



## 75a Intro to Special Populations and Psychiatric Disorders



# 78a Intro to Special Populations and Psychiatric Disorders

## Class Outline

5 minutes

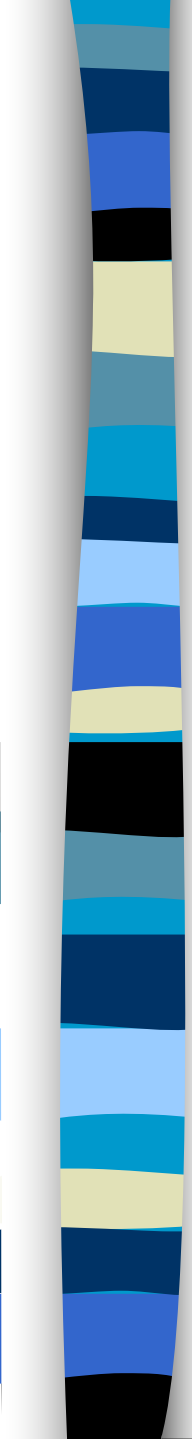
Attendance, Breath of Arrival, and Reminders

55 minutes

Lecture:

60 minutes

Total



# 75a Intro to Special Populations and Psychiatric Disorders

## Class Reminders

### **Quizzes:**

- 78a Kinesiology Quiz (erectors, lats, quadratus lumborum, multifidi, rotatores) – 50 questions in 40 minutes

### **Spot Checks:**

- 75b Orthopedic Massage: Spot Check – Piriformis and Sacroiliac
- 78b Orthopedic Massage: Spot Check – Low Back Pain

### **Assignments:**

- 85a Orthopedic Massage: Outside Massages (2 due at the start of class)

### **Preparation for upcoming classes:**

- 75b Orthopedic Spot Check
  - Bring A-97 for grading
- 76a Orthopedic Massage: Introduction – Low Back Pain
  - Packet j: 65-68
- 76b Orthopedic Massage: Technique Demo and Practice – Low Back Pain
  - Packet j: 69-76
- 77a Myofascial and Fascia Techniques (Part I)
  - Class Handouts
- 77b Orthopedic Massage: Technique Review and Practice – Low Back Pain
  - Packet j: 69-76 and 77-78



# Classroom Rules

**Punctuality** - everybody's time is precious

- Be ready to learn at the start of class; we'll have you out of here on time
- Tardiness: arriving late, returning late after breaks, leaving during class, leaving early

**The following are not allowed:**

- Bare feet
- Side talking
- Lying down
- Inappropriate clothing
- Food or drink except water
- Phones that are visible in the classroom, bathrooms, or internship

*You will receive one verbal warning, then you'll have to leave the room.*



## 75a Special Populations: Introduction

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## Special Populations Classes:

- 14a Special Populations: HIV and AIDS
- 75a Special Populations: Introduction
- 75a Special Populations: Psychiatric Disorders
- 95a Special Populations: Seniors
- 96a Special Populations: Hospice and End of Life
- 97a Special Populations: Cancer



## More info:

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# Introduction

- Therapists will encounter unique individuals with special needs and challenges.





# Introduction

- Massage is safe during all stages of life if tailored to the client's health and particular situation and circumstance.



# Introduction

- Modifications usually involve reduced pressure over an area, positioning the client for comfort, or limiting the sessions to 20 to 30 minutes.



# Introduction

- As with all clients, approach those with special needs with attitudes of loving kindness, reverence, and acceptance.

