

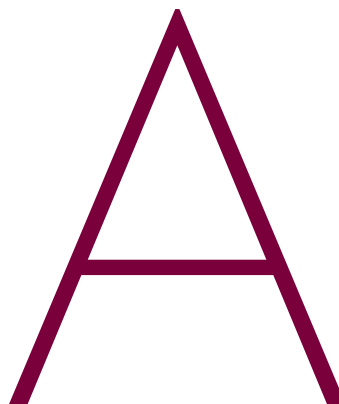
## DISCOMFORT AFTER MASSAGE



DEAR ART,

A client came to me complaining of lower back stiffness and discomfort. I spent a lot of time working on his posterior pelvis and low back. He said he felt much better after the massage, but the next day he called to say that his upper back and neck were stiff and he had a slight headache. Can you tell me what I might have done wrong and how I should handle such situations?

—CONCERNED



DEAR CONCERNED,

I'm really sorry you encountered this problem. I still experience post-traumatic stress when I remember my first similar experiences. Of course we want to avoid such occurrences, but it is very possible you did nothing wrong. Every excellent bodyworker I know occasionally deals with this, both as a practitioner and as a recipient of excellent work.

Why do we massage therapists beat ourselves up if this rarely happens, when virtually every medication and medical treatment available alerts the population to a bewildering array of possible adverse reactions? Any bodywork—and not just deep work—that is powerful enough to help people can be powerful enough to temporarily upset the body's delicate balance. Adverse reactions to acupuncture, craniosacral, chiropractic, and physical therapy occasionally occur. It is crucial to distinguish between increasing or initiating symptoms and actual injury. The vast majority of symptoms disappear in a day or so and may just be temporary compensatory adjustments to beneficial changes elsewhere.

Such occurrences are often a result of what one didn't do, not what one did. The key to excellent work is to integrate that work with the rest of the body so the stiffness doesn't find a new hiding place. Following are some suggestions for reflection.

Practice good time management. Schedule sessions with enough time to adequately work in areas that require extra attention, but also to allow time for more general work to integrate both the physical body and the nervous system.

Set realistic goals. Don't try to do too much. Locking horns with tension can often lead to residual pain from working too intensely, too long, or too quickly for the body to adjust. Always err on the side of caution and try to leave your client feeling better—not perfect.

Consider causes. What primary areas of tightness may be causing the reaction that's bothering your client? If the rhomboids are sore, is the reaction to a tight pectoral muscle?

Think holistically. Phantom symptoms may result from freeing up a restriction or rotational pattern that logjams at another area either proximal or distal to the original complaint. With low-back problems I always try to free the legs from the pelvis with work on the hamstrings, hip flexors, and iliotibial band, and then free transitions between thorax and neck, and neck and head.

Allow the body to adjust to your work, both at the beginning and the end of the session. Our clients have vast differences in how they are able to tolerate change. Begin working on satellite rather than more stubborn core areas of holding, and leave time for more global, gentle work at the end so the nervous system can adjust to and solidify your good work. Bodies can better process and integrate change and integrate changes, if the client feels them in movement. I usually suggest that clients walk around the block after a session and to take a walk later in the day.

Balance agonists and antagonists, and the front of the body with the back. Maintaining balance is often a tug-of-war between flexors in the front of the body and extensors in the



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back. For example, if you're spending a lot of time with the posterior neck muscles, say hello to the scalenes and sternocleidomastoids, too.

Prepare your clients for possible reactions in a positive manner. Don't call too much attention to the subject or make it a self-fulfilling prophesy, but explain that you have freed up restrictions and that it isn't uncommon for these to decide to seek refuge in the next restricted area before you exercise them. This removes the "What's wrong here?" response and

can actually be very positive as you explain that it is a great way for the body to tell us where to spend time next session. Rome wasn't built in a day!

Be available. Tell them that you are always open to a phone call for feedback—either positive or to report other issues. Your openness will greatly relax their reaction to anything that happens in their bodies and demonstrates your genuine concern for them as a person, rather than a set of symptoms.

I really hope this incident doesn't deter you from doing important work. Real skill in bodywork takes a lot of time to develop, and incidents such as this are an integral part of the learning process. Best of luck! **m&b**

**6** *Art Riggs is the author of the textbook Deep Tissue Massage: A Visual Guide to Techniques (North Atlantic Books, 2007), which has been translated into seven languages, and the seven-volume DVD series Deep Tissue Massage and Myofascial Release: A Video Guide to Techniques. Visit his website at [www.deeptissuemassage.com](http://www.deeptissuemassage.com).*