Research - History

Mid 1800's
Massage became popular as a medical intervention. Peter Hendrick Ling, Johann Georg Mezger and their pupils Kamenetz (1976). Physicians performed initial research on the effects of massage in the Victorian era.

1880	Jacobi & White
1889	Edgecombe & Bain
1894-1895	Brunten & Tunicliff
1894	Mitchell

It focused on the physiological effects of massage on bodily functions including blood and lymphatic flow, and muscle function. These tests continued till early 1950's.

1922	Carrier
1939	Drinker
1945	Pemberton
1949	Wakim

Studies were mostly descriptive in nature and lacking in true experimental design and tests of statistical significance. Much of what is researched today is based on these early studies with a healthy dose of clinical observation and belief.

Massage has a plausible biological basis. Studies that identify and test potential mechanisms by which massage produces its effects are also important. Because massage clearly has significant effects it offers a fertile field for investigating body – mind interactions. The need for the scientific community to quantify what mothers have known for eons gave rise to the New York Longitudinal Study (NYLS) begun in 1950's and continued into the 80's as a means of examining infant personality characteristics.

Alexander Thomas and Stella Chess (1977) conducted the study to measure activity level rhythmicity, approach/withdrawal, adaptability, threshold of responsiveness, mood, intensity of reactions, distractability and persistence. Three infant types were derived, The easy child, The difficult child, and the slow to warm up child. (Schiamburg 1988, p277).

References

1. Massage Therapy, - The Evidence for Practice by Grant Jewel Rich P37 Mosby Publishers.

(Recent studies suggest that massage is quite safe for medically stable preterms. (p139)
1990 Tribotti found that during the first session Gentle Human Touch (GHT) decreased arterial oxygen saturation and increased respiratory regularity in preterms GA 32-35 weeks.

A second treatment failed to disturb oxygen levels and continued to promote respiratory regularity. (p143) 9 day protocol, " GHT does not promote immediate physiological instability in very young pre-term infants")

2. Child and Adolescent Development, by Lawrence B Schiamburg 1988. Macmillan Publishing, New York.