

Support Care Cancer. 2011 Sep;19(9):1473-6. Epub 2011 Jul 16.,
PubMed Id Cunningham JE, Kelechi T, Sterba K, Barthelemy N, Falkowski P, Chin SH "Case report of a patient with
chemotherapy-induced peripheral neuropathy treated with manual therapy (massage)." *Support Care Cancer*, 2011
Sep. 19p. 1473-6
PubMed Id: 21766161
PubMed Central Id:
DOI:10.1007/s00520-011-1231-8

Case report of a patient with chemotherapy-induced peripheral neuropathy treated with manual therapy (massage)

PURPOSE: Chemotherapy-induced peripheral neuropathy (CIPN) is a common, miserable, potentially severe, and often dose-limiting side effect of several first and second-line anti-cancer agents with little in the way of effective, acceptable treatment. Although mechanisms of damage differ, manual therapy (therapeutic massage) has effectively reduced symptoms and improved quality of life in patients with diabetic peripheral neuropathy.

METHODS: Here, we describe application of manual therapy (techniques of effleurage and petrissage) to the extremities in a patient with grade 2 CIPN subsequent to prior treatment with docetaxel and cisplatin for stage III esophageal adenocarcinoma. Superficial cutaneous temperature was monitored using infrared thermistry as proxy for microvascular blood flow.

RESULTS: By the end of the course of manual therapy without any change in medications, CIPN symptoms were greatly reduced to grade 1, with corresponding improvement in quality of life. Improvements in superficial temperature were observed in fingers and toes.

CONCLUSIONS: Manual therapy was associated with almost complete resolution of the tingling and numbness and pain of CIPN in this patient. Concurrently increased superficial temperature suggests improvements in CIPN symptoms

may have involved changes in blood circulation. To our knowledge, this is the first report of using manual therapy for amelioration of CIPN.
