Introduction

Background
Dystonia is a neurological disorder characterized by involuntary muscle spasms and tremors, resulting in abnormal movements and posture. Symptoms include pain, spasms, tremors, and dyskinesia. Conventional treatments include medication, botulinum injection, and surgical intervention. Many dystonia patients seek complementary and alternative medicine (CAM) therapies such as massage, but the effects of treatments are not well documented. Little research was found on massage and dystonia. This study documents massage treatment for dystonia, in a specific case.

Objective
To examine the effects of massage therapy on pain, dyskinesia, and functional mobility in activities of daily living in a patient with dystonia.

Methods

Patient Profile
A 51-year-old female presented with symptoms of pain, spasms, and tremors, affecting her life activities of daily living. She first experienced symptoms following a rock-climbing accident in 1998, and was diagnosed with dystonia in 2003.

Treatment
A student massage therapist administered five massages over a six-week period.

Techniques used:
- Swedish massage
- Myofascial release
- Hydrotherapy
- Stretching
- Remedial exercise

Assessment

Pre- and post-Numeric Rating Scale for pain
Frequency of night pain
Modified Bradykinesia Rating Scale
Timed Up and Go Test
Functional Rating Index

Positive Outcomes

Pre- and Post-Numeric Rating Scale for Pain

A decrease in frequency of pain experienced at night was shown.

Decreased scores show an improvement in subjective functional ability.

Reference:

Results

Positive Outcomes

Post-treatment pain intensity generally remained the same or decreased.

Decreased scores show an improvement in subjective gait ability.

Reference:

Conclusion

The results demonstrate a positive effect on symptoms of dystonia through massage therapy:
- Intensity and frequency of pain decreased
- Functional mobility improved, particularly in standing
- Dyskinesia decreased, with the patient executing smoother walking and squating movements

The negative outcome may be explained by the patient's altered gait during variable weather conditions during the study period.

The application of slow, rhythmic techniques, with moderate pressure, likely decreased SNS firing and increased relaxation, affecting movement patterns and perceived symptoms.

Shortcomings of this case study:
- A lack of specific dystonia classification in diagnosis decreased the precision of research, evaluation of progress, and treatment design
- Consistent feedback could not be obtained due to treatment plan modifications in the final two sessions
- Multiple massage techniques were employed; conclusions could not be drawn regarding specific effects of each type
- A longer observation period may have increased reliability

Masseage therapy may be a viable alternative or adjunct therapy for dystonia, as more general practitioners are suggesting CAM, and more patients are using these therapies.

For the future:
- Recent research implicaes a need to investigate tactile inputs such as massage and its effects dystonia
- Randomized controlled trials, larger sample sizes, longer evaluation periods, more forms of dystonia, and isolation of various massage techniques for neuromuscular conditions need to be studied in clinical trials

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References