

Broadening our Member Base

by Joel Morrell

In light of the Government recognition of qualifications from Registered Training Organisations (RTO) across Australia, your Executive has resolved on the following changes to admission for membership of AMT.

The following courses will now be recognised at General Level:

- HLT40302 Certificate IV in Massage
- HLT40102 Certificate IV in Traditional Chinese Medicine Remedial Massage (An Mo Tui Na)
- HLT40202 Certificate IV in Shiatsu

The following courses will now be recognised at Senior Level One

- HLT50302 Diploma of Remedial Massage
- HLT50102 Diploma of Traditional Chinese Medicine Remedial Massage (An Mo Tui Na)

- HLT50202 Diploma of Shiatsu and Oriental Therapies.

Any General Level members who have completed the above diplomas are eligible to apply for an upgrade to Senior Level One.

The list of RTOs offering these courses includes training providers who specialise in Distance Education: it is now possible to attain a government-accredited massage therapy qualification via distance learning only. While this innovation meets the government's policy directive of access and equity, it will necessitate a clear distinction between admission for membership of AMT and endorsement for provider recognition with Health Funds.

AMT has entered into urgent negotiations with the Funds to confirm their precise requirements. Currently, we are faced with some 41 funds that have at least nine variations in

eligibility for providers of massage therapy.

AMT will also be maintaining our existing accreditation scheme, especially for Centres of Excellence that continue to provide training to a level in excess of the government standard minima.

We are also reviewing the status of those NSW TAFE Graduates who attained Associate Diploma of Health Science (Massage Therapy) 6343 or 4301 or Diploma of Health Science (Massage Therapy) 4373. Graduates who have completed face-to-face training with a supervised clinic component and were admitted to AMT at Senior Level One will be invited to upgrade to Senior Level Two.

These changes will allow a broader base of membership and also provide a long overdue path forward for our General Level Chinese Massage therapists. It also recognises the multi-disciplinary nature of massage.

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Head Office Update

by Melanie Elsey

Around 10% of the AMT membership voted in our plebiscite for a change of logo. Two of the proposed designs emerged as clear leaders but, sadly, member consensus was not strong enough for the Executive to proceed with either of these. This left the Committee somewhat between the devil and the deep blue sea – having determined that the logo needed a face lift to reflect our new name, the proposed designs failed to ignite the necessary support and passion of the membership.

To expedite the process of establishing our new national identity, the committee settled on a compromise: modify and modernise our existing logo. In other words, strengthen our core identity but remove the excess baggage with a spot of liposuction! The result is a leaner version of the old logo that allows us to have the best of both worlds: tradition and evolution. We hope you like the result.

We will be asking members to ratify the new design at our Annual General Meeting in October. If you are unable to attend the AGM please fill out

the proxy voting form inside this Journal.

The new logo is the centrepiece of a general image makeover for AMT. You will start to see the fruits of this over the coming months in all AMT correspondence. New stationery has been printed, the web site revamped and we have a marketing strategy in place to promote AMT-accredited therapists to the general public. All members will receive a new membership certificate on renewal over the next 12 months. We will also send out a matching Code of Ethics at the same time.

We anticipate a long changeover period to this new image so you have plenty of time to use any stationery that has been printed with the old logo. Receipt books can still be used and we will shortly print new ones.

If you need a high-resolution jpeg of the new logo for the purpose of preparing marketing material, please email your request to Head Office.

Staffing

I would like to welcome Micah Nolan to AMT. Micah joined us early in June - some of you would already have received phone

calls from her regarding overdue insurance and/or first aid. Many members forget to send us this information and this can affect your provider status with health funds. These courtesy reminder calls are part of an initiative to improve member services.

Micah is still in training so please be patient: she makes every attempt to answer the many and varied queries from members and potential members. If you have difficulty getting through to Head Office, please note that there is only one phone line and this is constantly in use. We usually reply to messages within a day.

Renewals

The workload in the office continues to be quite heavy as we process new membership applications and renewals. Part of the renewal process is to update your CEUs. Please help by completing the CEU form and sending copies of all relevant certificates. And keep a copy for your own records.

You must complete 100 CEUs every year to be endorsed with the health funds so do let us know what you have been up to!

Newsletter question - September edition

Who is about to take over as Regional Leader of ACT?

Please write your answer in the space provided on your CEU record sheet and retain it until you submit the form with your annual renewal. Blank CEU forms can be downloaded from:

http://www.amt-ltd.org.au/index.php?Page=Members_CEU_1.php

2005 Conference

The office will continue to get busier as we gear up for the Conference. For those of you who have not booked yet, get your registration forms in now! Some workshops are already full and the rest are filling up fast.

The pre-conference workshops are already fully booked.

We are busy finalising arrangements with the venue, following up trade exhibitors and sourcing samples for the conference satchels.

Health Funds

AMT has negotiated automatic endorsement for eligible members with 41 Health Funds. We are currently seeking confirmation of the latest Health Fund requirements and will have an update for you as soon as we hear back. In the meantime current arrangements stand.

For more information on Health Fund eligibility go to our website or check the Health Fund table on page 18 of this Journal.

