London School of Massage

"Massage to a Higher level" ©

Level 3 Certificate in Thai Massage

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Mission Statement

*"To deliver the **best** training courses in a **fun** and **professional** environment through **highly passionate**, **caring** and **knowledgeable practitioners** who are experienced in their field"*

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About Your Lecturers

Bhavesh T. Joshi BSc. Ost Dip. TCM Acup. Ayurveda (Dip), NLP

Director & Principal

Bhavesh qualified as an Osteopath from the British School of Osteopathy and has been practising and lecturing for over 23 years. He is the Principal of the London School of Massage which was set up in 1994. He was the Clinical Director and a Senior lecturer at the College of Osteopaths (2000) as well as holding the post of Senior Lecturer (Applied Anatomy) and Clinical Supervisor at the London School of Osteopathy (1995 - 2000). He has also worked for the British School of Osteopathy as a "Demonstrator in Anatomy", lecturing to Osteopathic students at the Royal College of Surgeons.

He is a qualified Assessor and Internal Verifier for the various examination boards as well as attaining his teacher training qualifications.

Bhavesh is also a qualified NLP Practitioner, Traditional Chinese Acupuncturist and has trained in Ayurvedic treatments and massage techniques in Central and South India.

He is a gifted teacher who has a knack of making subjects easy and understandable as well as helping individuals realise their full potential. He has a life aim of setting up an Ashram in India to help feed and educate poor communities.

He teaches, and is involved with most of the courses including, Anatomy, Physiology & Holistic Massage, Sports Injuries & Massage, BTEC Diploma courses, Advanced Bodywork, Indian Head Massage and Ayurvedic Massage.

Louis Divine

Thai Yoga Massage, Table Thai, Indian Head Massage and On-Site Chair Massage

Louis is a professional, fully qualified massage teacher, therapist and consultant specialising in Thai Yoga Massage, Thai Foot Massage, Indian Head Massage and Deep Tissue Massage.

He's passionate about teaching and engages students with his confident, relaxed approach and broad knowledge. He first discovered therapeutic massage through his deep love of yoga after completing his yoga teacher training. He has a wide range of experience as a teacher and therapist and has trained for over 500 hours in Chang Mai (Nuad Bo Rarn Level I - 4), Amsterdam and London where he teaches several courses at the London School of Massage.
He also works with L'Oreal's Biolage range in New York as a consultant creating massage treatments and techniques for their hair stylists to use in salons around the world.

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- All the latest news for courses and events
- Industry news, articles and updates

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- Course updates and industry news

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Aim & Objectives

By the end of the course, you should be able to:

- Appreciate what is meant by “Thai Yoga Massage”
- Appreciate the importance of acupressure
- Understand the concept of energy lines (SEN) and how to work with them.
- Know how to treat sore and aching muscles
- Understand the art of combining acupressure and deep yoga like stretches and how these help maintain a healthy immune system, prevent illness, reduces stress and anxiety and help the lymphatic system cleanse itself.
- Carry out a given Thai Yoga Massage sequence
- Be capable of integrating Thai Yoga Massage techniques in your own massage routine

About Me & My Promise

Please share a little about yourself in the below paragraph.

My name is _____

About Me:

_____

_____

_____

_____

_____

My good points are:

_____

_____

_____

After the course I ***will*** (write down 3 goals you ***will*** achieve – college / clinic / outside):

1._____

2._____

3._____

My Promise to Myself

"I" promise that whilst "I" am on this course "I" will:

- ✓ Have **FUN**
- ✓ Participate in **ALL** class activities
- ✓ Work **CONSTANTLY** throughout the course and do at least 1 ½ hours of homework daily
- ✓ Stop cheating **MYSELF** and make no excuses in studying
- ✓ Get a **DISTINCTION** in my final result

Signed: _____ Date: _____

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Exam Details

The following section outlines the VTCT Exam components:

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VTCT Examinations Details

Anatomy, Physiology &Body Massage

The following units comprise this VTCT Level 3 QCF course

Mandatory Units	
UV30491	Monitor & Maintain Health & Safety Practice in the Salon
UV30468	Client Care & Communication in Beauty related industries
UV31203	Provide Thai Massage

The above units are examined through:

1. **Assignments – these will be emailed to you**
2. **Case Studies**
3. **Practical demonstrations**
4. **Written / Multiple choice exam**

Knowledge Assignment
Unit UV30491Monitor & Maintain Health & Safety Practice in the Salon

Outcome 1
Be able to carry out a risk assessment

b. State the reason for carrying out "Risk Assessments"?
c. Describe the procedure for carrying out a risk assessment.
d. Describe when risk assessments should be carried out.
e. Outline necessary actions to take following a risk assessment.

