristics:** A look at the existing literature shows that massage therapists are typically female (80%–85%), white (95%) and middle-aged (mean of 41)<sup>(1–3)</sup>. In what ways (if any) do differences in the sex, race, and age of massage therapists affect massage therapy practice? Are there other characteristics of massage therapists that may have consequences for the interpersonal relationships between massage therapists, their clients, and other health care providers, and for therapeutic outcomes?
- **Practice characteristics:** Massage therapists use various forms of assessment (postural, range of motion, palpation), techniques, and client education<sup>(3,4)</sup>. Are there innovative methods of assessment, assessment documentation, and follow-up evaluation that need to be shared? How do massage therapists decide which techniques to use on a given patient, and how is progress evaluated? What are the resources and self-care information typically shared with clients, how often are they shared, and how compliant are clients with such recommendations? In addition, massage therapists practice in a variety of settings—from

their own homes to hospitals. What, if any, is the influence of practice setting on interpersonal relationships, client characteristics, and therapeutic intentions and outcomes?

- **Massage therapy clients:** The typical massage therapy client is a female baby boomer hoping to improve her health<sup>(3)</sup>. What efforts do we make to be client centered or to reach out to special populations? What is the process that leads certain massage therapists to specialize with particular groups (for example, pregnant women, children, athletes), and what are the advantages of such an approach?
- **Education:** I did not want to omit education from the list of important components, and so I have listed it here. However, it is so important that it represents its own section in this journal!
- **Collaborative relationships with other health care providers and professionals:** Massage therapists work with a variety of other health care providers (and other professionals) in an assortment of settings. What are the experiences of medical doctors, chiropractors, spa professionals, nurses, athletic trainers, and other therapists (for example, physical, occupational, and speech therapists; psychologists) while working with massage therapists? I invite these and other types of professionals to systematically comment on their relationships with massage therapists.
- **Marketing:** What innovative strategies are massage therapists using to attract and maintain clients? What are the marketing plans, efforts and evaluations useful to help manage a successful practice?

By now I am sure you understand why I have chosen to become a scientist: I have lots of questions! I look forward to reading thoughtful, organized and informative answers from you—which segues into the next section.

## CONNECTING CLINICAL EXPERIENCE AND RESEARCH EVIDENCE

I was a massage therapist before I aspired to become a scientist, although I often used the principles of science in my practice. A client with a specific set of characteristics would present to me, I would perform an assessment, I would choose and implement an intervention, and I would evaluate the results. As I

gained knowledge through experience, I tweaked the details of the process and continued the cycle. The more research courses I took, the more sophisticated the process became. I was very eager to help my clients, and in turn, I learned a lot from them.

At some level, we are all potential contributors to the evidence supporting massage therapy. A new form of research that has emerged over the past few years is translational research. It is sometimes nicknamed “bench-to-bedside research,” referring to a process wherein practitioners apply research findings to clinical practice. For example, the National Center for Complementary and Alternative Medicine has funded research to investigate the effects of massage therapy on healthy people and whether these effects change depending on the number and frequency of massage sessions<sup>(5)</sup>. Findings from a study such as this one could provide massage therapists with additional knowledge and confidence regarding massage treatment plans. The goal is not only to determine *if* massage therapy works for a certain population, but to propose the mechanisms of *how* it may work.

Massage therapists contribute to science when they participate in the flip side of translational research: “bedside to bench.” Our knowledge and experience can lead scientists to ask research questions that are relevant to us as practitioners. For example, massage therapists need to use their voice to communicate to scientists the massage treatments that seem to work best for certain conditions and clients. Case reports provide an excellent opportunity for this professional dialogue. I encourage all of you to become research-literate. Even if you never write a case report or participate in a research study, you need the skills to be able to interpret research findings (bench-to-bedside) and participate in generating massage therapy research agendas (bedside-

to-bench). Maintaining continuous lines of communication between massage therapists and scientists will help us attain a mutual goal: improvement in the health of our clients. Contributing to and reading this journal will help facilitate those partnerships.

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## COMPETING INTERESTS

The author declares that there are no competing interests.

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