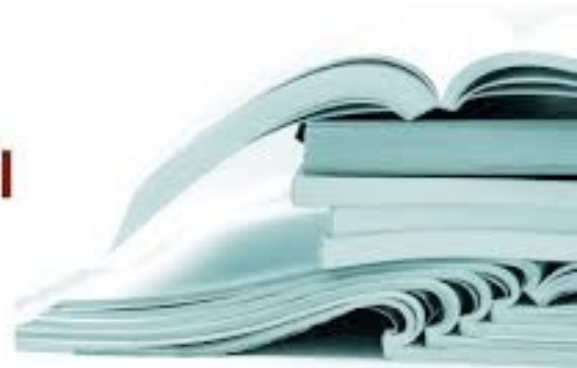


- Fear may arise as you contemplate working with these clients, but knowledge combined with loving kindness, reverence, creativity and acceptance will overcome fear.

# General Suggestions

- Spend time in advance preparing for the session – review textbooks and websites.

**Study  
Material**



# General Suggestions

- The client is your best source of information. Each client will teach you if you remain open-minded, patient, tolerant and flexible.



# General Suggestions

- Keep facilities as barrier free as possible, removing clutter such as throw rugs and wires.



# General Suggestions

- Have tissues and drinking water handy.



## Other Strategies

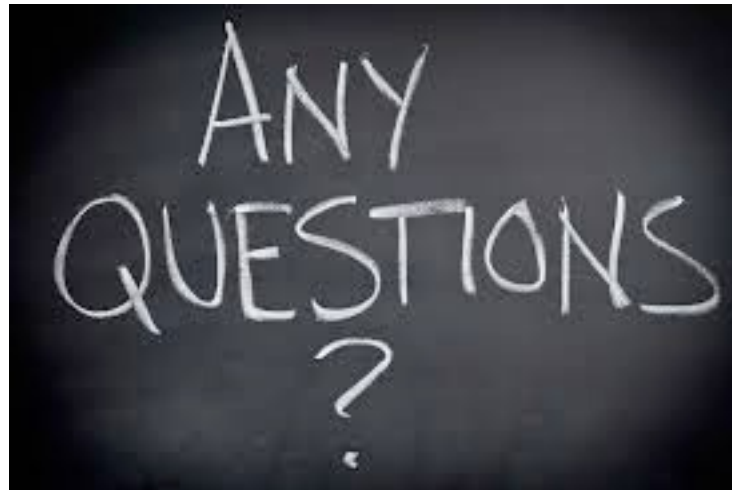
- Sit near the client at eye level.
- Sit in a well-lighted place but avoid sitting with your back to the light source.
- Speak naturally, not more slowly or loudly, and enunciate clearly.
- Use the client's name.





## Other Strategies

- Be sure the client understands, and allow time for questions.
- Rephrase anything the client does not understand, rather than repeating the same words.



## Other Strategies

- Inquire about accommodations that can be made.
- Explain clearly which parts of the client's body will be massaged.
- Be alert for signs of issues not disclosed on the health form, or changes in the client's health status.





# Infants

- Infant massage is done by the parents and care-givers, under instruction from the therapist.
- Infant massage may foster bonding, relieve discomfort from teething, congestion, gas or colic, and promote deeper and longer sleep.



# Infants

- Depending on the age and developmental stage of the baby, positioning may be lying beside, holding, placing between your knees or draping across your lap.
- If bottle-fed, the baby should not be massaged for at least 30 minutes – breast milk is predigested so this delay is not necessary in that case.



# Infants

- Most commonly used strokes are touch-holds, thumb-over-thumb gliding, thumb spreading and full-hand gliding.
- Rather than applying strokes as a routine, use them to enjoy time with the baby, modifying or creating according to its response and tolerance.



# Infants

- Other suggestions:

- Keep the baby warm.
- Use natural or low lighting.
- Sounds such as soft background music, the parents' voice singing, talking or humming, can promote the relaxation response.







# Children and Adolescents

- Defined as young people between 3 and 18 years of age.
- Because these clients may have smaller stature and shorter attention span than adults, session times may be shortened to 30-45 minutes.
- The extra time may be used to establish a rapport.