TAFE facilities upgraded

Charles Zammit and I recently attended the official opening of the new Community Services and Health Teaching Facility at Meadowbank TAFE. The new Student Clinic is impressive, with improved access for all members of the community who attend the clinic for student massage at reduced rates.

I look forward to seeing you all at the Annual Conference!

AMT ready for Health Fund Audit

by Joel Morrell

We are all aware that Massage Therapy is not a registered profession. As a result, Health Funds have been faced with the continuing nightmare of how to recognise qualified massage therapy providers.

The provider recognition requirements of the health funds vary wildly: the health fund table we publish in each issue of *In Good Hands* and on the AMT web site is testament to that!

However, one element has emerged as a common theme: continuing education.

How should continuing education be monitored? There are possibly over 10,000 people providing massage therapy in Australia. If AMT is typical, only two-thirds of these are interested in fund recognition.

Although AMT asks for CEU

confirmation and documentation with your membership renewal, some Associations only have an honour system in place: record your points and keep your records in case of auditing.

“AMT took the initiative and contacted ARHG to discuss our special distinctions as an Association ...”

The problem facing the health funds is the question of how to audit some five to ten thousand therapists or twenty Associations?

Australian Regional Health Group has taken the first step and announced the start of their audit of Associations.

AMT took the initiative and contacted ARHG to discuss our special distinctions as an

Association and suggest that we would be appropriate for an early audit to test their procedures.

The reasons for this are manifold: we have a 39-year history; we are about to present our 16th consecutive Annual Conference; and our Continuing Education Programme has run for 11 years with extensive documentation.

AHRG accepted our offer and Karen Taylor will be visiting us for the audit process on Thursday 8 September.

The fact that we are so well placed to volunteer as first cab off the rank is vindication of our CEU system and record-keeping.

We hope this audit will mark a first step in closer cooperation with all the Health Funds to maintain and consolidate our track record of member support.

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News from the Regions

ACT by Alan Ford

The ACT has again been busy over the winter months with workshops and regional meetings.

I attended a lecture at the ACT Legislative Assembly Meeting Room on Living with RSI and Overuse. Dr Jill Cook of Latrobe University presented the session. Over 150 paramedical and general practitioners were present.

Ain'e Tierney presented the full Mental Health First Aid course to 9 AMT members and 4 non-members during June and July.

Our regular bi-monthly meetings have also been well attended with an average of 18 to 20 members.

Our next regional meeting and workshop is scheduled for Sunday 25 September at Eastlakes football club. Our guest presenter will be Tess Graham. Tess is a physiotherapist who has dedicated her entire practice to the Buteyko breathing method. There will also be a practical lesson in Yogalates by Libby Elm. (I can hardly wait for these two!).

"Many thanks to those members who remain active and enthusiastic about AMT. Without you there would not be a strong and progressive presence in the ACT."



The newly-reformed Illawarra Branch

This is my final report as region representative - I have handed over the reins to Rob Cowie. Many thanks to those members who remain active and enthusiastic about AMT. Without you there would not be a strong and progressive presence in the ACT.

See you at the Annual Conference!

Illawarra by Antony Lamb

The Illawarra regional branch has re-formed! We held our first meeting in May with 15 members present and were fortunate to have Joel Morrell join us. He provided valuable background and insight into the history of the Illawarra branch.

The branch meets on the 4th Tuesday of the month at 6.30pm. Meetings on odd numbered months are structured and involve an educational component. The next meeting will be on 27 September.

Meetings on even numbered months consist of an informal discussion group. This is an ideal opportunity to socialise, network, workshop difficult client presentations and swap techniques.

All Massage Therapists, either practising or in training, are welcome to attend and participate in all our meetings.

Mackay by Val Jenkins

Twenty members were present at our third meeting for the year including a new member, Annalise, from the Gold Coast. After the meeting, Diane Sant gave an excellent demonstration of Lomi Lomi massage. Claire Kemp was the lucky recipient.

People sometimes comment that a 'small' city like Mackay seems to have a disproportionate number of therapists! Certainly, my School has enjoyed a full intake in the past years and almost all graduates have remained in the

industry. Mackay is a 'boom' town and is now one of the largest centres on the Queensland coast.

Most of this expansion is driven by coal in the hinterland feeding those voracious Chinese steel mills (10 new mines in the last year alone!). Mining is extremely arduous and many of our clients are from the industry. A number of the mines actually pay for massage therapy treatments - a civilised and enlightened way of acknowledging their workers' toil!

Mackay is also the hub for the Whitsundays so many of our graduates start their careers working in the resorts.

Our Branch AGM will be held at the Blue Gecko restaurant on Nebo Road on Friday 18 November. A sumptuous seafood dinner will be served. I am looking forward to seeing you all there.

Mid North Coast by Michelle Reyes

Our branch meets every two months on the third Saturday of the month. We find these meetings help to counter the sense of isolation that comes from working, not only remotely, but also in an occupation dominated by sole traders.

To review 2005 to date ...

In January we had a presentation from one of our very own members, Ianthe Paterson! She spoke about the China Study Tour 2004, a 2-week Tui Na Chinese Massage intensive hosted by The China Academy of Traditional Chinese Medicine. Ianthe demonstrated the 14 techniques used in Tui Na Massage and showed us a head, neck and shoulder massage.



