Massingill Method for post Breast surgery scar tissue Release

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Education

• Vincent Institute of Massage Therapy: (Dr. Arthenor) in Los Angeles, California
• Gheinziет Therapy: Dr. Athenor
• Ohio College of Massotherapy / Akron
• Neuromuscular: Paul St John
• Myofascial Release: John Barnes
• Cranial Sacral: Dr. John Upledger
Education

- Manual Lymphatic Drainage: Vodder
- Kushi Institute Of Macrobiotic / East West Center for Macrobiotics.
- Thai / Shiatsu/ Cooking for healing/ Herbal Therapy/ Cupping.
- Negative Pressure Cupping: Cross Country
- Kinesio Taping: Akron U: Dr. Kenzo
- Chirodontics: Dr Robert Walker LVI Institute
- Ayurveda: Ohio/ Fairfield Iowa / Shirodhara
- 16 years research in Breast Cancer Scar Tissue

OVER 300,00 WOMEN HAVE BREAST CANCER SURGERY PER YEAR
20 to 50% experience persistent chest wall pain and more.
Even after less aggressive surgeries / ie. Lymph node removal or biopsy

COMMON ISSUES POST BREAST SURGERY
- Loss of range of motion/ mobility painful
- Loss of feeling
- Handgrip issues
- Axillary web Syndrome
- Trouble Sleeping
- Fatigue
- Numbness / Tingling
- Shooting Pain (contractures)
- Throbbing
Studies show that chronic pain affects well being and quality of life

Some patients do not discuss the problems with their physician
  Women think its normal, this is there new life.

Current Treatment is medication, physical therapy and/or exercise to strengthen tissue and stretch to improve flexibility and mobility.
  They may be told it may or mat not go away.

MYOFASCIAL RELEASE : Another part of the puzzle since connective tissue is key component of structural stability.

Fascia Helps the body retain it’s shape and keeps vital organs in place. Fascia also covers muscles, bones, nerves, vesicles and it continuous throughout the body

MY FIRST DOUBLE BLIND POLOT STUDY WITH CASE WESTERN RESERVE, METRO HOSPITAL & SUSAN G. KOMEN PROVED SUCCESSFUL

Using modified Myofascial Techniques/ Manual Lymphatic Drainage and Cross fiber to help woman with chronic pain and mobility issues post breast surgery.

Why Myofascial release?
PART OF THE CONNECTIVE TISSUE SYSTEM
  • Reduces Adhesions
  • Releases Connective tissue
  • Increases Muscle Mobility
  • Reduces Stiffness
  • Stimulates blood flow
  • Encourages Lymphatic flow
  • Releases Fascia Restrictions

Stretching fascia influences the change in the viscosity of the collagenous fibers (scar tissue), and increases the glide for more fluid movement of muscle tissue

Increases blood flow encouraging release of toxins allowing phagocytes to clean bacteria guarding against infection.
fascia 3 dimensional

WITHIN THE CONNECTIVE TISSUE

• Histocytes & Phagocytes/ Macrophages defend against bacteria
• Mast cells develops what blood cell(Basophil) anticoagulant.
• Pigment cells/ melanocytes
• Fibroblast produce collagen fibers (scar tissue)
• Elastin, and viscus (gell) ground substance
• to help heal injuries.
CHARACTERISTICS OF CONNECTIVE TISSUE

Connective tissue is active, fibroblast, release collagen fibers to provide strength and active growing of the tissue for wound repair. Loose/dense made of collagen, elastin and.

Collagen: provides strength to the fascial tissue for over extension.

Elastin: Extends runs parallel to give elasticity when needed/ found in skin/arteries, veins and tendons & helps where elasticity is required.

Polysaccharide gel: fills the spaces between fibers, reduces friction in muscles helps them slide over one another, lubricates, helps absorb shock of trauma. Continual trauma Sports cause the polysaccharides break down.

Components are hyaluronic acid and proteoglycans /lubrication.

Definition of Fascia:
A sheet or broad band of fibrous connective tissue beneath the skin around muscles and other organs of the body. Fascia has three layers and it is a three dimensional network.

Superficial:
Covers the entire body, thicker and different regions contain fat for preventing heat loss. Between layers of fascia are arteries, veins, lymph, nerves and mammary glands.

Function:
Stores fat, prevents heat loss, protects from blows and injuries and is a pathway for nerves and blood vessels.

Deep Fascia:
Lines walls of the body and extremities to hold tissue together. Separates muscle groups & holds them together. Allows free movement, Carries nerves, blood vessels and fills spaces between the muscles.
**Deep Fascia Contains no fat / Dense connective tissue**

Muscles are wrapped in dense connective /called

**Epymesium:** Wraps around the entire muscle

**Perimysium:** Wraps around Fibers

**Endomysium:** Wraps around the fascicles

**Subserous Fascia:** Located in between layers of deep visceral Fascia made of loose connective tissue that covers and supports viscera and attached to the internal body wall.

The three Components are continuous and attach muscle to the periostium of the bone.

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**Muscle fibers and the fascia**

Breast anatomy

**COOPERS LIGAMENT**: Strands of fascia found throughout the breast which end at the skin
- Helps give breast its shape and strength

- **INFRAMAMMARY FOLD**: (Wikipedia) Not mentioned in breast anatomy books / BUT recognized by plastic surgeons
  - The line where the breast and chest meet, immediately under the breast
  - Composed of collagen and condensation of superficial fascia.
  - Helps to shape the breast and binds to the pectoral fascia.
IT MAKES SENSE

Since Fascia is everywhere and a main support, shape, movement and a pathway for blood, nerves. Scaring of the tissue through surgery or injury affects the fascia.

