

Massage Therapy as a Supportive Care Intervention for Children With Cancer

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Purpose/Objectives: To review relevant literature about massage therapy to assess the feasibility of integrating the body-based complementary and alternative medicine (CAM) practice as a supportive care intervention for children with cancer.

Data Sources: PubMed®, online references, published government reports, and the bibliographies of retrieved articles, reviews, and books on massage and massage and cancer. More than 70 citations were reviewed.

Data Synthesis: Massage therapy may help mitigate pain, anxiety, depression, constipation, and high blood pressure and may be beneficial during periods of profound immune suppression. Massage techniques light to medium in pressure are appropriate in the pediatric oncology setting.

Conclusions: Massage is an applicable, noninvasive, therapeutic modality that can be integrated safely as an adjunct intervention for managing side effects and psychological conditions associated with anticancer treatment in children. Massage may support immune function during periods of immunosuppression.

Implications for Nursing: Pediatric oncology nurses are vital in helping patients safely integrate CAM into conventional treatment. Pediatric oncology nurses can help maximize patient outcomes by assessing, advocating, and coordinating massage therapy services as a supportive care intervention.

Massage therapy is among the most prevalent complementary and alternative medicine (CAM) practices used by the American public to promote health, prevent disease, and manage acute and chronic conditions. An ancient healing art characterized as a systematic manipulation of the soft tissues of the body, massage therapy consists of hands-on stroking, kneading, friction, and percussive or vibratory movements (Arkko, Pakarinen, & Kari-Koskinen, 1983; Ernst, 2003). Generally employed for pain reduction, massage therapy has been used with the intention to alleviate stress and muscle cramping, induce relaxation, improve circulation and lymph flow, promote muscle tone, increase range of motion, and encourage recovery from injuries and medical procedures. Preliminary research further suggests that massage therapy may be a beneficial body-based modality for a variety of immunologic illnesses, such as asthma and HIV (Hall, 2001).

Although recent reports in the United States have acknowledged the widespread use of massage therapy among adults and children with cancer as a noninvasive, therapeutic intervention, minimal investigation of massage by the healthcare

Key Points . . .

- ▶ Children with cancer require high-quality psychosocial care and symptom management.
- ▶ Children with cancer frequently use complementary and alternative medicine to manage side effects of cancer treatment.
- ▶ Research demonstrates the potential applications of massage therapy for children with cancer.
- ▶ Pediatric oncology nurses are vital in facilitating the safe integration of massage therapy for children undergoing treatment for cancer.

community has been conducted to determine risks, benefits, and feasibility of incorporating the practice among cancer populations. In a survey of 85 physicians at a municipal hospital, 18% reported that they had inadequate information about massage therapy, 32% wanted massage therapy to be provided at the hospital as an intervention for their patients, and 32% reported having recommended massage therapy to patients (Boutin, Buchwald, Robinson, & Collier, 2000). Despite the growing popularity of the practice, massage therapy rarely is incorporated into patient care plans for children with cancer. Although research investigating the efficacy of massage has been conducted, only preliminary studies have been initiated in children with cancer.

Because children diagnosed with cancer must cope with a variety of stressors and symptoms related to illness and treatment (Docherty, 2003), healthcare professionals are increasingly recognizing the need for safe, effective, noninvasive supportive care interventions to improve the overall quality of life of patients. Stress, anxiety, and depression

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