Mid North Coast members

Back: Margaret Whitbread, Corrina Vukovich, Michelle Reyes, Brian Jones & Mario Pace **Front:** Kerrie Mansfield, Ianthe Paterson & Jan Crombie

In February we volunteered our services for the Port Macquarie Triathlon, in conjunction with TAFE and Adult Education students. The Massage Therapy tent was a great success due to the organisational skills of Jan and Bob Crombie. They had it ticking over like a Swiss clock! The athletes were especially grateful for their 10-minute leg and back massage.

"We find these meetings help to counter the sense of isolation that comes from working, not only remotely, but also in an occupation dominated by sole traders."

Thanks to Jan and Bob for their hard work in making this event run so smoothly.

In March our Chairperson, Jan Crombie, gave an educational talk on the Endocrine System. We identified each gland and the effects hormones have on the body. This was great revision for us.

In May John Strangherlin, a local physiotherapist, demonstrated strapping for sporting injuries.

In July, Dr Kimberley Ivory from the Skin Cancer Clinic gave an excellent PowerPoint presentation on the subject of skin cancer awareness. She showed us pictures and described the differences between benign moles and melanoma.

Our next meeting is 17 September. This will be an AGM combined with a talk by Michael Maher on Health and Fitness and how to refer clients.

Editor's note: shortly after compiling this report, Michelle gave birth to a healthy baby boy on 2 August. His name is Josiah.

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Confusion not controversy?

by Diane Allison

In the June issue of In Good Hands, we published a case history by Beate Karbstein entitled To Rice or Not to Rice: A Controversial Yet Effective Treatment for Muscle Spasm.

Below we publish a response from Diane Allison, Head Teacher of Massage Therapy at Meadowbank TAFE.

This issue of the AMT Journal also contains Part 2 of Beate's article on muscle spasm.

The article "To Rice or not to Rice" is confused due to the lack of clinical definition of the conditions mentioned. The article does not distinguish between the initial injury and the secondary muscle spasm described (if any). Each of these aspects needs to be dealt with separately.

A muscle spasm can be defined as:

an involuntary contraction of a muscle as a protective response to injury¹

Muscle spasm must be differentiated from muscle hypertonicity, which is not a protective mechanism.

The symptoms described in the article are more consistent with those of an intermuscular haematoma, not muscle spasm or the more serious intramuscular haematoma as suggested.

In an intermuscular haematoma,

bleeding occurs between muscles when the muscle sheath (fascia) and its adjacent blood vessels are damaged. An initial increase in pressure within the fascia causes the blood to spread quickly, resulting in a fall in pressure. Under the influence of gravity, blood moves through the fascia causing bruising and swelling to occur at some distance from the damaged area 24 to 48 hours after the injury. The swelling is temporary and muscle function returns rapidly.

The treatment described in the article, far from being controversial, is very close to that recommended for an intermuscular haematoma, namely:

"After initial acute treatment (ie RICE) intermuscular haematomas should be managed by the following measures:

- support with an elastic bandage
- apply heat locally. Contrast treatment using heat and cold may sometimes be of value
- perform active muscle exercises which adhere to specific principles (ie general rehabilitation principles)"²

This appears to be the treatment suggested in the article, with the addition of "flat hand" strokes which would help spread the blood through the fascia and reduce swelling, not unlike the effect of an elastic bandage. Lymphatic drainage techniques would have a similar effect. I am sure such techniques have been used for this purpose by many therapists.

In the case described, the reduced movement and pain may have been the direct result of intermuscular swelling. There may or may not have been any muscle spasm associated with the injury.

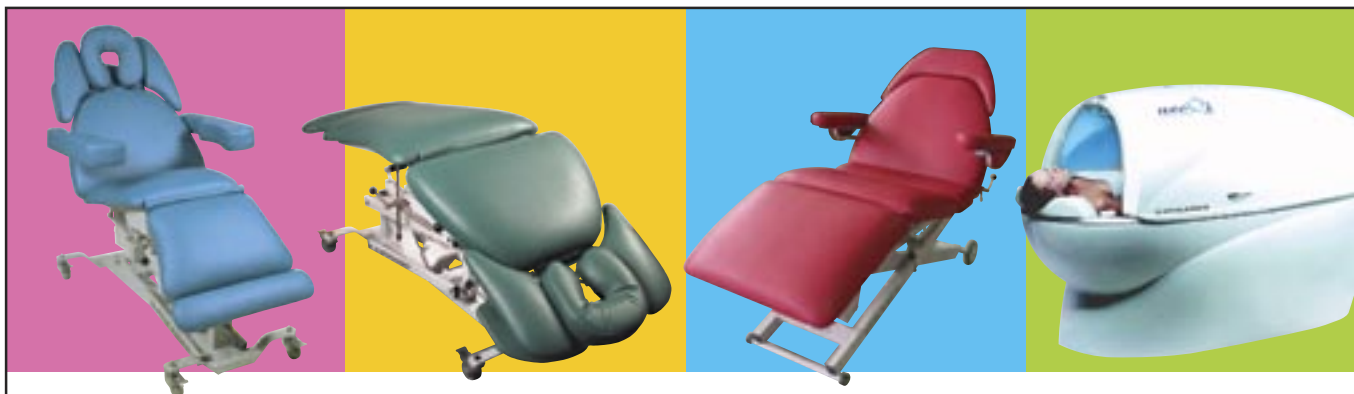
More worrying is the assertion "My prime concern as a remedial massage therapist is to eliminate spasm". If, as defined, a muscle spasm is protective then it is a response by the body to prevent further injury to an area. Therefore, a massage therapist must always ask "what is the risk that further damage will occur if I release this spasm?" before proceeding with treatment.

