Circulatory System

The circulatory system, through the medium of the blood, works to maintain homeostasis, which is the tendency to maintain a stable internal environment Massage can help or impair this system.

Delivery of nutrients and oxygen	If cells do not receive blood they die as in stroke, heart attack, pulmonary embolism, renal infaction and decubitus ulcers
Removal of waste products	Waste includes carbon dioxide and noxious compounds. If blood and lymph supply is limited, affected cells can drown in their own waste products
Temperature	Blood vessles dilate when it's hot and constrict when cold. Also, prevents hot places (heart, liver, working muscles) from getting too hot. Helps to maintain a stable environment
Clotting	Occurs when a rough place develops in the endothelium of a blood vessel, causing a chain of chemical reactions that results in the spinning of tiny fivers that catch cells to plug

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The Power is in Your Hands

Protection from Pathogens Defends against hords of microorganisms that try to gain access to the body's internal environment. Supplied with enzymes and other buffers that	any gaps. S a curse rathe benefit.	
	of microorga ction from Pathogens try to gain ac body's intern	isms that ess to the
Chemical Balance keep pH balance withi the safety zone.	and other but keep pH bala	ers that nce within

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The Blood

Includes Red Blood cells (Erythrocytes), White Blood cells (Leukocytes) and Platelets (Thrombocytes)

	Produced and dying at 2 million per second
Red Blood Cells	Comprise 98% of blood cells.
	Life span is about 4 months
	Deliver oxygen to cells and carbon dioxide to lungs
	Not really white, they're clear
White Blood Cells	Different type fight different type infections in different stages of development
	Types include: neutrophils, basophils, eosinophils, monocytes and lymphocytes
	Fragments of huge cells born in red bone marrow.
Platelets	Usually smooth, but become spiky and sticky when stimulated
	Travel system looking for leaks or rough places in blood vessels. When found,

All are produced in the red bone marrow.







Varieties of White Blood Cells A. Neutrophil; B. Eosinophil; C. Basophil; D. Lymphocyte; E. Monocyte

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The Heart

Divided into left and right halves by the septum; right half pumps to the lungs and left half pumps to the rest of the body.

Each half divided into top and bottom; small top chambers are called atria and is where blood from lungs and body returns; lower chambers are called ventricles.

Muscles of the atria are thinner and weaker; ventricle muscles are thicker and stronger



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Blood Vessels

Arteries/Arterioles = Vessels leaving the heart

Veins/Venules = Vessels going toward the heart

Capillaries = Vessels that **connect** Arteries and Veins

Arteries and Veins consist of 3 layers: Internal layer (tunica intima) of epithelium Middle layer (tunica media) of smooth muscle External layer (tunica externa) of tough connective tissue.

Capillaries are delicate variations thereof and as such are much more delicate and easy to damage

Back Copyright HandsOn Therapy Schools 2009 Circulatory System consists of 60,000 miles of tubing

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Blood Disorders

Anemia Embolism, Thrombus Hematoma Hemophilia Leukemia Malaria Myeloma Sickle Cell Disease Thrombophlebitis, Deep Vein Thrombosis

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Anemia

Insufficient oxygen-carrying capacity ; Often a symptom or complication rather than freestanding problem

Etiology

Idiopathic anemia

No identified cause, massage may offer temporary improvement

Nutritional anemia

Some deficiency; massage won't have much affect Cautions for pernicious anemia

Iron deficiency anemia

Needed to form hemoglobin Most common in women: need twice as much iron as men; get fewer calories Pregnant women especially Folic acid deficiency anemia Needed to form RBCs Water soluble: any excess can't be stored

Pernicious anemia

Inadequate Vitamin B₁₂: not enough in diet (vegans) or poor access in stomach (lack of intrinsic factor) Can lead to central nervous system (CNS) damage, anemia Other nutritional deficiencies

Demographics

3.4 million people in the United States

Mostly women

People with chronic diseases: cancer, infection, bone marrow suppression

Copper, protein, others

Aplastic anemia

Suppressed bone marrow activity Shortage of all blood cells Autoimmune problem, renal failure, folate deficiency, viral infection, radiation, some toxins Myelodysplastic anemia: similar problem, related to leukemia, myeloma

