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Cancer patients find relief in specialized massage

Beverly Wooley weathered a double mastectomy, 29 weeks of chemotherapy and 33 radiation treatments after being diagnosed with breast cancer in August 2004.

But it was the lymphedema -- a swelling of the soft tissues after removal of lymph nodes -- that really got her down.

"After you've been through so much, you just want to get better," she said. "It was a constant, nagging area."

Wooley's oncologist, Dr. Jeanne Anderson, encouraged her to research alternative therapies but also cautioned her.

"She had seen and heard of people who had received massage from someone who didn't really understand the physiology and anatomy involved with lymphedema, and they had made it worse," Wooley said.

Wooley's research and word of mouth led her to Jamie Elswick, a local specialist in oncology massage. Wooley points to her weekly appointments, begun during radiation treatments, as the single thing that made her feel better.

Elswick addressed the pain in Wooley's left arm through lymphatic drainage massage and helped increase her range of motion through her work on scar tissue.

"All that has played into an overall healthier mental outlook" during recovery, Wooley said.

Elswick, the owner of Northern Raven Massage, was a licensed massage therapist for years before she trained to work with complicated cancer cases through the Scherer Institute of Natural Healing in Santa Fe, N.M. She has since completed the institute's nationally certified course for oncology massage teachers.

She is working with her mentor at Scherer, Gayle MacDonald, a pioneer in oncology massage in this country, to research the effects of massage on scar tissue for the revised edition of MacDonald's book "Medicine Hands."

CHANGING TREND

Massage as a means to aid healing fell out of favor in the United States after powerful painkillers were developed in the 1940s. That trend has been changing over the past decade or so. Alternative therapies are undergoing a revival, with some large hospitals employing licensed massage therapists on staff.

Historically, oncologists advised their patients to avoid massage entirely, fearing it could cause cancer cells to metastasize or travel to other areas and begin new tumors.

"There are still massage schools that teach students not to touch patients going through cancer treatment," Elswick said. "But research in molecular biology has improved our understanding about how cancer begins and spreads through the body." Rather than ban all massage for cancer patients, the current thinking is to avoid deep-tissue massage and train therapists to deal with the many variables presented by cancer patients.

In a 2003 survey of 219 hospitals that offer massage therapy, the American Hospital Association found that 17 percent provided the therapy for cancer patients. Numerous large-scale studies on the benefits of massage are being conducted at U.S. hospitals.

Small, randomized studies by the Touch Research Institutes, University of Miami School of Medicine, have shown an increase in dopamine levels, natural killer cells and lymphocytes in women with breast cancer who received 30-minute sessions three times a week for five weeks.

Other small-scale studies on people with all sorts of types of cancer indicate patients receiving massage may experience a decrease in pain perception, nausea, fatigue, anxiety and depression.

ALASKA INROADS

Elswick is on the cutting edge of this trend in Alaska, with her efforts to bring alternative therapies to cancer patients. In addition to teaching oncology massage on the West Coast and in Scotland, she leads a class at University of Alaska Anchorage as an adjunct teacher. About 40 local licensed massage therapists have completed the course, and Elswick said eight local therapists now offer oncology massage through their practices. Two of her former students are training at Sherer, she said.

At Providence Alaska Medical Center, Elswick and her team of students volunteer free comfort massage to oncology patients. Elswick instituted the program using protocols from Oregon Health Sciences University, where she received her hospital training.

"I saw there was such a need here that I came back and set up the volunteer staff at Providence," she said.

Elswick's team has been well-received, said Cheryl Howdyshell, volunteer services director for the hospital. An inpatient at Providence must have doctor's orders to allow the service.

"It's very technical in terms of what kind of massage they do and how they do it for patients in the oncology area," Howdyshell said. Much of the feedback has been requests for more volunteers.

"It's been exciting to be involved with Jamie and this program," Howdyshell said. "She's gone way out there to try to make something happen for folks. I think this is an area that's really going to grow in the future."

CHOOSING A THERAPIST

Surgery, chemotherapy and radiation save lives, but their wide-ranging side effects on cancer patients can seem intolerable.

Treatment lowers blood counts and immune function and can have a negative impact on digestion and a host of other bodily functions. Pain, fatigue, nausea, anxiety and depression can become an everyday part of life. Many suffer with long-term damage to the lymphatic system and scarring from surgery and radiation.

These and other factors specific to the type of cancer and necessary treatment make it important for cancer patients to choose therapists trained in oncology massage. They can assess their clients' medical situation and can navigate surgery sites and infusion ports that allow delivery of powerful cancer-killing drugs. They understand the need to keep the massage area sterile to protect patients, whose white blood cell counts can be lowered by treatment, leaving them vulnerable to infection.

Mary Bakic, 66, has been a client of Elswick's through four bouts of cancer over a decade, the most recent a second instance of breast cancer. Before her first diagnosis, with kidney cancer in 1995, she sought massage as a stress reliever. She credits massage during cancer treatment for preventing lymphedema, helping her sleep, and reducing fatigue and pain.

"Some of the medications cause bone pain, and massage definitely helps," Bakic said. "It relieves stress; if your body is stressed, everything's more painful."

Dr. Tammy Pickett, a family practitioner at Alaska Native Medical Center, has been on both sides of the fence.

When she was pregnant with her second child, she was diagnosed with chronic myelogenous leukemia, a blood cancer, in February 2002. She began seeing Elswick about six months before receiving a bone marrow transplant at Fred Hutchinson Cancer Research Center in Seattle.

"When you're diagnosed with something as serious and life-changing as cancer, you want there to be a miracle cure," she said. "But there was no magic bullet."

Weekly massage helped her relax and sleep better, and it reduced some of the puffiness she experienced from chemotherapy treatments.

"I knew massage was not harmful," she said. "I felt it was one of the things I could do that was really positive for my body."

Pickett, who sometimes encounters cancer patients through her practice, is supportive of those who seek alternative therapies to support their treatment. But she, too, cautions them.

"I think it should be done by someone who is experienced," she said, "so they know what to look for and what to be concerned about."

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