In the case of a muscle tear with associated muscle spasm, what would be the effect of releasing the muscle spasm before sufficient healing has occurred in the injured tissue? The increased load and tension on the injured tissue may cause more fibres to tear and more bleeding to occur. Therefore, releasing the muscle spasm is probably not a good idea.

When it is determined that releasing the spasm will **not** aggravate the injury that it is protecting, heat and massage are standard treatments to apply – as the article suggests.

References

1. Thompson, Diana L. *Hands Heal: Documentation for Massage Therapy*, 1993, p29.
2. Peterson, L & Renstrom, P *Sports Injuries: Their prevention and treatment*, 1998, p33.



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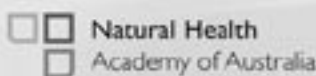
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To RICE or not to RICE?

A controversial yet effective treatment for muscle spasm, Part 2

by Beate Karbstein

In my previous article I argued that ice and pressure bandage treatments are not sensible or logical treatments for muscle spasm. When a muscle is in spasm, it is so hard that the blood supply is either extremely limited or completely blocked off. As we know from our A & P studies, muscles need blood to supply us with fluid, nourishment and oxygen. Without this they simply cannot function and would atrophy over time.

What does ice do? It restricts the blood vessels. But being in spasm, the muscle is already restricting the blood supply. As massage therapists it is our duty to eliminate the spasm and, to accomplish this, we would need to apply heat to dilate the blood vessels and enhance the return of normal blood flow.

Let me share two more cases where my treatments have released spasm immediately.

Case 2

One of my clients, a 36-year-old female musician, had a severe accident in March 1999: she fell down stairs and was in extreme pain. She had feeling in her extremities and was able to move them but could not move her back. Fortunately, I was able to treat her within 2 hours of the accident. Her injuries were so severe that her husband and I had to carry her into the treatment room and lay her on the massage

table.

I am trained to assess and correct structural deviations (Onsen Technique) but, because it involves quite a bit of movement on the part of the client, I was not able to use this form of assessment until the spasm and pain were gone.

However, with the client in the prone position, I was able to detect total muscle spasm of the right sacrospinalis, internal and external obliques, gluteus medius and quadratus lumborum. These spasms were not only palpable but also visible: there was a large, hard mass in the right lumbar and upper buttock areas, and the right ilium was high.

“Her injuries were so severe that her husband and I had to carry her into the treatment room and lay her on the massage table.”

I began the treatment with the application of heat over the injury (in the form of infrared light) while I applied light, flat-handed stroking.

It took approximately 30 to 45 minutes of stroking and heat application before the spasm and most of the pain had disappeared and the ilium had leveled out.

I was now able to assess the client for additional structural deviations and correct these using Muscle Energy Technique (Onsen). I followed this with deep tissue massage over the whole back and buttock, using oil enriched with Arnica (for bruising), and Rosemary and Lavender (for pain).

After approximately two hours the client walked out of the clinic with only a small amount of pain from the impact of the fall in the right gluteus medius muscle. This area developed some bruising but settled down over the next few days. I recommended a daily hot Epsom salts bath (with at least 1 kg of salts in the bath) and frequent heat application in the form of a hot water bottle.

I rang my client the next day, and she confirmed that, apart from the light bruising and pain in her right gluteus medius, she could move without limitation. She did not need another treatment!

Case 3

One of my other clients, a 38-year-old tiler, had treatments for lumbar pain on a semi-regular basis. One Sunday morning, his wife rang and asked me to come over to their house urgently to assist my client.

When I arrived, my client was doubling over his bed totally unable to move. His exact words were “Please help me, Beate, I’m dying!”

To take pressure off his back

I helped him into a kneeling position with his arms resting on his bed. There was an immediate improvement in pain levels due to this repositioning.

On examination there was a huge spasm in his left lumbar. I applied heat with my portable infrared lamp for about fifteen minutes, and gentle stroking with my flat hand for half an hour. This was followed by ultrasound for five minutes.

By this stage the spasm had disappeared and the client was able to move.

I made some assessments and corrections using Onsen Technique, which I followed with deep tissue massage to the whole back and buttock, again using oil enriched with Arnica for bruising, and Rosemary and Lavender for pain.

"I have cancelled the funeral"

By the end of the treatment my client was totally pain free and could move without limitations. Following my usual protocol, I recommended a hot Epsom salts bath and constant heat

application with a hot water bottle.

The next day I rang to follow up on my client's progress. His wife told me that he was doing fine. "I have cancelled the funeral" she quipped.