Secondary anemias

Complication of other disorders Ulcers Kidney disease Hepatitis Acute infectious disease Leukemia, myeloma, lymphoma

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more Anemia

Signs and Symptoms	Massage	
Pallor	Depends on cause	
Dyspnea	May offer temporary improvement; probably not long term	
Fatigue	Won't reverse etiology of most types of anemia	
Rapid heart rate	Cautions: heart rate; pernicious anemia may change sensation	
Intolerance to cold	Sickle cell and malaria are discussed elsewhere	

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Embolism, Thrombosis

Embolism: traveling clot ; Thrombus: lodged clot

Etiology

Platelets flow through circulatory system; activated by any rough spot or inflammatory chemicals

Clots form at sites of damage, areas of slow, irregular blood flow

Emboli travel until vessel is too small

Pulmonary embolism

From a clot that forms on venous side of systemic circuit

650,000 pulmonary emboli/year

200,000 deaths

Often related to deep vein thrombosis (DVT), complications of trauma, orthopedic surgery

Risk factors for pulmonary embolism

Other types of cardiovascular disease, recent trauma, bed rest, surgery, pregnancy, recent childbirth, overweight, smoking, birth control hormones, hormone replacement therapy

Number 3 cause of death in hospital setting

Signs and symptoms of pulmonary embolism

Usually none till after damage has occurred Dyspnea, chest pain, coughing with bloody sputum Can look like heart attack

Demographics

3.4 million people in the United States

Mostly women

People with chronic diseases: cancer, infection, bone marrow suppression



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Complications of pulmonary embolism Increased risk of another event Loss of lung function → right-sided heart failure Treatment Thrombolytics, anticoagulants Surgery if necessary

Prevention

Identify risk

Low-dose presurgical anticoagulants Elevation of legs External compression of legs Early ambulation

Arterial embolism

Complication of atherosclerosis

Could also be from bacterial infection, atrial fibrillation, rheumatic heart disease

Emboli are usually clots

Can also be plaque, bone chip, bubble, knot of cancer cells

When septum is intact

All venous emboli travel to lungs Arterial emboli can go anywhere except the lungs

> Coronary artery (heart attack) Carotid/ cervical artery (stroke)





more Embolism, Thrombosis

Signs and Symptoms	Treatment	Massage
May be silent May involve sharp tingling pain, tissue damage and death	Prophylactic anticoagulants	Rigorous circulatory massage is contraindicated for clients who tend to form clots Cautions with anticoagulant medications

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Hematoma

Bleeding, pooling of blood

Bruise = superficial capillaries (ecchymosis)

Between muscle sheaths, in brain = more serious

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more Hematoma

Signs and Symptoms	Treatment	Massage
Bruises	Bruises nothing, or hot and	Locally contraindicated while acute and painful
reddish/purple, black/blue when	cold	
acute	COId	Work gently, use
acute	Subungual hematomas may	hydrotherapy, stay within
Yellow/green when	have to be aspirated	tolerance
subacute		
Larger intermuscular bleeds	Intermuscular bleeds should be	
	watched	
Inflammation with		
discoloration	Compartment	
	syndrome	
Heat, pain, usually in fleshy areas	Myositis ossificans	

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Hemophelia

Genetic disorder ; Absence of various clotting factors

Etiology

Hemophilia A (80% of cases)

Deficiency in clotting factor VIII

Hemophilia B (also called Christmas disease) (15% of cases)