# Children and Adolescents



- Those under the age of 18 (in Texas the significant age is 17) must have a parent or legal guardian consent to the therapy on their behalf.
- Be sure that the parent or legal guardian is present during the treatment planning and discussion of policies and procedures.
- Parent or legal guardian must sign documents requiring a legal signature (such as intake or consent forms).

# Children and Adolescents

- During intake, be sure the child understands all the procedures and willingly gives consent.





## Children and Adolescents

- Reflexes may be overly sensitive in adolescent boys, sometimes causing erections.
- Keep the top drape bunched in the groin area, and use a blanket over the top drape.
- If an erection occurs, ask a few questions about a mundane topic, such as school – this often reduces the “tent effect”.

# Persons with Mobility Impairments

- Is a decreased capacity to move or use one or more of the extremities, or a lack of strength needed to walk, grasp objects, or lift objects.
- Individuals affected by mobility impairment or who have disabilities may use wheelchairs, canes, crutches, walkers, or motor scooters to aid mobility.





## Persons with Mobility Impairments

- Common causes of mobility impairment include congenital disorders (spina bifida, muscular dystrophy), diseases (arthritis, chronic obstructive pulmonary disease), inactivity, obesity, injuries (spinal cord injury, stroke), and advancing age.
- According to the CDC (2016), 39.6 million people aged 18 and older have limitations that prevent them from being fully functional physically (16.3%).
- Additionally, the US Census Bureau (2014) found that mobility is the most common disability among older Americans.

# Persons with Mobility Impairments

- In the interview, ask the client to describe the impairment and degree of limitation (including indirect limitations and medications with side-effects).
- Check for compensatory patterns resulting from the impairment, that may point to areas of muscle tension.



# Persons with Mobility Impairments

- You can massage the person in a wheelchair if necessary.







# Persons with Mobility Impairments

## Other suggestions:

- Realize a wheelchair is part of the body space of the client, and avoid leaning on it or pushing it without permission.
- Use lighter pressure than normal, particularly in areas of paresthesia.
- Limit all stretching and joint mobilizations, particularly on the spinal column and hips.
- Carefully inspect the skin for ulcers, which are local contraindications.
- Check in with the client about temperature, making fine adjustments as needed.



# Seniors

## More info during 95a Special Pops: Seniors

### Aging and the Musculoskeletal System

- Loss of bone density can begin between 30 and 40 years of age.
- With each successive decade, bones become less dense and more porous and fragile.
- Adults lost 3-6% bone mass each decade after 60 years old.
- Additionally, the intervertebral disks dehydrate and narrow.



# Seniors

## Aging and the Nervous System

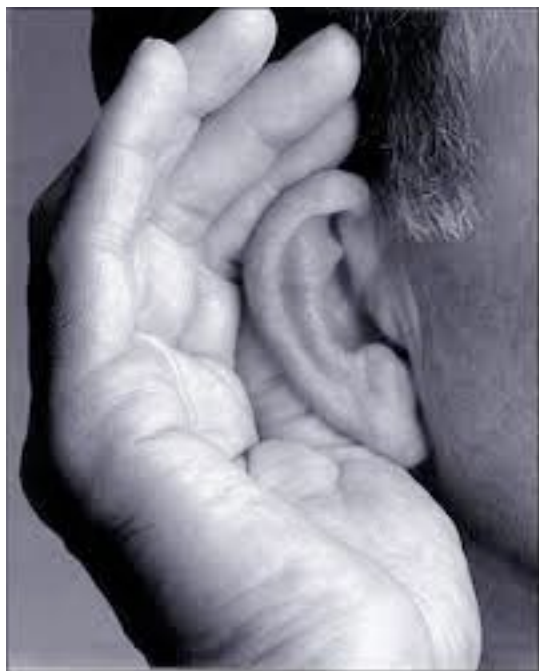
- Nerve Cells in the central and peripheral nervous system begin to degenerate, and cerebral blood flow decreases.
- Neural changes in the areas of the brain responsible for balance and coordination coupled with reduced nerve cell conduction rate can result in decreased reflexes, slowed response times, and unsteady gait.
- Nerve cell degeneration contributes to diseases such as Alzheimer disease and Parkinson disease, which are more common in aging populations.