Now, I am not suggesting that every massage therapist should apply these methods, nor do I claim that this method will work every time. Nor am I trying to rewrite the procedures for first aid. But I hope these case histories will give some food for thought to my fellow practitioners!



17 - 20 November 2005

Volunteers required to help at the AMT stall.

We will be promoting AMT members to the general public.

Work a shift for AMT and then view the rest of the exhibition.

If you are interested in volunteering, please contact Geof Naughton at AMT Head Office on any Friday.

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Felice Compliano

The new AMT website turns 1!



by Rebecca Barnett

To the great astonishment of AMT's Information Technology Team, the new website has just celebrated its first birthday. Forget the balloons, chocolate cake and embarrassingly drunk cousin twice removed ... the AMT web site celebrated by taking more than 100 hits in a single day's traffic on August 7th.

This event was somewhat of a significant milestone for the site's progenitors who responded in the customary fashion for indulgent parents – by boasting to all our web developer friends about how much smarter our site is than theirs and enrolling it in virtual Suzuki violin classes. In the Ethernet, no one can hear you scream ...

The web site received 14,394 hits

in its first year. The average daily hits have stabilised to a consistent average of between 40 and 50, though the traffic is somewhat slower on the weekend for obvious reasons.

Obviously, we would like all members to acknowledge this hard work by dropping to the knees, genuflecting and chanting "We are not worthy".

We've had visitors from as far afield as Saudi Arabia and the Russian Federation. Somewhat surprisingly, China is second on the list of most frequent page views after Australia. Perhaps this statistic is witness to the rather

central importance of Massage Therapy in the Traditional Chinese Medicine paradigm.

Many of you will already have noticed that the website has undergone a spring clean and image makeover. The credit for this recent work goes to our in-house designer, Claudia Iacovella and web developer, Steve Vadla. They have done a brilliant job of enhancing the site's functionality with a funky new design and bold navigation buttons. I'm excited!

Maintaining the site and keeping the content fresh is a fairly hefty job for the AMT web team. Obviously, we would like all members to acknowledge this hard work by dropping to the knees, genuflecting and chanting "We are not worthy". But since this is possibly an unreasonable expectation, we would more than happily settle for a compromise: visit the site regularly so you are always up to date with the latest AMT news and current affairs. Go on. Do it now! And while you are there, you can check out the following innovations.

The AMT Forum

AMT recently completed a 6-month trial of a new format for the member Bulletin Board. We have now officially launched the new format and some of our keener members have already started posting to the official "AMT Forum".

We believe that the new Forum will become an excellent resource for AMT members. It is a great way to stay in touch with your

colleagues and share knowledge. It could prove especially valuable as a networking tool for remote and regional members or those working in isolation.

You can find the Forum at:

www.amt-ltd.org.au/forum/

CEUs for Forum participation

Members will receive 10 CEUs per year for registering on the Forum and reading the posts. You will need to note your Forum participation on your CEU record sheet so that Head Office can cross-check against the list of

registered board users. It pays to participate!

Free online classifieds

The AMT web classifieds have been running for a year now but seem to have been an under-utilised resource. Advertising in this section of the web site is free for AMT members. Yes, that's right – free! We'd throw in a set of steak knives but we're nervous they would end up in our backs.

To run an ad in the web classifieds, all you need to do is email, fax or post your advertising copy to AMT Head Office, including your AMT membership number.

Member news section

Regular visitors to the AMT web site will already be aware that the 'home' page of the site is the member news section. This page is updated around once a fortnight and functions as an adjunct to the kind of news you would normally access in this Journal. We use the space to broadcast up-to-the-minute items.

So, if you don't want to wait for the next *In Good Hands* to bring you AMT news, make the AMT web site your home page!

In Good Hands in your email

Would you like to receive your AMT Journal electronically?

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You can now receive your copy of the quarterly journal *In Good Hands* direct to your email box. We will send each edition hot off the desktop - faster than you can say "where's my snail mail?".

If you opt to receive the new e-Journal version of *In Good Hands*, we will not send you a hard copy. We will send a PDF document to you as an email attachment - same content as the paper version but faster delivery. So, you'll catch up on all the AMT gossip sooner than the rest and you'll have peace of mind knowing that one less old-growth forest tree had to be chopped to feed those voracious paper mills.

We encourage all conservation-minded members to "opt-in" for an electronic version of *In Good Hands*.

All you need to do is send an email to AMT Head Office and write "Electronic Journal" in the subject line. Please also include your membership number in the body of the email and send it to:

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Myofascial Pt I	Newcastle	Mon 12/9
Advanced Myo	Newcastle	Feb 06
Lymphatics-5 Mons	Charmhaven	Mon 8/8
Deep Tissue Muscle Therapy-6 wkends	Charmhaven	Sat/Sun 13&14/8
Lomi Lomi - 5 Tues	Charmhaven	Tues 20/9
Hot Stone	Newcastle	Tues 23/10
Hot Stone-3 wkends	Tamworth	5&6/11
Trigger Point Therapy	Newcastle	Oct TBA
Lower Limb Wshop	Newcastle	1 day 27/8
Pelvic Girdle Wshop	Charmhaven	1 day 11/9
Lower Limb Wshop	Tamworth	1 day 8/10
Shoulder Pain Wshop	Tamworth	1 day 9/10
Neck Pain Wshop	Newcastle	1 day 15/10
Neck Pain Wshop	Muswellbrook	1 day 22/10
Detox Massage	Charmhaven	2 days 23/10
Pelvic Girdle Wshop	Muswellbrook	1 day 19/11
CERTIFICATE IV MASSAGE (HLT40302)		
Full Time-Charmhaven, New Lambton, Woy Woy start 2/8		

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Khmer Massage

Healing the scars of war

by Rebecca Barnett

In the burgeoning Cambodian town of Siem Reap all roads lead to Seeing Hands Massage (except, of course, the road that leads out of town but that's a whole other disaster).