Deficiency in clotting factor IX

Other: much rarer than A or B

Person with hemophilia has difficulty forming solid, long-lasting clots

Don't bleed faster, do bleed longer than others

Rated as mild, moderate, severe

Severe hemophilia = 60% of diagnoses; <1% normal clotting factors

Demographics

About 18,000 men in the United States

About 400 new cases/year

Carried on Xchromosome: women are carriers who pass it to their sons

About one-third of cases are spontaneous mutations

It is possible but rare for women to have hemophilia

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more Hematoma

Signs and Symptoms	Complications	Treatment	Massage
Signs at birth: umbilical cord bleeds excessively Early childhood: infant/toddler accidents Bruising, hematomas, nosebleeds, hematuria, joint pain from bleeds into capsule	Leading cause of death in children with hemophilia is intracranial bleeding Bleeding into joint capsules with inflammation and extensive damage Hemophiliac arthritis Ankles, knees, elbows Muscle and nerve damage Muscle and nerve damage Infected blood products Vaccinate for hepatitis A, B Resistance, hypersensitivity to synthetic clotting factors	Supplement clotting factors Can be done at home now, prophylactically or after injury Careful exercise, weight control	Rigorous mechanical massage is contraindicated Energetic work appropriate and helpful for stress, pain relief

Leukemia

White blood ; Cancer of bone marrow

Etiology

Myeloid or lymphoid cells from bone marrow

Bone marrow produces multitudes of non-functioning WBCs

Can be acute (aggressive) or chronic (slow-growing)

Usually acquired genetic mutations

Exposure to toxins, radiation

Untreated leads to death from excessive bleeding, infection

Four main types

AML: acute myelogenous leukemia CML: chronic myelogenous leukemia ALL: acute lymphocytic leukemia CLL: chronic lymphocytic leukemia

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Demographics

35,000 diagnoses/year

22,000 deaths

Leading cause of death by cancer in children; more common in adults

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208,000 patients in the United States

more Leukemia

Signs and Symptoms	Diagnosis	Treatment	Massage
Bone marrow dysfunction Suppressed production	Blood tests, bone marrow biopsies, spinal tap	Depends on what cells have been affected Chemotherapy	Rigorous circulatory massage may be too demanding
of normal blood cells Fatigue, anemia Easy bruising, bleeding Chronic infections	Crossover with lymphoma	Four stages Induction Consolidation CNS prophylaxis Maintenance therapy Radiation therapy if unresponsive to chemo Bone marrow transplant Biologic therapies	Other types of work may be helpful Work as part of health care team

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Malaria

Vector-borne infection of blood cells ; Four species of protozoa

Plasmodium ovale

Plasmodium vivax

Plasmodium malariae

Plasmodium falciparum

Spread by Anopheles mosquitoes

Etiology

Life cycle of Plasmodium

Human is bitten by female mosquito

Immature parasite introduced to bloodstream

Travels to liver, grows 6–9 days

Reenters bloodstream

Invades healthy RBCs

Feeds on hemoglobin

Replicates

Infected cells rupture, releasing parasites and toxins

P. falciparum can be fatal

Transmitted through blood, mother to child

Demographics

Worldwide: 500 million/year

1.5 million to 3 million deaths/year, average age = 4 years old90% of cases in sub-Saharan Africa

No longer common in the United States : 1,000–2,000 diagnoses a year (mostly travelers)

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more Malaria

Signs and Symptoms	Diagnosis	Prevention	Massage
Physical symptoms	Some parasites	Prophylactic	Contraindicated while
Often missed in	becoming resistant to chloroquine	medication	acute
the United		Mosquito nets,	Get information on
States	Important to treat fully	insecticide, etc.	kidney, liver damage to make other choices
Blood smears		Vaccine in	
Other tests		development	
in development		Bacille	
		Calmette-	
		Guérin	
		(BCG) has	
		many	
		problems	



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Myeloma

Cancer of bone marrow, specifically maturing B cells

Etiology

Normally, only a few B cells in bone marrow before they migrate to lymph tissue

Usually spine, pelvis, ribs, skull

While B cells mature in bone marrow, they undergo a DNA mutation

Proliferate into tumors

Secrete cytokines that block osteoblast activity, stimulate osteoclasts ; Bone thinning, holes

Produce faulty antibodies

Monoclonal immunoglobulins (M-proteins) Fragments can show in urine: Bence Jones proteins

Progress can be tracked through urinalysis

Kidneys can sustain damage

(Tumors outside bone = *plastocytomas*)

