

Qualitative study of women's experience after therapeutic massage

Mohammad Garakyaraghi¹, Mahshid Givi², Mahin Moeini³, Ameneh Eshghinezhad⁴

ABSTRACT

Background: Hypertension has become a major problem throughout the world, especially in developing countries like Iran. As it is a major risk factor for coronary heart disease, even small reductions in the prevalence can have potentially large public health benefits. Among the complementary methods, massage provides an effective means to lower the blood pressure. If nurses perceive the experiences of hypertensive patients receiving massage, they can use massage more effectively in their care plan.

Materials and Methods: This is a descriptive phenomenological study. Deep interviews were conducted with nine prehypertensive women who received Swedish massage three times a week in a total of 10 sessions, with each session lasting 10-15 min. Then, the researcher conducted an interview using a 'grand tour' question (open ended question) and the participants were then encouraged to speak freely explaining their thoughts and feelings about the experience of massage therapy. Data analysis was done by Colaizzi's method. Validity and reliability were obtained through measures such as real value, applicability, continuity, and authenticity.

Results: Women evaluated the massage therapy positively. The findings yielded six themes, including relaxation, sleeping better, reduction of anxiety and tension, reduction of fatigue, invigorating experience, improve connecting.

Conclusions: This study demonstrates that a body-centered intervention like massage can be valuable in a multidisciplinary approach to women with prehypertension. This method is easy to learn and relatively short (10-15 min) to administer as a suitable complement in nursing care for this group of patients.

Key words: Experience, qualitative research, therapeutic massage, women

INTRODUCTION

The responses to psychological and emotional challenges in our day-to-day life are involved in the development of cardiovascular diseases like hypertension. Approximately 50 million people in the USA have hypertension, and the prevalence is increasing.^[1] It has become a major problem throughout the world, especially in developing countries like Iran. Its prevalence in Iran is as high as in the USA,^[2] and because it is a major risk factor for coronary heart disease, stroke, and congestive heart

failure, even small reductions in its prevalence could have a potentially large public health and financial impact.^[1] Also, prevention and treatment strategies are urgently needed to prevent prehypertensive people from developing hypertension and cardiovascular disease.^[3]

Non-pharmacological interventions, such as complementary methods, for hypertension provide an effective means to lower the blood pressure, and have been emphasized increasingly as a useful method for both the prevention and treatment of hypertension.^[4] Olney also reported that complementary medicine reduces stress and controls the blood pressure,^[5,6] and recent researches indicate that massage therapy is the most popular among the patients. Further research is being conducted to explore its effects. In 1997, the Americans spent \$27 billion on the use of complementary medicine. So, nowadays, due to increase in people's interest to use some of these techniques, particularly massage therapy, this medicine is under the coverage of insurance and is considered as a part of care plans in the hospitals. It was even included in a part of skill and educational curriculum of the physicians and nurses.

Some of the complementary medicine techniques such as massage are described as part of the nursing job,^[7,8] and

¹Cardiologist, Head of Heart Failure Research Centre, Isfahan Cardiovascular Research Institute, Isfahan University of Medical Science, Isfahan, Iran, ²Heart Failure Research Center, Isfahan Cardiovascular Research Institute, Isfahan University of Medical Science, Isfahan, Iran, ³Department of Adult Health Nursing, Nursing and Midwifery Care Research Center, School of Nursing and Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran, ⁴Department of Adult Health Nursing, School of Nursing and Midwifery, Isfahan University of Medical Sciences, Isfahan, Iran

Address for correspondence: Ms. Ameneh Eshghinezhad, Department of Adult Health Nursing in Nursing and Midwifery School, Isfahan University of Medical Science, Esfahan, Iran.
E-mail: shghinezhad@nm.mui.ac.ir

today, nurses frequently use complementary methods like massage to provide comfort and to relieve their patients from the feeling of distress.^[9] On the other side, perceiving the experiences of patients that clarify diseases and health is a necessary event for nurses to propose effective solutions in the care plans for their patients, especially those with chronic illnesses.

Qualitative research is particularly suited to the study of complex topics or less-known issues, and is used to describe the world of human experience. On the other hand qualitative research has great potential to give information on massage therapy practice. Outcomes, context, and process factors enable the development and provision of more effective and appropriate treatment plans. Lastly, qualitative research makes a practitioner more aware of the role of massage therapist - how the practitioner's own beliefs and values can affect or influence a client's experience, perceptions, and outcomes. The insights, provided by an awareness of how others practice, can be used to reflect one's own practice. Qualitative research findings, therefore, will not only help massage therapists practice more effectively, but also differently, with greater awareness and mindfulness.^[11]

The purpose of the present article is to assess and analyze women's experiences of receiving massage.