It seems as if there's a signpost to Seeing Hands on every street corner. Given this extensive signage I figure it must be a good landmark to navigate by, so I start using it as my South-east Asian Greenwich, England. For me, every other part of town is defined by its positional relationship to the now infamous - at least in my imagination - massage institution.

But something is wrong. Very wrong. The ubiquitous signposting has lulled me into a false sense of security. A Kafkaesque comedy of errors unfolds as I find myself suddenly and unnervingly in the wrong part of town. The dust on the streets is even dustier here and there is no artificial tourist sheen to mitigate or gild the poverty. I buy a local ice-cream from a surprised Cambodian street peddler and, as I contemplatively savour the coconut-y goodness of said confection, it finally dawns on me ...

There are many Seeing Hands in Siem Reap! I was navigating by a franchise: an Escher landscape of dark alleyways and bright market stalls that weaves elusively from one tantalising signpost to the next with no prospect of a golden arch looming expansively on the smoky horizon of a 6-lane dual

carriageway. (That should just about use up my quota of adverbs for this article.)

Blind Massage

I first read about Seeing Hands in a Cambodian guidebook and I was determined to make it a part of my itinerary in Siem Reap. The guidebook waxed lyrical about a massage therapy clinic run by blind massage therapists. The clinic was an initiative of the Association of the Blind in Cambodia (ABC) - an ingenious way to provide an opportunity for visually impaired Cambodians to earn a living and be a part of the community. This is especially important in this country: it has been estimated that there are 132,000 blind or visually impaired Cambodians.

Cambodia has more mines than children – around two mines for every child.

The first Seeing Hands was such a success that others sprang up, not only in Siem Reap itself but also in Phnom Penh and the coastal town of Sihanoukville. The franchise has been riding the crest of a huge wave of tourism, which has increased exponentially over the last 5 years. Anywhere there are tourists, you'll find Seeing Hands mushrooming its way onto ever more signposts!

Now, the ABC travels the countryside looking for new recruits to train in massage therapy. At last count, there were

4 Seeing Hands clinics in Siem Reap, though there may be more - I never quite figured it out.

Peace and prosperity have brought a sense of purpose and hope to the lives of many Cambodians.

And it's about bloody time! The modern history of Cambodia makes for grim reading. Somewhere between French colonialism, the Vietnam War, the US, Russia, Pol Pot and the Khmer Rouge the country has been royally screwed over. So, although the pervasive mood of the country is energetically optimistic, the heady cocktail of imperialism, despotism and genocide has engendered the mother of all hangovers.

Land mines

The longest shadow is cast by the land mines. Cambodia has more mines than children - around two mines for every child. As a result, the country has the dubious honour of being a world-leader in amputation surgery. It also has one of the highest rates of physical disability of any country in the world.

While census data is sketchy, it is generally accepted that more than 40,000 Cambodians have suffered amputations as a result of mine injuries since 1979. That represents an average of nearly forty victims a week for a period of twenty years. The Cambodian Mine Action Centre estimates that there may still be as many as four to six million mines and unexploded ordinances.

The number of signs in Siem Reap pointing to Seeing Hands is dwarfed by those dotted throughout the countryside warning of unexploded land mines. And there are way too many people without the requisite number of limbs on the streets of Siem Reap. It's a confronting reality of daily life - the ever-present menace of disfigurement, dismemberment and disability.

Seeing Hands

Like the thousands of other tourists who flock to Siem Reap, my main reason for being there was to visit the ancient Khmer city of Angkor and its famous showpiece, Angkor Wat.

The scope and majesty of Angkor is almost impossible to articulate - deeply and ineffably moving. But drawing a direct line of antecedence from the astonishing and elaborate public works of the ancient Khmers to their more troubled and persecuted modern counterparts proved to be even more poignant.

Which brings me back to Seeing Hands ...

The entrance is a small, non-descript door in a dusty lane near Siem Reap's bustling central markets. This Seeing Hands practice consists of two simple rooms: the massage clinic and a small changing room at the back. There are 4 therapists working at 4 wooden tables that are lined up in a neat row like deckchairs on a luxury cruise liner. The lighting is muted: the place looks as if it is locked in a perpetual twilight.

I am ushered into the changing room and issued with a cotton tunic and pants and a bag to store my discarded clothes. When I emerge a few minutes later I am

a picture of sartorial elegance, modeling the latest in oversized FCUK pyjamas and a pink, moulded plastic shopping bag by Gucci.