# Seniors

## Aging and the Cardiovascular System

- The heart may enlarge, which reduces cardiac output and increases the risk of congestive heart failure.
- The endothelium, or internal lining, of blood vessels loses elasticity and is less responsive to postural changes.
- This along with the changes in cardiac output, increases the likelihood of varicosities in the lower extremities and orthostatic hypotension in general.





# Persons with Speech and Hearing Impairments

- Speech and hearing impairments often coexist.
- When communicating, consider note writing or typing on a computer with Ariel or Comic Sans font and the zoom feature set to 200%.

# Persons with Speech and Hearing Impairments

- If the client is wearing a hearing aid during the massage, avoid moving your hands close to the ears.
- If the client has removed a hearing aid, be sure you have their attention before communicating with them.



# Persons with Speech and Hearing Impairments

- Be expressive, and enunciate clearly, without exaggerating lip movement, which makes it more difficult for them to lip-read.
- If the client has a sign language interpreter, speak directly to the client.







# Persons with Visual Impairments

- Visual impairments can range from partially sighted to total blindness.
- Keep facility barrier-free, and use bright ambient lighting.
- Use of contrasting colors to differentiate table from floor is useful.





## Persons with Visual Impairments

- Describe things in a normal tone of voice, using direct, precise language (clock-face, left, right, etc.) rather than imprecise terms (over here, etc.).
- When transferring the client from one area to another, offer to guide them, announcing any changes of direction in advance.
- Tactually familiarize the client with the massage environment.
- When handing the client something, touch it to their hand.
- Announce when you are entering and leaving, and turn the lights back up after the massage.

# Persons with Visual Impairments

- For printed materials, use large, easily-readable fonts.



# Persons with Visual Impairments

- If the client has a support person or animal, acknowledge that, but direct all conversation to the client.
- Do not touch the support animal.
- Provide a comfortable place for the assistant or animal during the massage.





## 75a Psychiatric Disorders

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# Addiction

## Three Levels of Addiction

- Use
- Abuse
- Dependency

## Etiology

- Dependency can be psychological or physiological



# Addiction

## Dependency

- Can produce changes in neurotransmitters, sedative effect on CNS
- It takes more and more of the substance to get the effect
- Stopping will create daunting physical and psychological challenges





# Addiction

## Risk factors

- Genetic predisposition
- Mental health challenges
- Age
- Medical reasons
- Environmental factors:
  - Peer pressure
  - History of abuse
  - Environmental prevalence



# Addiction

## Complications

- Exacerbated mental health challenges
- Impaired judgment
- Compromised body systems: gastrointestinal, cardiovascular, nervous, immune



# Addiction

## Treatment

- Recognize problem
- Abstinence
- Detoxification
- Rehabilitation Treatments/Centers
- Prevent relapses



# Addiction

## Massage

- Adjust treatment plans if they are experiencing physiological dis-ease as a result of the addiction
- Can help reduce withdrawal symptoms, speed detox, reduce need for drugs (it's a healthy high!)
- Do not work with person under the influence



# Anxiety Disorders

## Introduction

- A pervasive feeling of fear arising from complex factors
- May arise from PTSD, neurological divergence, previous injuries, unknown origins
- Related to depression, trauma, and possible genetic components

## How to recognize anxiety disorders

- Sympathetic reactions
- Frightening feelings
- Racing thoughts



# Anxiety Disorders

## Types

- General anxiety disorder
- Panic disorder
- PTSD
- OCD
- Phobias – social and specific



# Anxiety Disorders

## Massage

- Person may be hypersensitive to touch and boundaries – esp. if client is a physical abuse survivor or sexual abuse survivor
- Positive effects – feeling calmer, more able to cope with everyday stresses (through positive touch impact on limbic and autonomic nervous system.)