Three types of myeloma

Multiple myeloma

Solitary myeloma

Extramedullary plastocytoma

Demographics

16,700 diagnoses/year

58,300 current patients

11,000 deaths/year

Usually diagnosed around age 70

Older black men more than other groups

more Myeloma

Signs and Symptoms	Diagnosis and Staging	Treatment	Massage
Silent early	Urinalysis	Watchful waiting	As with other blood cancers, support rather
Bone pain, fractures	Bone marrow biopsy, aspiration	Chemotherapy, bone marrow stem cell	than challenge stability Work for
Anemia, infections, bleeding	Blood test	transplantation	immune support, pain relief
Kidney problems Amyloidosis	Radiography, magnetic resonance imaging (MRI)		High risk of fractures
	Stages I–III		

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Sickle Cell Disease

Autosomal recessive genetic condition ; Production of abnormal hemoglobin

Etiology

Recessive gene: one copy = SC trait, not disease

Two people with SC trait have 25% chance of passing it on to each child

SC trait has no health consequences

SC disease: hemoglobin is abnormal, RBCs have sickle shape ; Lifespan of RBC = 10 days

Three variations

SS form (most common)

SC form

S-beta thalassemia

Demographics

SC gene most common in blacks, Hispanics, Mediterraneans, from Middle East

2 million people with SC trait in the United States

72,000 have SC disease

8,000 births/year

500 deaths/year



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more Sickle Cell Disease

Signs and Symptoms	Complications	Treatment	Massage
Inadequate oxygen- carrying capacity	Sickle cell crises: infarctions	Work to limit severity, frequency of SC crises	Rigorous exercise <i>not</i> recommended
Fatigue Shortness of breath Pallor Jaundice, splenomegaly	Hand-foot syndrome Organ damage Infections (lost spleen function)	Over-the- counter (OTC) pain medication, hot pack Heavier painkillers	Circulatory, mechanical massage contraindicated Reflexive, energetic may be helpful
Other complications	Gallstones Vision loss	Prophylaxis for pneumonia	Warm packs, gentle stroking for pain
	Acute chest syndrome (looks like pneumonia)		
	Others Delayed growth, chronic skin ulcers at lower legs, priapism		

Aortic Aneurysm

Veins have become obstructed with clots ; Usually calves, thighs, pelvis

Thrombophlebitis = lesser, greater saphenous veins

DVT = popliteal, femoral, iliac veins

Etiology

Thrombi = stationary clots; can fragment and travel

Usually to lung \rightarrow pulmonary embolism (exception with patent foramen ovale; cross over to arterial side)

Virchow triad

Injury to endothelium

Hypercoagulability

Venous stasis

Possible triggers

Physical trauma

Varicose veins

Local infection

Reduced circulation

Immobility

Pregnancy and childbirth

Certain types of cancer

Surgery

High-estrogen birth control pills or hormone replacement therapy

Demographics Often unrecognized, untreated DVT may happen 2 million times Diagnosed in 600,000 200,000 deaths Up to 5% population may have a DVT at some point Thrombophlebitis To lungs Deep Vein Thrombosis Edema with surface pitting Copyright 2009 Walters Kluwers Health I Lippincott Williams & Wilkins

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Other factors: cigarette smoking, hypertension, paralysis, and some genetic conditions

Clot forms; sudden movement or change in position causes debris to break off and travel

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more Thrombophlebitis, Deep Vein Thrombosis

Signs and Symptoms	Diagnosis	Treatment	Massage
May be obvious with signs of inflammation	Ultrasound: fast, noninvasive, high chance of false positive	Thrombolytics to break clots; anticoagulants to prevent future ones	A client with diagnosed blood clots is not a good candidate for
Sometimes distal edema	Venography: more accurate, slower,	Risk of bleeding	circulatory massage Signs may be
Chronic problem \rightarrow skin rashes, ulcers	more risk of damage MRI: fast,	Pneumatic compression, support hose for	indistinct, misleading
With infection: fever, malaise	noninvasive, accurate, expensive, not available	DVT Superficial	
DVT more dangerous, higher risk of serious	everywhere	thrombophlebitis: hot packs, analgesics, gentle exercise	
damage ; May show pitting edema		Vena cava filter	