FIBROBLST WITHIN THE SYSTEM PRODUCE SCAR TISSUE

Myofascial Release stretches the elastin and changes the viscosity of the gel substance to increase glide of the tissue.

With that and understanding it is a perfect place to start when working with post breast cancer surgery issues.

 MANUAL LYMPHATIC DRAINAGE

Vodder MLD for Mastectomy: Reduce Edema, Fibrosis, relieve tension and pain

Lymph System promotes movement of lymphatic fluids to nodes, trunk ducts.

Facilities removal of metabolic waste, bacteria, foreign substances.

Proven to relieve pain of fractures, sprains, tendonitis, bruises, lymphedema, cosmetic surgery, and scars.

Lymph has no valves to prevent back flow
Breast lymph pathway

VODDER METHOD OF LYMPHATIC DRAINAGE

Light pressure repetitive movement

Massage Techniques
Stationary circles
Rotary Circles
Pumping
Scoop

Do not slide over skin
5mm rhythmic movements
Slow rhythmic movements
20/30 minutes
Right lymphatic duct clears upper quadrant only
Left lymphatic drains right arms/legs and entire left side of body

TYPES OF SURGERIES

- Lumpectomy
- Mastectomy
- Skin Sparing Mastectomy
- Grafting
- Tramflaps/ With or without blood supply
  - Lymph Node Removal
  - Implants / Expanders

Types of Tramflaps
- Stomach
- Latissimus Dorsi
- Tug Flap: Gluteal & Thigh
**BREAST RECONSTRUCTION SURGERY**

- **TRAM FREE FLAP:** Involves the deep epigastric blood vessels, part of the rectus abdominus muscle is used along with the skin and fat of the abdomen to create a breast. This will cause some abdominal weakness.

- **TRAM FLAP:** The rectus abdominus muscle is cut at the pubic insertion and tunneled under the upper abdominal skin. A vascular so the tissue may become hard and necrotic from loss of blood supply.

- **DIEP FLAP:** Deep Inferior epigastric perforator artery & vein are taken from the bottom of the rectus abdominus without removing the muscle and attached to the chest wall blood vessels to provide a blood supply and the abdominal tissue is used to make a breast. Less pain.

- **SIEA FLAP:** Superior inferior epigastric blood vessels are used without incisions to muscles or deep incisions in abdomen and the abdominal tissue is used to create a breast. Not all patient’s are candidates to this surgery because these vessels are small, or if they have had a C section or hysterectomy.
Breast Reconstruction Surgery

- Alloderm: Derived from skin donated from cadavers.

Areas of Consideration in Lymph Removal Surgery

- Pectoral muscle
- Latissimus Dorsi
- Axillary Vein
- Large Thoracic Nerve /inserts in Serratus
- Thoraco Dorsi Nerve / Innervates Latissamus Dorsi
- Intercostal Brachial Nerve / Arm and Axilla
- Lateral Pectoral Nerve / Innervates Pectoral Muscle

WHAT IS SCAR TISSUE?

Scar tissue is a form of connective tissue.

Fibroblast generate collagen for tissue regeneration.

Scar tissue can attach to muscle fibers, prevent sliding, causing mobility issues.

Adheres to nerves and blocks blood flow, causing pain.
**TYPES OF SCAR TISSUE**

- **AXILLARY WEB SYNDROME OR CORDING:**
  Traumatized hardened connective tissue near bundles of blood vessels, nerves and lymph nodes. Generally travels down the arm, axillary region and pectoral area. Causes chronic pain and immobility.

- **ADHESIONS:** Scar tissue that binds to parts of other organs or muscles. Cording, post tram-flap, ports, & drainage tubes. Can cause obstructions/mobility loss & chronic pain.

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Types of Scar Tissue

- ATROPHIC SCAR: Sunken down into the skin where muscle is removed. Acne Scars.

- CONTRACTURE: Scar tissue pulls the skin toward the injury site causing cramping, pinching and chronic pain.

Types of Scar Tissue

RADIATION SCARS AND BURNS: Damage blood supply to normal skin causes hardening of tissue, discoloration change in color of skin redness, or brownish necrotic looking tissue.
TYPES OF SCAR TISSUE

- **DRAINAGE TUBE and PORT SCARS**: The insertion and removal of drainage tube and ports cause twisting of fascia.

- **Seromas**: A collection of serous fluid under the skin post surgery in empty space created by tissue removal.

- **Keloids**: Elevated red or dark scar tissue that can grow larger than the wound.
Types of Scar Tissue

- **Hypertrophic Scar**: Red or purple coloring slightly raised from the skin but flattens and fades in time.

Physical Trauma Post Surgery

- Fatigue
- Lymphedema
- Insomnia
- Weakness
- Mobility
- Chronic Pain
- Tightness in the chest and difficulty breathing
- Infections
- Radiation Burns
- Axillary Web Syndrome
Contra Indications

- Skin burns from radiation
- Open incisions  ALWAYS PROTECT NEW INCISIONS
- Leakage of the areola
- No heat applied to radiated patients
- Separating tissue/ Petechiae
- Sores/Blisters
- Bruising
- Inflammation/Heat in tissue (dark red color of tissue)

EMOTIONAL TRAUMA POST SURGERY

- Fear
- Sadness
- Anger
- Withdrawn
- Protectiveness
- Shyness