

background and objectives

- Massage therapy (MT) continues to expand in pediatric medical facilities throughout the US
72% of healthcare providers at a children's hospital have referred for massage therapy¹
82% of pediatric facilities offer some type of complementary or alternative medicine including massage therapy²
- Despite its reported effectiveness for **reducing pain**^{3,4}, there is a lack of objective data on MT's reach in pediatric clinical care
- Nationwide Children's Hospital's unique clinical program can offer new insights into patient demographics and service utilization
- This study aims to provide **demographic and diagnostic** information about patients for whom massage therapy is consulted and/or utilized in a large, urban pediatric hospital

methods

Participants

- Patients ages 0-18 (see Table 1)
- Admitted between 2009 to 2018
- Received massage therapy consult and followed for treatment

Procedures

- Retrospective chart review
- Data collected as part of clinical care
- Extracted from the electronic medical record (EMR)
- Part of a larger study investigating the potential relationship between patients receiving massage therapy and opioid use during admission

results

Table 1. Patient characteristics

	Overall (n = 8573)
Sex	
Female	4317 (50.4%)
Male	4256 (49.6%)
Race and ethnicity	
White	6078 (70.9%)
Black	1575 (18.4%)
Asian	169 (2.0%)
Middle Eastern	36 (0.4%)
Native Hawaiian/ Pacific Islander	19 (0.2%)
American Indian/ Alaska Native	13 (0.2%)
Unknown/other	683 (8.0%)

The most common diagnoses related to consults are:

- Chemotherapy
- Sickle-cell disease
- Cystic Fibrosis
- Scoliosis
- Burn
- Heart defects
- Symptomatic admissions, such as "fever," "abdominal pain," or "shortness of breath"

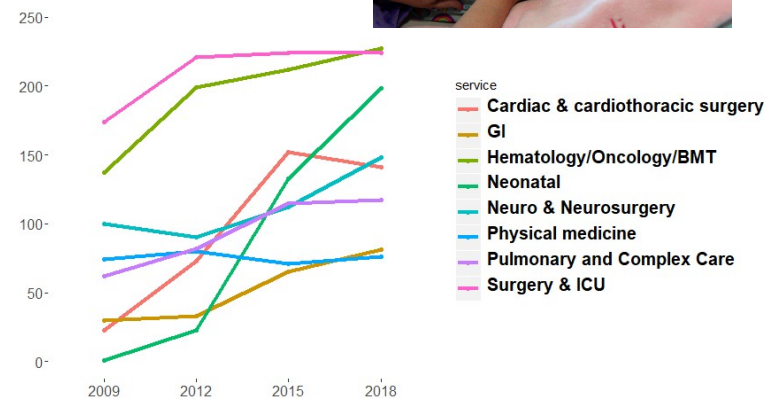


Figure 1. Annual massage therapy consultations, 2009-2018

discussion

- MT is a **valued provider** consulted by hospital-based physicians in care of patients
- Results thus far indicate that pediatric patients who are consulted for or receive MT represent a **wide age range** and most often are those receiving care for **cancer or inpatient rehabilitation**
- Further analysis will include increased focus on diagnoses and data across time to explore larger trends
- Further research is needed to:
 - Track trajectories across diagnoses and time
 - Explore massage therapy for pain reduction
 - Determine relationship between massage and opioid use

Our program touches the lives of patients from across the country

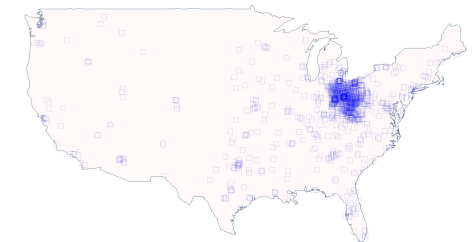


Figure 2. Patient home locations, 2009-2018

references

1. Jenkins BN, Vincent N, Fortier MA. 2015. Differences in referral and use of complementary and alternative medicine between pediatric providers and patients. *Complement Ther Med* 23:462-8
2. Stubblefield S. 2017. Survey of complementary and alternative medicine in pediatric inpatient settings. *Complement Ther Med* 35:20-4
3. Cotton S, Lauberto CM, Bogenschutz LH, Pelley TJ, Dusak J. 2014. Integrative care therapies and pain in hospitalized children and adolescents: a retrospective database review. *J Altern Complement Med* 20:98-102
4. Young L, Kemper KJ. 2013. Integrative care for pediatric patients with pain. *J Altern Complement Med* 19:627-32