# Anxiety Disorders

## Limbic system and Autonomic Nervous system

### ■ Amygdala:

- Central role in fear, anxiety, aggression
- Interconnected with hippocampus
- One synapse away from hypothalamus
- Gets bigger in people with PTSD – more metabolically reactive





# Anxiety Disorders

## Limbic system and Autonomic Nervous system

### ■ Hippocampus

- “Sea horse - jelly roll”
- Memory & learning
- In people with long-term major depression, the hippocampus gets smaller
- Pivotal role in turning off the ANS stress response



# Anxiety Disorders

Ultimately we're looking to enhance and sustain healthier autonomic function

NOTE: Attend carefully to factors such as clothing, draping, working with open door, be understanding and patient – while honoring your own boundaries



# Attention Deficit Hyperactivity Disorder

## Introduction

- Not really deficit – person pays attention to too many things
- Neurochemical disorder, which can have genetic as well as familial or environmental causes

## Symptoms

- Inattentiveness
- Hyperactivity
- Impulsivity



# Attention Deficit Hyperactivity Disorder

## Treatments

- Medications
- Psychotherapy



# Attention Deficit Hyperactivity Disorder

## Massage

- Indicated unless person has inability to tolerate stillness
- Can improve
  - Anger control
  - Sleep quality
  - School behavior
  - Mood
  - Interpersonal relationships
- Identify their preferences – vigorous or more stillness



# Depression

## Origins

- Genetic, familial, and physical illness

## Range

- Chronically low or “negative” energy accompanied by persistent feelings of sadness, guilt and / or hopelessness
- Bi-polar disorder
- Suicidal inclinations



# Depression

## Treatments

- Medications and psychotherapy

## Massage

- Can be very helpful or have little effectiveness
- Can release physical and psychological tensions that may sustain the depression
- Can stimulate endorphins which amplify pleasure (do not allow this to effect their use of appropriately prescribed medication)
- May be safer / more effective for client's with suicidal thoughts if the client's psychiatrist is able to give their advice concerning massage
- Make sure you assure yourself that they are seeing a psychiatrist



# Eating Disorders

## Introduction

- Compulsions about food and weight
- Can lead to nutritional deficiency

## Types

- Anorexia
- Bulimia
- Binge eating





# Eating Disorders

## Treatment

- Education if useful and counseling program

## Massage

- Anorexia/bulimia can result in various psychological, anatomic and physiological frailties – be careful in your treatment design
- Can help people experience their bodies as safe, strong, and healthy – improving their kindness towards their own sense of their body
- Can also lower anxiety levels



# Autism Spectrum Disorder

## Autism Spectrum Disorder

### ■ Characteristics

- Appears to be genetic (usually diagnosed by age 3)
- Differences in verbal & nonverbal communication
- Neurodivergence with social interactions, repetitive behaviors/memory
- May exhibit “masking” (especially in females so may be harder to diagnose)
- May be unable to engage in various communication styles
- Need for routine and order, follows rules to a T
- Deeply focused on special interests
- Echolalia (repetition of sounds and words)
- Sensory sensitivity



# Autism Spectrum Disorder

## ■ Statistics

- 1 in 100 Children
- Males are 4 times more likely to be diagnosed (due to research being mostly on little boys, but also masking)
- 75% of Adults with Autism are either unemployed or underemployed
- Most have CPTSD

## ■ Treatment

- Behavioral treatment is the most common



# Autism Spectrum Disorder

## Massage

- Be trauma informed
- Often will be hypersensitive to touch
  - May prefer lighter or could need deep pressure
- Get to know the individual – if they like touch, it may be very helpful in helping them connect to world in positive way
- May need communication styles altered
  - Try hand signals and agree upon them before the massage begins



## 78a Intro to Special Populations and Psychiatric Disorders