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Vascular Disorders Aneurysm Atherosclerosis Hypertension Raynaud Syndrome Varicose Veins Back Next Depright HandsOn Therapy Schools 2009

Aortic Aneurysm

Bulge in blood vessel wall or heart ; Usually at aorta or in brain. If an aneurysm ruptures, extensive bleeding can happen

Etiology

If walls of high-pressure arteries lose elasticity, they can bulge

As aneurysm grows, walls get thinner

Usually happens at thoracic or abdominal aorta or base of brain

Sometimes the whole ventricle of heart can bulge

Factors

Compromised smooth muscle

Smoking

Congenitally weak arterial wall muscle

Inflammation

Untreated syphilis

Trauma

Types of aneurysms

Saccular

Fusiform

Berry

Dissecting

Demographics

Most patients are men 60 years or older

About 15,000 deaths/year



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more Aortic Aneurysm

Signs and Symptoms	Diagnosis	Treatment	Massage
Sometimes silent	Blood makes specific sound (bruit)	Endovascular or open surgery	Circulatory massage requires too much
May press on other structures Dysphagia, chest pain, hoarseness, coughing (thoracic aorta) Throbbing lump near umbilicus back pain (abdominal aorta)	sound (bruit) Palpable in thin people Ultrasound, computed tomography (CT), MRI Complications Pressure on nearby structures Blood clots Blood clots Rupture, hemorrhage Ruptured cerebral hemorrhage is fatal 50% of time Ruptured aortic hemorrhage is nearly	surgery Replacement graft, Dacron substitute, stent Small bulges may not need immediate repair	requires too much adaptation A client with a diagnosed aneurysm may get benefit from reflexive, energetic work to lower blood

Atherosclerosis

Subtype of arteriosclerosis

Hardening of arteries due to plaque

Damage causes spasm, blood clots

Diameter is occluded

Coronary artery disease (CAD) = atherosclerosis at coronary arteries

Etiology

Multifactorial process ; Influenced by gender, age, race, diet, others

Basic progression

1. Endothelial damage

Carbon monoxide; high levels of low-density lipoproteins (LDLs) and triglycerides; high iron Occurs most readily at branches or sharp curves

- 2. Monocytes arrive, move in, become macrophages
- 3. Macrophages take up LDL.

Become foam cells: beginning of plaque

4. Foam cells infiltrate and damage smooth muscle tissue.

Secrete growth factors that cause smooth muscle cells to proliferate

Release enzymes that damage arterial walls, promote clotting

Platelets arrive
 Secrete growth factors

Form clots

Cause	vascular spasm	
Unchan	geable risk factors	
Heredity, g	genetics	
Gene	der	
Age		
Kidn	ey disorders	
Modifiable	risk factors	
Smo	king	
High	cholesterol levels	
High	blood pressure	
Sede	entary lifestyle	
Diab	etes	
Other Risk	Factors	
C-rea	active protein	
Hom	ocysteine	
Othe	rs: BMI, fibrinogen, lipoproteins, stress	
mana	agement	
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more Atherosclerosis

Signs and Symptoms	Diagnosis	Treatment	Massage			
None early: 50% occlusion before dysfunction (angiogenesis, adaptability) Later: poor stamina, shortness of breath, complications	Angiogram, CT, blood tests, echocardiogram, ultrasound, ankle- brachial index	Diet and exercise Drugs Lower blood pressure, cholesterol, platelet activity Surgery	Determined by client's resilience: is it safe to exercise rigorously? Adjust for medications as needed			
Complications High blood pressure		Bypass, angioplasty, endarterectomy				
Aneurysm						
Arrhythmia						
Thrombus or embolism, peripheral vascular disease						
Angina pectoris						
Stable angina pectoris						
Unstable angina pectoris						
Heart attack						

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Hypertension

High Blood Pressure: Consistently above 140/90

Etiology

Blood pressure variables

- Pressure inside vessels
- Pressure outside vessels
- Blood volume
- Vessel diameter

Types of high blood pressure

Essential: 95%

- Secondary (temporary complication)
- Malignant hypertension: diastolic rises very quickly —medical emergency