MATERIALS AND METHODS

The aim of the present study was to explore the experiences of women who had prehypertension and received therapeutic massage. Phenomenology was chosen for the design. The descriptive phenomenological design used in the present study is that of Colaizzi,^[12] who advocated a descriptive approach in order to gain a description of the meaning of an experience from the participant's point of view.

Each person has an understanding of the world that is based upon their own experiences; therefore, one way to ascertain the perceptions of subjects about their experiences of the massage therapy is to find what they have received by interviewing.^[11]

The study population included adult non-pregnant women (18-60 years) referring to Sedighe Tahereh Cardiovascular Research Center, Isfahan, Iran, chosen by purposive sampling. Sampling continued until data saturation (nine women).

In the present study, by massage therapy we meant Swedish massage, which was conducted for the patient in the supine position with non-aromatic topical lotion on the face, neck, shoulders, and upper chest using superficial and deep

stroking, three times a week (morning to noon, 8-12 AM) for 3.5 weeks, in a total of 10 sessions, with each session lasting 10-15 min.

Next, a deep and semi-structured interview was conducted with nine prehypertensive women who received Swedish massage. Data analysis was done by Colaizzi's method. In a meeting with the participants, the nature, objective, method of study, and their role were explained, and then, informed consents were obtained from the subjects. Also, they were assured of the confidentiality of their information. Each interview took 15-60 min, and after audiotaping, it was transcribed verbatim and the recorded information was rechecked.

The tape scripts were studied and revised meticulously, and the statements related to the phenomena were extracted in order to understand the feeling of participants. Next, codes were organized in categories, which were confirmed by participants. In the next stage, the results were integrated using a complete description of the studied phenomenon and revised to have clear concepts. The final results were returned to the participants to be validated. Validity and reliability were obtained with respect to measures such as real value, applicability, continuity, and authenticity.

RESULTS

This study focused on the patients' experiences of massage, as it not only presents a physical therapy but also a personal encounter involving social contacts and a formalized way of providing touch. The participants in this study were nine prehypertensive women (18-60 years) who referred to the Sedighe Tahereh Cardiovascular Center.

The findings under six categories showed how each woman how felt after the intervention. They included relaxation, sleeping better, reduction of anxiety and tension, reduction of fatigue, invigorating experience, and improve connecting. There were clear examples of how each woman had benefited from the session. Initially, there was some apprehension about the intervention. (The participants will be referred to as P1, P2, etc., up to P9).

Relaxation

All women mentioned the relaxing effect of having massage. The relaxation was felt with an element of surprise; some were surprised at the speed and ease with which the relaxation occurred. The patients let their daily concerns, worries, and thoughts of their grueling situation briefly dissolve as they received massage. The massage sessions created an atmosphere of peacefulness:

"The first time I was very apprehensive because I wasn't sure ... and I always found it hard to relax and I did not think about it at all...." (P₁)

"It was very relaxing, I could forget about everything. It let me day dream. I did not want it to stop. I had wonderful feeling. It surprised me...." (P₇)

"Massage was surprisingly relaxing; it helped me relax, especially in such a short time. I definitely feel better and it relieves some of anxiety. It stimulated relaxation...." (P₃)

Sleeping better

The subjects reported that they were sleeping better. They emphasized that falling asleep resulted from the massage, even in cases of severe insomnia. The massage reduced the anxiety and, consequently, it induced relaxation and sleep:

"I couldn't sleep at all, I mean, I was looking at the clock every hour, but after receiving my massage in the last few weeks, I've had good night's sleep. I will use it every night I think...." (P₄)

"I was not able to sleep for a long time after the illness. I looked at the clock every hour during the night, waiting for the time to pass. Since I had the massage last week, I am able to sleep well, which I could not do for weeks. The massage helped me relax and enabled me to have a good sleep...." (P₁)

"It was very nice. It affected me positively for the rest of the day as I became much calmer and it also became easier for me to get to sleep at night. It really helped me...." (P₉)

Reduction of anxiety and tension

Many women mentioned the calming effect of massage. As a result of massage, they experienced a decrease in anxiety and tension they had before. The massage was, therefore, seen as a mode of control ranging from physical to mental aspect of their selves, as no anxiety ruled during and immediately after the session:

"Fantastic, I think it must be very helpful for people who are very stressed and anxious. It was so peaceful, calm and quiet...." (P₈)

"Relaxing and interesting. Very useful, my anxiety is greatly reduced. I felt at ease somehow, calm and wonderfully at peace floating away on clouds...." (P₁)

"It was difficult to explain, I think that is probably relieving my anxiety, relieving some of the tension that I experienced; I didn't notice anything else...." (P₅)

Reduction of fatigue

All women felt the energy. They expressed that their fatigue had melted away. Massage allowed them to have a time of rest and to respite from weak and poor body and from bothering thoughts as it stimulated energy and eliminated fatigue from the body and mind in daily life:

"Fantastic, I do not feel tired after the massage. I was full of energy and without any tiredness. I could follow my responsibility, and interestingly all my daily fatigue was eliminated with massage...." (P₇)

"Massage was so interesting, I felt all my daily fatigue was lost, I could experience something I had never experienced before, it gave me energy and I felt my body worked in different way. Now, I feel I can do whatever I want...." (P₂)

Invigorating experience

Several women felt invigorated or energized by the experience. They experienced a pleasant feeling of inner force and power. Even though they were in a frail condition, massage gave them a temporary subjective feeling of physical and mental strength:

"It was really fantastic, really relaxing. I can conquer the world now; I'm in better control of myself, physically and mentally, and I found it so enjoying. I want it more and more...." (P₂)

"It was very valuable. I feel invigorated now; I felt ten to fifteen years younger when I received massage. With massage, I could do my duty in the best way and it (massage) helped me somehow to manage the days in a good way...." (P₃)

"I enjoyed. I feel like a new woman, I feel extra power in me. I was cheerful the day that I received massage, I felt more composed somehow, it's difficult to explain but I felt strengthened in some way...." (P₄)

Improve relationship and connecting

Several women felt improved relationship by the experience. As a whole, massage gave rise to existential respite, mainly by counteracting loneliness, meaninglessness, and anxiety that interfere with family and social relationship. The patients had a positive sense of luxury and existential well-being, and they were in a space away and beyond their current situation that influenced their relationships and improved their connections with others. This feeling seems to be related to taking pleasure in the massage therapy sessions:

"I felt better than before I can communicate with others, it affected me positively for the rest of the day and I preferred to be with others than being alone...." (P₆)

"I thought it was actually beneficial and I think it was very good; I was much better in family relationships by the experience and had no problem and argument...." (P₁)

"When I get a massage, I have a better relationship with my husband, children, parents, friends and everyone who was in contact with me during the day; I can say that I'm more sociable and friendly now...." (P₉)

DISCUSSION

The results indicated that women evaluated the massage therapy positively. Key benefits reported included relaxation, sleeping better, relief of anxiety and tension, reduction of fatigue, invigorating experience, and improve relationship and connection everywhere.

The use of massage therapy has been researched earlier. The observations from this study using massage provided additional information about the experience of receiving a supportive intervention.

For the participants, the treatments were valued as a means of reducing anxiety, facilitating relaxation, distraction, and by giving a sense of well-being. For many recipients, massage was an unexpected and positive experience.

The psychological and emotional challenges that we face in our daily life are involved in the development of diseases like hypertension with an increasing prevalence. It has become a major problem throughout the world, especially in developing countries like Iran. Its prevalence in Iran is as high as in the USA, and also, it is higher in women than in men.

Meanwhile, the results of some studies indicated that women expressed relaxation and reduction of anxiety on experiencing massage. Many researches have shown that people who had received massage experienced stress reduction. For example, Campeau *et al.*, in their study on 100 patients with various cancers, concluded that patients who had received massage expressed reduction of anxiety directly after the intervention.^[17]

The results of the present study are consistent with the results of Olney,^[10] Hernandez *et al.*,^[14] and Post-White *et al.*,^[15] which reported reduction of anxiety and increase of relaxation caused by massage therapy.

The effects of the aromatherapy-massage in reduction of anxiety and depression are consistent with those reported in other studies on massage in depressed mothers who received massage.^[16] The experiences of anxiety reduction are also

reported in other studies on aromatherapy-massage in patients in palliative^[17,18] or postoperative ICU care.^[20,24]

The results of this research indicated that women were sleeping better as an effect of having massage. Ferrell-Torry and Glick^[21] and Meek^[22] found that relaxation, comfort, and sleep were promoted in people who received massage therapy.

