Massage therapy has been available for use by athletic trainers and therapists since the inception of athletic training and athletic therapy. Unfortunately, in the last 20–30 years, the use of manual manipulation (massage therapy) has declined for a variety of reasons. Included in those reasons are development of electrical modalities, athletic trainers and therapists thinking that their massage skills are not adequate, the question of who to massage and who to not massage (there are only so many hours in the day), lack of scientific proof that massage works, time constraints, and others. Fortunately, over the past couple of years, massage therapy is making a strong comeback in the world of sports medicine. Massage can be used with positive results when applied appropriately, using the proper techniques, and with knowledge of any existing skin condition. It is essential that the skin condition be accurately assessed before the application of any treatment protocol (Lowe, 1997).

Massage is an important tool in athletic training and therapy. In the broad definition of the word, it is used on a daily basis, sometimes unknowingly, to help relieve a variety of symptoms. There are positive and negative effects that should serve as guidelines for practitioners to follow when applying this modality. Although most people think of massage as something that just feels good, there are changes that it can cause in the body that might affect the treatment of an athlete, and they should be carefully considered before one recommends this course of treatment. In a recent survey, it was reported that over 50% of the responding schools used massage therapy as a treatment protocol in their athletic department’s health-care system. In addition to the schools that incorporated massage therapy as a part of their program, another 10% indicated that their athletes sought out massage therapy at their own expense (Mignano, 2001). We strongly suggest that for the best quality health care, massage therapy should be a formal component of the health-care program and not left to the discretion of either the individual athlete or the coach.

Athletics involves many different forms of contact, and with that come contusions of all shapes and sizes. An injury that involves inflammation poses many problems to the athlete and the athletic trainer or therapist. The injured area is painful, it is inflamed, and usually because of these factors, it has a decreased range of motion. This affects the athlete’s ability to compete at an optimal level. The athletic trainer or therapist must work to help restore the athlete’s functional capabilities as soon as possible.

One rehabilitation goal would be to decrease the pain level of the athlete. A major
contributing factor to pain is the pressure added to the sensitive nerve endings around the injury site. Decreasing the amount of fluid present at the injury site will help decrease the amount of pain associated with the injury. This can be done in many ways, through medication, motion, and massage. When we use the modality of massage, fluid is manually pushed away from the injury site and removed by the lymphatic system. When there is no inflammation, the range of motion can increase, which will help the athlete return to normal function. The decreased pressure will ease the aching and soreness associated with the injury (Prentice, 1999).

On a cellular level, a massage triggers specific responses from the body. An increase in vascular flow from the site helps remove remnants of the injury. Metabolism will increase on the site being massaged, which can help replenish nutrient supplies for the body and speed the phagocytosis process (Beck, 1999).

In addition to its use in cases of injury, massage can aid in decreasing body soreness (Beck, 1999). After an intense workout an athlete creates a buildup of lactic acid, which is a byproduct of muscle contractions. Massage can be used to help disperse lactic acid (Beck), which creates a better chance that the lactic acid will be reabsorbed into the bloodstream and disposed of properly. This process will help decrease postworkout soreness.

When deciding a path of treatment for an athlete, the clinician should consider massage in the plan. It is an effective, inexpensive modality that can speed the athlete's recovery. The uses of massage in sport are recognized and redefined daily, with a community of clinicians applying different techniques in their protocols. The use of hands-on techniques can always be beneficial to the athlete, if it is done in the right setting by a clinician skilled in the proper techniques of massage.

Many of the rules that athletic trainers and therapists work under, concerning skin conditions, are the same that a massage therapist would also observe. Recently, the massage world has begun to rethink the use of massage therapy with cancer patients. Up until the early 1990s, massage therapy was considered a contraindication with cancer. Within the last few years, that position has changed, and there is no evidence that light massage causes cancer cells to spread (MacDonald, 2001). Massage now provides one additional alternative to the treatment of skin conditions in the athletic population. Once again, the clinician must be well trained in very specific types of massage, that is, Reiki, therapeutic touch, and polarity therapy. Another item to consider when dealing with cancer patients or general skin conditions is the use of lubricants. One must be very careful to understand that some lubricants (e.g., lotions, creams) leave a coating on the skin and would therefore be contraindicated with some skin conditions (MacDonald).

Another type of massage that can be used with skin conditions is lymphatic drainage. The lymph system helps regulate interstitial fluid volume and pressure in the body. The proper movement of lymphatic fluid allows for more rapid healing and tissue regeneration. Blockages of this system can actually enhance infection, so the athlete should benefit from the lymphatic-drainage session (Chikly & Welfley, 2001). When applied to skin tissue that has scarred, lymphatic massage used in conjunction with hydrotherapy can be one of the more effective modality combinations in relieving blockages and helping break up scar tissue. Massage, in general, and lymphatic-drainage massage, in particular, helps muscles “let go,” which in turn allows for greater range of motion and more efficient function (Curties, 2001). In essence, massage, when applied to the body in relation to present skin conditions, can help relieve underlying conditions by relaxing the connective tissues and allowing greater stretch within those tissues (Young, 2001).

Fortunately, massage therapists have some techniques that allow them to work with certain skin conditions without exacerbating them. Included in this category is the pressure-point therapy of Shiatsu. This Eastern philosophy works on the premise that a series of meridians balances the body and its functions (Figure 1). These 12 meridians are channels of energy that can become blocked and can be manipulated by applying pressure to predetermined sites along them (Stillerman, 1996). This technique can be applied through clothing and without irritation to skin conditions such as open wounds, infection sites, and sutures because the skin-condition site might not be the Shiatsu pressure-point site. This technique does not limit itself to initiating change solely over the affected area. The premise is that the flow of energy through these channels is essential to the well-being