Blood pressure readings

Risk of damage to vessels begins when systolic > 115, diastolic > 75

A measurement is based on two or more readings at different office visits

Category	Systolic	Diastolic
Optimal	<120	<80
Prehypertension	120–139	80–89
Hypertension		
Stage 1	140–159	90–99
Stage 2	160+	100+

Demographics

65 million people in the United States

1 in 3 adults

Men > women until menopause, then men = women

African Americans more than other races

Age: -half of people 60 years or older have hypertension

Other factors

Obesity, smoking, high cholesterol, atherosclerosis, water retention

Genetic predisposition

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more Hypertension

Signs and Symptoms	Treatment	Massage
Silent killer Shortness of breath; neadache/dizziness; swelling of ankles; sweating, anxiety Complications Edema Atherosclerosis	Of 65 million with hypertension in the United States 63.4% know 45.3% treat it at all 29.3% treat it successfully 70% of people with	Depends on health, resilience of client Massage can lower blood pressure and stress Get info on kidney, heart problems No deep abdominal work
Stroke Enlarged heart, heart failure Aneurysm	hypertension don't control it well enough to prevent complications DASH diet	
Kidney disease Vision problems	Exercise Medication	
	Diuretics, vasodilators, beta- blockers	
	Medication causes side effects; high blood pressure has no symptoms	

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Raynaud Syndrome

Primary Raynaud disease: vasoconstriction in extremities (also nose, ears, lips) ; Secondary Raynaud phenomenon: complication of underlying disorder

Etiology

Arterioles spasm

Temporary episodes, can become permanent

Chemical components: tunica intima secretes chemicals that affect vasospasm, viscosity of blood

May be related to hyperreactivity to cold, stress

Causes (primary)

Stress (sympathetic response), cold, mechanical irritation

Slow onset, less severe than secondary

Both hands and feet often affected

Causes (secondary)

Arterial diseases: diabetes, atherosclerosis, Buerger disease

Autoimmune connective tissue diseases: scleroderma, lupus, rheumatoid arthritis

Sensitivity to some drugs: beta-blockers and ergot compounds

Neurovascular compression: carpal tunnel syndrome, thoracic outlet syndrome, crutch use

Demographics

Primary: mostly women 15–40 years old

Some kind of Raynaud syndrome may affect 5–10% of general population



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more Raynaud Syndrome

Signs and Symptoms	Treatment	Massage
Usually bilateral	Depends on cause	Depends on cause
Cycle of colors White Blue Red	Quit smoking, avoid vasoconstrictors, soak in warm water, dress for weather, protect hands when working in cold, etc.	Primary indicates massage Secondary: be guided by underlying disorder,
Episodes last < 1minute to several hours Secondary can be extreme and long lasting: atrophy, ulcerations, skin and nail damage	Deal with stress: biofeedback, massage Medication to dilate blood vessels, counteract norepinephrine Surgery: sympathectomy	general health

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Varicose Veins

Varix= twisted

Valves in superficial veins collapse, vein is stretched, distorted ; Can happen at anus (hemorrhoids), esophagus, scrotum, legs

Etiology

In the leg

- Small veins pick up blood from internal muscle capillaries
- Run on superficial aspect, feed into larger veins that perforate leg muscles
- Muscle contraction/relaxation moves blood from superficial to deep and up legs
- Damage to valves in superficial veins
 - Wear and tear
 - Standing all day
 - Mechanical obstruction ; Knee socks, brace, pregnancy
 - Systemic problems: kidney, liver congestions
 - Structural anomalies
- When a valve is damaged
 - Blood adds pressure on the next valve down
 - Veins become twisted, ropy

Demographics

Women > men

Progesterone weakens vein walls

History of pregnancy

Half of people 50 years or older



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more Varicose Veins

Signs and Symptoms	Treatment	Massage
Lumpy, bluish wandering lines Protrude from skin Back, medial aspect of calf and thigh Itching, throbbing pain Complications Varicose ulcers Leg cramps Blood clots (melt easily) Risk of DVT, especially with sudden onset or change in size	Support hose, elastic bandages Avoid long periods on feet, rest with feet up Avoid constricting clothes Surgery Vein stripping Ambulatory phlebectomy Other Sclerosing injections Laser Radiofrequency	Local contraindication Heavy massage distal also contraindicated For mild cases: avoid deep, sharp pressure Telangiectasias okay for massage