All women felt the energy and expressed that their fatigue had melted away. Many researches have reported that massage could relieve fatigue. According to the results of Jin and Kim's study,^[23] elderly women receiving foot reflexology massage experienced a good sleep and had their fatigue relieved after the massage therapy sessions.

According to the Cochrane Database Systematic Review,^[24] reduction of fatigue was experienced after aromatherapy and massage by cancer patients.

Several women in this research felt invigorated or energized by the massage therapy. The findings of Mackereth *et al.*^[25] suggested that chair massage treatment led to a feeling of invigoration or energized several patients.

The results of this study indicated that several women felt improvement of their relationship.

Field *et al.*,^[26] in their research on 57 pregnant women and their partners who were recruited for a pregnancy massage study during their second trimester of pregnancy, concluded that subjects' relationship improved in the massage group. Also, in the study of Seiger Cronfalk *et al.*,^[27] massage was experienced as facilitating the relationship between the patients and their relatives.

Latifses *et al.*^[28] reported an improvement in relationships following massage, which possibly resulted from diminished pain and the decrease in depression and anxiety.

On the other hand, the improved relationships in the present study may be due to improved confidence of patients, as the massage therapy improves confidence. Many scientists suggest massage as a way to improve self-confidence, social confidence, and communication,^[28,29] possibly due to improvement of communication and relationships.

CONCLUSION

The findings of the present study show that the subjects were satisfied with massage. It is concluded that a body-centered intervention like massage could be valuable to increase relaxation, sleep quality, invigorating experience, and relationship quality, and to decrease

fatigue, anxiety, and tension in prehypertensive women, which can influence the general well-being of the people and also have a potentially large public health and financial impact in the society.

Finally, nurses could focus on the experiences of prehypertensive women and use massage as a complementary and alternative medicine to plan appropriate interventions in order to help patients achieve general well-being.

Although the results obtained from nine patients cannot be generalized, the findings can raise some important concerns and questions, which challenge the approaches currently adopted by health care practitioners. The study relied on immediate written feedback, so it cannot be an indication of long-term benefits.

In future studies, using a control group and a different intervention such as relaxation techniques may help to collect data concerning assessment of the therapeutic outcomes of massage therapy.

ACKNOWLEDGMENT

We thank all the clients and also the employees of Sedighe Tahereh Cardiovascular Center who cooperated with us in this study.

