

# Research:

## *Abdominal Massage Beneficial for Bowel Function in Spinal Cord Injury Patients*

Combining abdominal massage with a standard bowel program benefited patients with spinal cord injury, in a recent study.

One of the major impairments in patients with spinal cord injury (SCI) is neurogenic bowel dysfunction, which includes fecal incontinence, abdominal distention, difficulty evacuating stool and constipation.

According to the study "The Effect of Abdominal Massage on Bowel Function in Patients with Spinal Cord Injury," the typical management approach for

SCI patients with bowel dysfunction involves increasing fiber intake, drinking adequate fluids, bowel training, a rectal suppository and digital stimulation. Abdominal massage is also recommended.

The study investigated the effect of abdominal massage on clinical aspects of bowel dysfunction and colonic transit time in patients with SCI. Twenty-four patients with SCI, who were being treated in a rehabilitation program, volunteered to participate in the study, which was conducted in two phases.

During phase I, which lasted for three weeks, all patients were placed on a standard bowel program. The program included a standard diet of 15 to 20 grams of fiber per day, as well as daily digital stimulation. No laxatives, suppositories or enemas were used during the study.

At the end of the second week, each patient took a capsule, which contained 10 radiopaque markers, for six consecutive days to measure colonic transit time. Abdominal radiographs were taken on the seventh day. Clinical variables—such as the mean time required for bowel evacuation in minutes, frequency of defecation, presence of fecal incontinence, abdominal distention or pain, or difficult evacuation of stool—were also recorded during the third week.

During phase II, patients continued to receive the same care as in phase I with the addition of at least 15 minutes of abdominal massage. Each massage began at the cecum, continuing along the length of the colon to the rectum. Abdominal radiographs were then taken on the 15th day of phase II. Colonic transit time and the aforementioned clinical variables were again recorded.

The study's results indicate that abdominal massage has positive effects on some clinical aspects of bowel dysfunction.

Combining abdominal massage with a standard bowel program resulted in a shorter colonic transit time, a reduction in abdominal distention and fecal incontinence, as well as an increase in the frequency of defecation. However, no significant changes were observed in the time required for bowel evacuation or in the quantity of patients with difficult intestinal evacuation or abdominal pain after massage had been added to the treatment.

The study recommends abdominal massage be offered in rehabilitation programs for patients with SCI.

Pressure Diverted From Joints of Thumb

Point of Pressure to Body

Pressure Diverted to Palm of Hand

The therapist's  
**THUMB**<sup>TM</sup>  
Less Strain, More Gain!

The Therapist's Thumb allows the giver to perform a deeper massage without adding strain to his or her thumbs. While the receiver gains more relief from a deeper massage.

- Greatly reduces stress and strain on thumbs, hands, and wrists.
- May extend a therapist's career.
- So ergonomic that even with lotion or oil on your hands you can still maintain control.
- So smooth, the client won't realize you are using a tool.
- 2 sizes available, Standard and Mini.

"Thanks to The Therapist's Thumb I am able to do more consistent deep tissue work on even the toughest client. You have saved many MT's from having to retire early by saving their hands. The Therapist's Thumb is by far the best tool for any massage therapist to have in their tool bag!"

— J. David Casler, DPT, LMT, NCTMB, CMT1, CMMP

615.579.0450 • [www.grasplife.com](http://www.grasplife.com)  
In Canada call 1-866-845-5408

Source: *Baskent University Medical School, Ankara, Turkey.*  
Authors: *Sebri Ayas, M.D.; Berrin Leblebici, M.D.; Seyhan Sözüay, M.D.; Meral Bayramoglu, M.D.; Emin Alp Niron, M.D.* Originally in the *American Journal of Physical Medicine and Rehabilitation* (2006); 85:951-955.

Copyright of *Massage Magazine* is the property of *Massage Magazine* and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.