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Heart Attack

Damage to cardiac muscle from ischemia ; Muscle tissue doesn't repair; replaced by scar tissue

Damaged area = infarct

Heart attack = myocardial infarction

Etiology

Usually blockage in coronary artery impedes blood flow

Could be clot, debris that travels from elsewhere

Prolonged coronary spasm (drug overdose)

New plaques more likely to break off than old ones

Cardiac cells die of ischemia

Can't contract with coordination

May trigger fibrillations

Ventricular fibrillation \rightarrow high risk of sudden death

Seriousness determined by size, location of infarct

May impair muscle function

May damage conduction system

Demographics

Number 1 cause of death in the United State

1 million heart attacks/year (1:5 deaths)

500,000+ deaths/year

13 million survivors alive today

Risk profile

Sedentary, hypertension, high cholesterol, smoking, overweight

Male 45+, Female 55+

Family history

Female 35+ who takes birth control pills



more Heart Attack

Signs and Symptoms	Diagnosis	Treatment	Massage
Pressure, pain in the chestSpreading painLight-headedness, nausea, sweatingOthers: shortness of breath, nausea, anxiety, weakness, fainting, palpitations, cold sweat, stomach/abdominal painAngina pectoris (chest pain)Stable angina 6.5 million have it 400,000 diagnoses/yearTriggered by extra effortUnstable anginaSudden onset of severe chest pain, no triggerReliable predictorDynamic processBlockage may accrue over hoursEarly intervention	Hard to identify ahead of timeAngiogram for high-risk patientsOther testsHigh speed CT Contrast echocardiogramBlood test for C-reactive proteinMRI for plaque	Identify location of blockage, break it up as soon as possible Thrombolytics Percutaneous transluminal coronary angioplasty Oxygen, pain management Later care: anticoagulants, nitroglycerin, observation, evaluation Lifestyle changes	Depends on resilience, ability to adapt to changes

damage	
Complications	
Embolism	
Atrial and ventricular fibrillations	
Aneurysm	
Heart failure	
Shock	

Heart Failure

Progressive loss of heart function ; Not cardiac arrest

Etiology

Heart pumps 2,000 gal/day

If resistance develops, heart compensates

Heart grows (cardiomegaly)

Ventricles become stiff, inelastic

Stress hormones boost short-term function, damage in long-term

Heart may fibrillate \rightarrow circulatory system collapse

Heart failure usually related to other cardiovascular disease

Can be related to congenital weakness with heart muscle or valves

Types of heart failure: systolic v. diastolic

Systolic heart failure: left ventricle is enlarged; can't push hard enough

Diastolic heart failure: both ventricles are enlarged and inelastic

Types of heart failure: left side v. right side

Left-sided heart failure

Resistance in arteries (atherosclerosis, etc.)

Back up of fluid in lungs: pulmonary edema, shortness of breath, cough

Right-sided heart (cor pulmonale)

Resistance in lungs (emphysema, pulmonary embolism, pulmonary edema)

Demographics

3 million in the United States have heart failure

400,000 new diagnoses/year

Mostly among survivors of heart attacks, CAD, aneurysm, etc.

Men> women till age 75; then men = women

African Americans two times more than others

1 million hospitalizations/year

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more Heart Failure

Signs and Symptoms	Diagnosis	Treatment	Massage
Depends on which side of heart is dysfunctional Shortness of breath, low stamina, edema, chest pain, indigestion, arrhythmia, distended vessels in neck, cold sweaty skin	Observation, auscultation Radiography for cardiomegaly Electrocardiogram May be rated I–IV or A–D	Depends on location, severity Rest, change in diet, modify physical activity Medication Beta- blockers, digitalis, diuretics, vasodilators Surgery: repair damaged valves, mesh bag, transplant	Heart can't keep up with needs; massage shouldn't challenge any further Energetic/reflexive work may be helpful

part

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