REFERENCES

1. Winkelmyer WC, Stampfer MJ, Willett WC, Curhan GC. Habitual Caffeine Intake and the Risk of Hypertension in Women. *JAMA* 2005;294:2330-5.
2. Bahrami H, Sadatsafavi M, Pourshams A, Kamangar F, Nouraei M, Semnani SH, et al. Obesity and Hypertension in an Iranian Cohort Study; Iranian Women Experience Higher Rates of Obesity and Hypertension than American Women. *BMC Public Health* 2006;6:1-9.
3. Janghorbani M, Amini M, Gouya MM, Delavari A, Alikhani S, Mahdavi A. Nationwide Survey of Prevalence and Risk Factors of Prehypertension and Hypertension in Iranian Adults. *J Hypertens* 2008;26:419-26.
4. Azizi F, Ghanbarian A, Madjid M, Rahmani M. Distribution of Blood Pressure and Prevalence of Hypertension in Tehran adult population: Tehran Lipid and Glucose Study (TLGS) 1999-2000. *J Hum Hypertens* 2002;16:305-12.
5. Olney CM. The effect of therapeutic back massage in hypertensive persons: A preliminary study. *Biol Res Nurs* 2005;7:98-105.
6. Kaye AD, Kaye AJ, Swinford J, Baluch A, Bawcom BA, Lambert TJ, et al. The effects of deep-tissue massage therapy on blood pressure and heart rate. *J Altern Complement Med* 2008;14:125-8.
7. Woods SL. *Cardiac nursing*. 5th ed. Philadelphia: Lippincott Williams and Wilkins; 2005.
8. Moraska A, Pollini RA, Boulanger K, Brooks MZ, Teitlebaum L. Physiological adjustments to stress measures following massage therapy: A review of the literature. *Evid Based Complement Alternat Med* 2010;7:409-18.
9. Henricson M, Segesten K, Berglund AL, Maatta S. Enjoying Tactile Touch and Gaining Hope When Being Cared for in Intensive Care, a Phenomenological Hermeneutical Study. *Intensive Crit Care Nurs* 2009;25:323-31.
10. Tindle HA, Davis RB, Phillips RS, Eisenberg DM. Trends in use of complementary and alternative medicine by US adults: 1997-2002. *Altern Ther Health Med* 2005;11:42-9.
11. Colaizzi PF. Psychological research as the phenomenologist views it. In: Valle RS, King M, editors. *Existential-Phenomenological alternatives for psychology*. New York: Oxford University Press; 1978. p. 48-71.
12. Campeau MP, Gaboriault R, Drapeau M, Van Nguyen T, Roy I, Fortin B, et al. Impact of massage therapy on anxiety levels in patients undergoing radiation therapy: Randomized controlled trial. *J Soc Integr Oncol* 2007;5:133-8.
13. Hernandez-Reif M, Ironson G, Field T, Hurley J, Katz G, Diego M, et al. Breast cancer patients have improved immune and neuroendocrine functions following massage therapy. *J Psychosom Res* 2004;57:45-52.
14. Post-White J, Kinney ME, Savik K, Gau JB, Wilcox C, Lerner I. Therapeutic massage and healing touch improve symptoms in cancer. *Integr Cancer Ther* 2003;2:332-44.
15. Field T, Grizzile N, Scafidi F, Schanberg S. Massage and relaxation therapies' effects on depressed adolescent mothers. *Adolescence* 1996;31:903-11.
16. Wilkinson S, Aldridge J, Salmon I, Cain E, Wilson B. An evaluation of aromatherapy massage in palliative care. *Palliat Med* 1999;13:409-17.
17. Soden K, Vincent K, Craske S, Lucas C, Ashley S. A randomized controlled trial of aromatherapy massage in a hospital setting. *Palliat Med* 2004;18:87-92.
18. Stevensen C. The psycho-physiological effects of aromatherapy massage following cardiac surgery. *Complement Ther Med* 1994;2:27-35.
19. Dunn C, Sleep J, Collett D. Sensing an improvement: An experimental study to evaluate the use of aromatherapy, massage and periods of rest in an intensive care unit. *J Adv Nurs* 1995;21:34-40.
20. Ferrell-Torry AT, Glick OJ. The use of therapeutic massage as a nursing intervention to modify to modify anxiety and the perception of cancer pain. *Cancer Nurs* 1993;16:93-101.
21. Meek SS. Effects of slow stroke back massage on relaxation in hospice clients. *Image J Nurs Sch* 1993;25:17-21.
22. Jin SJ, Kim YK. The effects of foot reflexology massage on sleep and fatigue of elderly women. *J Korean Acad Adult Nurs* 2005;17:493-502.
23. Fellowes D, Barner K, Wilkinson S. Aromatherapy and massage for symptom relief in patients with cancer. *Cochrane Database Syst Rev* 2004;(2):CD002287.
24. Mackereth P, Campbell G, Maycock P, Hennings J, Breckons M. Chair massage for patients and carers: A pilot service in an outpatient setting of a cancer care hospital. *Complement Ther Clin Pract* 2008;14:136-42.
25. Field T, Figueiredo B, Hernandez-Reif M, Diego M, Deeds O, Ascencio A. Massage therapy reduces pain in pregnant women. Alleviates prenatal depression in both parents and improves their relationships. *J Bodyw Mov Ther* 2008;12:146-50.
26. Latifses V, Bendell Estroff D, Field T, Bush J. Fathers massaging and relaxing their pregnant wives lowered anxiety and facilitated marital adjustment. *J Bodyw Mov Ther* 2008;12:146-50.

27. Cronfalk B S, Strang P and Ternstedt B M. Inner power, physical strength and existential well-being in daily life: Relatives' experiences of receiving soft tissue massage in palliative home care. *Journal of Clinical Nursing* 2009;18:2225-33.
28. Powell L, Gilchrist M, Stapley J. Relaxation for children with emotional and behavioural difficulties attending primary schools. *Eur J Spec Needs Educ* 2012;27:483-97.
29. Billhult A, Maatta S. Light pressure massage for patients with severe anxiety. *Complement Ther Clin Pract* 2009;15:96-101.

How to cite: Garakyaraghi M, Givi M, Moeini M, Eshghinezhad A. Qualitative study of women's experience after therapeutic massage. *Iranian Journal of Nursing and Midwifery Research* 2014;19:390-5.

Source of Support: Nil, **Conflict of Interest:** Nil.