Contraindications

Some situations may mean to withhold treatment completely or not to work with client at this particular moment. Deep compression should always be viewed as a technique where the therapist should take various precautions and be careful to think before acting. Do no harm and when in doubt, ask for a doctor’s okay for “deep, aggressive, compression massage” first. (Anything contraindicated by hand is contraindicated for AOBT). A good resource is The Essential Massage Companion by Dr. Bryan A. Born. More in depth explanation is on page 13-14.

Deep compression force should not be done on the following:
- Pregnancy or trying to conceive
- Implants within nine months –breast, pectoral, gluteal, calf
- Boils, skin lesions or abscesses, varicose veins
- Recent eye procedures/Lasik surgery within 72 hours
- Tuberculosis, thrombosis, aneurysm, kidney disorders, recent bowel or hernia surgery
- Any acute inflammatory conditions such as active phlebitis, cellulitis or lupus
- Persons on Coumadin, Lovenox, Heparin or heavy aspirin (bruise/clots)
- Uncontrolled high blood pressure or heart condition, pacemaker, stent or shunt
- Rib fracture, osteoporosis
- Guillain-Barré syndrome or any disorder that causes loss of feeling or weakness
- Any recent (acute) injuries, surgeries, open wounds, rashes, cancers and anything unusual in nature.
- Low grade fever or illness (adhere to the laws in your state)

Use caution when working any deep compression with:
- Certain diabetic cases in advance stage
- Spider veins (color will change temporarily), fresh bruises (palpate/avoid)
- Clients who have been sitting in the same position for more than 6 hours with minimal movement- deep vein thrombosis is possible
- Recent injections of substances at joint or muscle junctures (including Botox and fillers)
- Recent knee surgery if applying Hip Hiker Three protocol
- Heavy menstrual cramping or abnormal flow cycle
- Irritable bowel syndrome
- Hyper mobile clients
- Lordosis (bolster stomach)/scoliosis (follow the curve of the spine)
- Feet: bone spurs, athlete’s feet, flare up of plantar fasciitis, plantar warts

Specific Contraindications for discussion in Deep Feet Two will be:
- Lumbar spinal stenosis, spondylitis, spondylololithsis
- Degenerative disc disease
- Hemorrhoids
- Sciatica pain
- Scoliosis
- Herniated disc, bulging, protrusion, extrusion
- Rods, lumbar wand
- Lumbar laminectomy / fusion

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Pregnancy - the 1st trimester is the only time most women can lie down to receive, but they are also more likely tomiscarry at this time. “Studies reveal that anywhere from 10-25% of all clinically recognized pregnancies will end inmiscarriage. Chemical pregnancies may account for 50-75% of all miscarriages. This occurs when a pregnancy is lost shortly after implantation, resulting in bleeding that occurs around the time of her expected period. The woman may not realizethat she conceived when she experiences a chemical pregnancy.” (Source: American Pregnancy Association) It is best for both ethical and liability purposes to avoid performing AOBT on any client who is or may be pregnant and to wait until approximately 6 weeks after delivery.

Implants (Breast, pectoral) – due to the constant movement under the armpit, the capsule where the breast/pectoral implant is located takes months for sufficient scar tissue to build around the implant thoroughly. Even a tiny area where scar tissue is not present can result in a tear if too much pressure is applied. Giving compression to the upper back, rhomboids and scapula area directly affect compression on the chest. Too much compression could result in leakage of a saline implant. (Note: ask for a physician release for gluteal and calf implants).

Aneurysm- Ruptured brain aneurysms are fatal in about 40% of cases. Of those who survive, about 66% suffer some permanent neurological deficit. There are typically no warning signs, and 4 of 7 people who recover from a ruptured aneurysm will have disabilities. (Source: www.bafaound.org). Ask for a written physician release. Client may be on medications which warrant massage, but they may also be taking antihypertensive medications to control blood pressure. Sedatives and pain medications may also be a factor.

High blood pressure, heart conditions - please note that AOBT helps to flush out toxins at such a high rate that people with heart conditions may be at risk with this form of bodywork if the heart is unable to receive the return of excess fluid.

Tuberculosis- Increased risk for TB include those who inject illicit drugs, illegal immigrants, those who have chronic lung disease, smokers, alcoholics and those with diabetes mellitus. TB is a highly contagious, airborne disease that causes lung tissue destruction and necrosis. If the bacteria enters the bloodstream, it can spread throughout the body—even with treatment, this can cause fatalities in up to 30% of those afflicted.

Lupus- Systemic lupus erythematosus (SLE) is an autoimmune disease, which means the body’s immune system mistakenly attacks healthy tissue. This leads to long-term (chronic) inflammation. Corticosteroids are often taken during a flare up, and most clients do not want to be touched during this period. Ashiatsu may be acceptable during a non-flare up stage according to the needs of the client.

Stents/Shunts- Stents help prevent arteries from becoming narrow or blocked again in the months or years after angioplasty. Shunts move body fluid from one area to another (such as cerebrospinal fluid). Cardiac shunts are for when the blood flow follows a pattern in the heart that deviates from the normal circuit of the circulatory system. The presence of a shunt may also affect heart pressure positively or diametrically.
Guillain-Barré syndrome (GBS) is pronounced “GEE-ann Bar-RAY”. It is a disorder in which the body’s immune system attacks part of the peripheral nervous system. It is not contagious. The first symptoms of GBS include varying degrees of weakness or tingling sensations in the legs. Often the symmetrical weakness and abnormal sensations spread to the arms and upper body. The symptoms can increase in severity and become life threatening. The symptoms can take months to dissipate. Most people recover from even the most severe cases, although some continue to have a certain degree of weakness. Guillain-Barré can follow flu symptoms and in rare cases be caused by the flu vaccination.

Inflammation - a client with phlebitis (inflammation of the veins) or thrombosis (blood clot in the heart or vessel) could suffer an acute inflammation. Any endangerment sites close to the surface where veins and nerves are unprotected and are contraindicated.

Histamine release - if your client has localized itching after a session, chances are good that you have located a trigger point, and they are experiencing a histamine release. Assure them that this should pass shortly. It is not a dermal sensation taking place but instead occurring at a chemical level in the muscle. The massage has released toxins from their body. Excessive scratching can harm the skin, so they should hydrate and make another appointment soon as to continue the benefits of detoxifying through massage. (Note: stress and an allergic reaction can also cause hives).

Cancer - if you are treating a cancer patient, it is wise not to do AOBT. The treatment may break up and disperse the meta-static growth unless the therapist fully understands how to treat and has a physician’s referral. One should never work over a radiation site or a tumor site.

Hypoglycemia/Low Blood Sugar – if you have a client that is diagnosed with hypoglycemia, you should suggest that they eat 1 hour before receiving AOBT. Maintaining their correct sugar levels will often stop that washed-out, spaced-out feeling that can follow a cathartic release. Keeping juice or candy to offer your clients may help with lightheadedness after their massage.

Hyperventilation and Hypersensitive Clients – pay attention and show caution to new clients who may appear to be emotionally unstable, extremely anxious, delicate or fragile. Some hypersensitive clients can faint and go into shock when treated with even moderate pressure. If they hyperventilate or move into a state of tetany (spasm), they could be experiencing a post-traumatic stress disorder and any direct pressure could lead to strong emotional responses and can be unnerving to inexperienced therapists. For the well-being of everyone, you should not administer AOBT under these conditions unless you are fully trained in PTSD (Post-traumatic Stress Disorders).

Someone who is claustrophobic may also not be a good candidate for AOBT as they often will be reluctant to place their face straight down in the face cradle.