I am led to a table and greet my therapist with a friendly handshake and a pointless nod. She is tiny ... smaller than me and I only just nudge 5 foot 2. The tables are very high and very wide. "Too high for me," I think to myself and quietly bless my fully adjustable, motorised table for the (n+1) time. I find myself wondering how my diminutive therapist can possibly give an effective treatment on such a patently un-ergonomic table.

"god that hurts but it's fantastic so please don't stop under any circumstances"

She motions me onto the table and somehow manages to indicate that I should lie prone. So far, not a single word has been exchanged. She speaks no English and I speak no Khmer. I am captivated by the prospect of receiving a treatment from a therapist who has 2 major barriers to communication and only the direct immediacy of touch to overcome them.

Happily, the language of groaning is universal. I quickly mastered the full range of internationally-recognised groans. It turns out there's a universal groan for every kind of pain and pleasure. There's the evergreen "god that hurts but it's fantastic so please don't stop under any circumstances" groan. And the useful "if you don't stop now I may involuntarily punch you" groan. And, of course, the "Meg Ryan memorial I'll have

what she's having" groan which, fortunately, comes with a lifetime warranty.

The treatment itself is shiatsu style and the mystery of the size of the table is soon revealed: my therapist spends a high proportion of the treatment on the table with me, using her full body weight to perform compressions, longitudinal frictions and various other "dispersal" techniques through my purpose-made pyjamas. Her hands are strong and she makes fantastic use of her limited body weight.

After a day spent ascending to the heavens in Angkor Wat, my calf muscles were exquisitely tender and I found myself wavering schizophrenically between pleasure and pain groans.

The hour flew by in the twinkling of a tapotement and I paid the princely sum of US \$5.00 for my treatment. I spent a few minutes repaying the experience by working the hands of my therapist and fervently wishing I knew the Khmer for "My hands get tired too!"

I walked out of the gloom and stumbled blindly into the sunlight of a late afternoon in Siem Reap.

Look mum, no hands

The evening before I was due to leave Cambodia, I discovered that a similar training programme has been instituted for land mine victims who have undergone amputations. They are trained to massage with their stumps! I was sorry that I missed out on what must be a unique experience but it gives me the perfect excuse for a return visit. In the meantime, I just pray they will call the successful franchise "No Hands Massage".



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If you are a qualified Onsen Therapist, please contact Jeff Murray:

jmu42264@hotmail.net.au

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Ph: 05 7799 2514

Jeff would like the following information for his database:

Therapist name

Name of Clinic

Clinic Address

Clinic Telephone

Other Contact Telephone

Email

Volume/s in which you are certified
(Vol I, II, III and / or IV)

Registration number if applicable

Photocopy of certificates

Once the database is set up Jeff would envisage sending a copy to all Onsen Therapists and to Onsen International in Canada for their records.

Thank you for your cooperation.

Health Fund Status

AMT has negotiated provider status with the Health Funds listed below. If you are up to date with insurance, first aid and CEUs there is no need to apply individually to each health fund: your name will be forwarded for automatic recognition as a provider. Please check the explanation of status levels to see which health funds recognise your level of membership.

Health Funds and Societies	Status
Queensland Country Health	A
Railway and Transport Hospital Fund	A
Reserve Bank Health Society	A
ACA Health Benefits Fund (ARHG)	B
Australian Regional Health Group	B
Cessnock & District Health Benefits Fund (ARHG)	B
Commonwealth Bank Health Society	B
Defence Health (ARHG)	B
Federation Health (ARHG)	B
GMHBA (ARHG)	B
Health Insurance Fund of WA (ARHG)	B
Latrobe Health Services (ARHG)	B
Lysaght Peoplecare (ARHG)	B
Manchester Unity	B
Mildura District Hospital Fund (ARHG)	B
NSW Teachers Federation Health Society (ARHG)	B
Phoenix Health Fund (ARHG)	B
St Luke's Medical & Hospital Benefits (ARHG)	B
Teachers Union Health (ARHG)	B
Transport Health (ARHG)	B
United Ancient Order of Druids (ARHG)	B
Westfund Health Fund (ARHG)	B
ANZ Health Insurance (HBA)	C
Australian Health Management Group	C
Geelong Medical Benefits Fund	C
HealthCover Direct (HBA)	C
National Mutual Health Fund	C
NIB	C
NRMA Health	C
Victorian WorkCover Authority	C
MBF	D
Medibank Private	E
Australian Unity	F
The following funds require members to contact them for a 'provider kit':	
Cardmember Health Insurance Plan (HBA) Ph: 1800 060 239	C
Gay & Lesbian Health Fund Ph: 1800 800 245	C
Government Employees Health Fund (AHMG) Ph: 1300 366 868	C
Grand United Friendly Society Ph: 1800 800 245	C
HBA (formerly AXA) Ph: 1800 060 239	C
HCF Ph: 02 9290 0163	C
Mutual Community (HBA) Ph: 1800 060 239	C
Super Health Plan Ph: 1800 624 570	C

Please check the AMT website for further information on specific Health Fund requirements: www.amt-ltd.org.au

Status Levels:

- A.** All AMT practitioner levels
- B.** All practitioner levels with:
 - One million dollars current insurance
 - Current Senior First Aid certificate
- C.** Senior Level One, Two or Three members with:
 - One million dollars current insurance
 - Current Senior First Aid certificate
- D.** Same criteria as for F below. Must send signed consent form to AMT with practice receipt(s). Please note: All other members please apply directly to MBF
- E.** Same criteria as for F below. Must complete an application form (available from AMT). Please note: some Senior Level One members may qualify upon AMT's assessment of their qualifications
- F.** Senior Level Two or Three members with:
 - One million dollars current insurance
 - Current Senior First Aid certificate.

