



Basic Clinical Massage Therapy:

INTEGRATING ANATOMY AND TREATMENT

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*For
Jacque and Tim Pennell
and
Anne and Dick Clay
—James Clay*

*To my wife Kathleen for her support and patience,
and to my parents Arthur M. and Jean T. Pounds
—David Pounds*

Preface

Basic Clinical Massage Therapy: Integrating Anatomy and Treatment is primarily a textbook for advanced massage therapy students who have already acquired the basic skills of Swedish massage and are now pursuing additional training in clinical massage therapy. In this book, I define “clinical massage therapy” as the use of manual manipulation of the soft tissues to relieve specific complaints of pain and dysfunction. As its title implies, our book integrates detailed anatomical information with basic clinical massage therapy techniques. By embedding illustrations of internal structures into photographs of live models, we are able to show exactly what muscle is being worked on, where it is, where it attached, how it can be accessed manually, what kind of problems it can cause, and one or more basic techniques for effectively treating it. The student can clearly see the involved structures in relation to surrounding structures, surface landmarks, and the therapist’s hands. This book, therefore, offers a truly innovative visual and tactile understanding of anatomical spatial relationships integrated with the learning of treatment technique, which has not been possible with traditional approaches.

Our approach is possible only through teamwork. Although I have had chief responsibility for the text and Dave Pounds for the illustrations, we are truly co-authors, in that this project has been planned and executed by both of us working closely together from its very inception. Vicki Overman, an outstanding photographer, has also worked with us and shared our enthusiasm from the beginning.

In addition to its use as a textbook, *Basic Clinical Massage Therapy: Integrating Anatomy and Treatment* can also serve in the following roles:

- A palpatory and muscle anatomy reference for practitioners. The anatomy of muscles and bones

is complex, and an accurate knowledge of it is essential to effective treatment. The practitioner must have reliable reference sources to consult.

In the past, practitioners have used atlases of anatomy designed chiefly for surgeons. This book is tailored specifically to the needs of the clinical massage therapist. By presenting the anatomy of muscles and bones in the context of the living human body, it bridges the gap between internal muscular and external surface anatomy and allows students and practitioners to see through the surface to the internal structures.

■ A client education tool. One of the biggest difficulties facing a therapist in dealing with clients is explaining where a problem may lie, what structures may be involved, and what type of work is proposed. Currently, practitioners must turn to traditional anatomy references, or to whole or partial skeletons or other educational aids to make such explanations. The therapist can use this book to present necessary information to clients in a way that is easily comprehensible.

ORGANIZATION AND STRUCTURE

This book is divided into two parts. Part I, Foundations of Clinical Massage Therapy, presents essential information about the basic principles on which clinical massage therapy is based. The first chapter explains the place of clinical massage therapy in the health field and reviews the essentials about muscle structure and function, body mechanics, basic techniques, and draping.

The second chapter is a guide to examination: interviewing, observation, photography, and palpation. It also presents examples of forms to use and covers communication with physicians and other health professionals.

Part II, Approaching Treatment, constitutes the “meat” of the book. We have organized the chapters in this part into body regions that have functional, topographical, and clinical coherence. These regions are:

- head, face, and neck
- shoulder, chest, and upper back
- arm and hand
- vertebral column
- low back and abdomen
- pelvis
- thigh
- leg and foot

Each Part II chapter has the same internal structure. This rigorous internal consistency is deliberate: learning is based on repetition, and a repetitive organization allows the reader to more easily process and internalize information. Each chapter, therefore, has the following components:

- Overview of the Region. Here, we review the muscular and skeletal components of the region under discussion, and offer observations on conditions that typically cause pain and dysfunction in that region. Extensive anatomy plates, presented in a horizontal (“landscape”) format, depict in detail the internal anatomy. Labels point out each pertinent structure and are keyed to the text discussion.
- Muscle sections. Each muscle of that region is then discussed. These sections are distinguished by their use of various icons that highlight key pieces of information:
- Pronunciation. As communication between massage therapists and other members of the health care community continues to increase, it’s important to know how to pronounce each muscle name correctly. We use a phonetic pronunciation key that is easy to decipher.
- Etymology. A brief derivation of each muscle name is given. Etymologies are extremely helpful in learning and remembering anatomical structures.
- Overview. Here, we give a succinct but thorough overview of the structure and function of the muscle. We also review potential causes of pain and dysfunction that may affect the muscle.