To be eligible to remain on the above Health Fund lists you must:

1. Be financial and have a commitment to ongoing education (ie: an average of 100 CEUs per year)
2. Provide your clients with a formal receipt, either computer generated, or with rubber stamp or address label clearly indicating practitioner's name, AMT member number (eg: AMT 1-1234), practice address (no PO Box numbers) and phone number. Client's name, date of treatment, nature of treatment (ie: Remedial Massage), and particular health fund provider number may be handwritten.
3. Provide AMT Head Office with a practice address (or business address for mobile practitioners; no PO Boxes) - failure to supply these details to us will result in your name being removed from health fund listings.
4. Notify AMT HO of all relevant practice addresses.
5. Include a copy of one of your receipts (for each practice address) to Head Office with your next AMT membership renewal or correspondence. You should also ensure that Head Office has copies of your current Insurance and First Aid.

Calendar of Events

Courses accredited by AMT attract 5 CEUs per hour

Courses not accredited by AMT attract 1 CEU per hour

Please check dates and venues of workshops (using the contact numbers listed below)

September		CEUs
2-4	Onsen Muscle Therapy, Volume 3. Presented by Jeff Murray. Albury. Ph: 07 5599 2514	105
3-7	Myofascial Release 5. Presented by Paul Doney. Randwick. Ph: 1800 101 105	300
11	Biodynamic Craniosacral Therapy. Presented by Terry Collinson. Sydney. Ph: 02 9489 3348	35
11 & 18	mediBall. Presented by James Walsh. Newcastle. Ph: 02 4963 9555	70
10-11	Introduction to Daavid Therapy. Presented by Pierre Daavid. Melbourne. Ph: 02 4929 3751	50
16-19	Advanced Remedial Massage (Module 2). Presented by Mark Philip Deal Peridor Health Schools, Sydney. Ph: 02 9387 2319	160
16	Myofascial Therapy. Presented by James Walsh. Sydney. Ph: 02 4963 9555	35
18 & 25	mediBall. Presented by Paul Molinia and Penny Elliott. Sydney. Ph: 02 4963 9555	70
October		
7-9	Hawaiian Heartworks Lomi Lomi Massage. Presented by Nemara Hennigan and Andrea Lopez. Wyee Ph: 0413 275 485 or 0422 410 227	150
7-9	Onsen Muscle Therapy, Volume 1. Presented by Jeff Murray. Gold Coast. Ph: 07 5599 2514	105
8-9	Introduction to Daavid Therapy. Presented by Pierre Daavid. Sydney. Ph: 02 4929 3751	50
22-23	Introduction to Daavid Therapy. Presented by Pierre Daavid. Melbourne. Ph: 02 4929 3751	50
23 & 30	mediBall. Presented by Paul Molinia & Penny Elliott. Sydney. Ph: 02 4963 9555	70
29-30	Chi Acupressure Massage. Presented by Master Zhang Hao. Newcastle. Ph: 02 9899 9823	70
November		
3 & 6	FFT® Level 2. Presented by Ron Alexander. Sydney. Ph: 03 9376 3652	45
4-5	FFT® Level 1. Presented by Ron Alexander. Sydney. Ph: 03 9481 6724.	45
5, 6, 12, 13	Thai Massage. Presented by Tom Coyle. Cairns. Ph: 07 4032 1481	200
11-13	Myofascial Release 3. Presented by Michael Stanborough. Brisbane. Ph: 0417 736 752	80
11-13	Hawaiian Heartworks Lomi Lomi Massage. Presented by Nemara Hennigan and Andrea Lopez. Wyee Ph: 0413 275 485 or 0422 410 227	150
12-13	Introduction to Daavid Therapy. Presented by Pierre Daavid. Sydney. Ph: 02 4929 3751	50
18-21	Sports and Occupational Massage (Module 2). Presented by Mark Philip Deal Peridor Health Schools, Sydney. Ph: 02 9387 2319	160
25-27	Myofascial Release 3, Presented by Michael Stanborough. Sydney. Ph: 02 9558 9284	80
25-27	Onsen Muscle Therapy, Volume 3. Presented by Jeff Murray. Gold Coast. Ph: 07 5599 2514	105
26-27	Chi Acupressure Massage. Presented by Master Zhang Hao. Chi-Chinese Healing College, Burwood. Ph: 02 9899 9823	70
26-27	Introduction to Daavid Therapy. Presented by Pierre Daavid. Melbourne. Ph: 02 4929 3751	50
27	Myofascial Therapy. Presented by James Walsh. Sydney. Ph: 02 4963 9555	35

Please view the Calendar of Events on the AMT website for the complete 2005 listing: www.amt-ltd.org.au



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