- Comments. Where appropriate, interesting or esoteric comments about the muscle are included. For instance, we point out that biceps brachii resides on the humerus but has no attachments to it, and that in addition to being a flexor it is the most powerful supinator of the forearm.

The following icons are then used to highlight particular information:



Attachments

The attachments of the muscle are cited. Because the tradition of describing muscle attachments as origins and insertions can be confusing and misleading, we refer to attachments as proximal and distal, superior and inferior, or lateral and medial, as appropriate.



Actions

The principal functions of each muscle are listed.



Caution

Client safety is a primary concern for the massage therapist. Where appropriate, cautionary notes that alert the massage therapist to potential contraindications to specific techniques, as well as precautions to take while performing particular techniques for all clients are included.



Referral Areas

The areas to which the muscle typically refers pain are listed.



Other Muscles to Examine

Other muscles are listed that may refer pain to the same area.



Manual Therapy.

One or more basic techniques for treating the muscle are described and illustrated. In order of frequency, these techniques are stripping massage, compression, cross-fiber stroking, stretching, and myofascial stretching, all of which are discussed in Chapter 1.

DESIGN

The design of this book is intended to facilitate its use during hands-on practice sessions. Students are encouraged to use the book as a tabletop resource while practicing the techniques on a fellow student or other volunteer. Design features that will help students in their practice sessions are as follows:

- A specially designed lay-flat binding keeps the book open to the page a student wants to study.
- The colorful icons in the muscle sections focus the reader's attention and help prevent the reader from losing his or her place in the narrative.
- The technique illustrations include arrows → that show the direction of the moving strokes. A second kind of arrow ▶▶ denotes static compression, and a third ←→ indicates myofascial stretching. These devices help take the guesswork out of performing the techniques.

ADDITIONAL CONTENT

Anatomical structures are shown in the anatomy plates and are boldfaced in the text. Other boldfaced terms are defined in the glossary. There are also the following appendices:

- Latin and Greek prefixes and suffixes, and a brief explanation of the structure of Latin words
- Illustrations of terms for body planes, relative location in the body, and positions and movements
- A list of muscles according to their pain referral zones
- A list of other suggested books and resources

IMPORTANT COMMENTS

- The illustrations in this book feature paid models (not clients) who are shown nude or with minimal draping (child models are in underwear) to show clearly both internal structures and external body landmarks. This approach should not be taken as a suggestion for clinical practice. Suggestions for draping are given wherever appropriate, with reference to corresponding illustrations of the draping techniques in the first chapter.
- Due to the demands of photography and the need to show landmarks and internal structures clearly, many compromises had to be made in the positioning of the therapist and client; as a result, the body mechanics in the illustrations may not always be ideal. Likewise, the prone subject is usually, though not always, shown in a face cradle. I urge you to look to Chapter 1, not the individual therapy illustrations, for models of body mechanics.
- Myofascial stretching as a preparatory technique before specific muscle work is highly recommended. We describe and illustrate myofascial stretching for all regions of the torso, but not for the limbs. The technique is fairly simple and straightforward, and the student should be able to transfer the technique to the arms and legs without difficulty.
- I use the word "compression" in this book to indicate any pressure exerted in a direction deep to the body surface, whether over firm structure (such as bone) or not.
- It is always challenging to know how to organize material about the human body, since the body is an integrated whole, and a book is necessarily linear. Within each chapter, we have organized the muscles into logical groups (flexors together, extensors together, etc.). Within each group, the muscles are presented in no particular order.

SUMMARY

In short, this book is intended to bridge the wide gap between the anatomy book and the living body on the massage table especially for students, but also for practitioners. As your hands rest on the body, your eyes can move back and forth between the illustrations and the subject, allowing you to incorporate the anatomical information

with both visual and tactile senses. It will also allow you to find essential information about any muscle quickly and easily either for the first time as a student or to refresh your memory as an experienced practitioner. It is flexible enough to be used in any massage class. Since the material is presented in a format that is easily referenced, instructors may assign as little or as much of the material as they choose.

We wish every reader success, and we hope this book finds a prominent place in your treatment room for many years to come.

CALL FOR COMMENTS

I welcome criticisms, corrections, suggestions, and, yes, even compliments, any of which may be sent to: edward.connelley@ubc.ca

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James H. Clay
David M. Pounds



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