Knowledge Assignment
Unit UV30491Monitor & Maintain Health & Safety Practice in the Salon

Outcome 2
Be able to monitor the health & safety in the clinic

b. Outline the health & safety support that should be provided to staff.
c. Outline procedures for dealing with different types of security breaches.
d. Explain the need for insurance.

Knowledge Assignment
Unit UV30468:Client Care & Communication in Beauty related industries

Outcome 1
Be able to communicate and behave in a professional manner when dealing with clients.

f. Assess the advantages and disadvantages of different types of communication with clients.
g. Describe how to adapt methods of communication to suit the client and their needs.
h. Explain what is meant by the term "professionalism" within the beauty related industries.
i. Explain the importance of respecting a client's "personal space".
j. Explain the importance of providing clear recommendations to the client.

Outcome 2
Be able to manage client expectations

c. Evaluate client feedback.
d. Evaluate measures used to maintain client confidentiality.
e. Explain the importance of adapting retail sales techniques to meet client requirements.
g. describe how to resolve client complaints.

Knowledge Assignment
Unit UV31203:Provide Thai Massage

Outcome 1
Be able to Prepare for Thai Massage Treatments

f. Describe salon requirements for preparing yourself, the client and work area.

g. Describe the environmental conditions suitable for Thai massage treatments.

h. Describe different consultation techniques used to identify treatment objectives.

i. Describe how to select products, tools and equipment to suit client treatment needs.

j. Explain the contra-indications that prevent or restrict Thai massage.

k. Describe the historical and cultural background of Thai massage .

l. State the objectives of Thai massage treatments.

m. State the benefits derived from Thai massage treatments.

Outcome 2
Be able to Prepare for Thai Massage Treatments

h. Explain how to communicate and behave in a professional manner.

i. Describe health and safety working practices.

j. Explain the importance of positioning yourself and the client correctly throughout treatment.

k. Explain the importance of using products, tools, equipment and techniques to suit client treatment needs.

l. Describe how treatments can be adapted to suit client treatment needs.

m. State the contra-actions that may occur during and following Thai massage treatment and how to respond.

n. Explain the importance of completing the treatment to the satisfaction of the client.

o. Explain the importance of completing accurate treatment records.

p. Describe the methods of evaluating the effectiveness of the treatment.

q. Describe the aftercare advice that should be provided.

r. Describe the effects of Thai massage on the body.

s. Describe the uses of Thai massage techniques.

t. Describe legislation relating to the provision of Thai massage treatments.

VTCT Thai Massage Observational Sheet

Student name: _____

Unit UV30491Monitor & Maintain Health & Safety Practice in the Salon

	Criteria	1	2	3	4	5
	Outcome 1					
A	Carry out risk assessments and take necessary actions					
	Outcome 2					
A	Monitor and support the work of others to ensure compliance with health & safety requirements					

Unit UV30468:Client Care & Communication in Beauty related industries

	Criteria	1	2	3	4	5
	Outcome 1					
A	Behave in a professional manner within the workplace					
B	Use effective communication techniques when dealing with clients					
C	Adapt methods of communication to suit different situations and client needs					
D	Use effective consultation techniques to identify treatment objectives					
E	Provide clear recommendations to the client					
	Outcome 2					
A	Maintain client confidentiality in line with legislation					
B	Use retail sales techniques to meet client requirements					

Unit UV31203: Provide Thai Massage Treatments

	Criteria	1	2	3	4	5
	Outcome 1					
A	Prepare yourself, the client & work area for Thai Massage					
B	Use suitable consultation techniques to identify treatment objectives					
C	Advise the client on how to prepare for treatment					
D	Provide clear recommendations to the client					
E	Select products, tools and equipment to suit the client treatment needs					
	Criteria	**1**	**2**	**3**	**4**	**5**
	Outcome 2					
A	Communicate and behave in a professional manner					
B	Follow health & safety working practices					
C	Position yourself and client correctly throughout the treatment					
D	Use products, tools, equipment and techniques to suit the client treatment needs					
E	Complete the treatment to the satisfaction of the client needs					
F	Record and evaluate the results of the treatment					
G	Provide suitable aftercare					

	Thai Massage Techniques used (minimum of 8 appropriate positions)					
A	Palm Press					
B	Elbow Press					
C	Knee press					
D	Inverted Position					
E	Thumb Press					
F	Thai Fist					
G	Foot Press					
H	Sitting Position					
I	Finger Press/ Circles					
J	Thai Prayer Chop					
K	Gentle Rocking					
L	Deep Breathing					
M	Forearm Roll					
N	Heel Press					
O	Yoga Stretches					

	Thai Massage Positions used (minimum of 4 appropriate positions)					
A	Horse					
B	Thai Sitting					
C	Extended Thai					
D	Thai Lunge					
E	L-Shaped Lunge					
F	Open Thai Lunge					
G	Half kneeling					

	Thai Massage Types of Treatment					
A	Full Body					
B	Head / Scalp					
C	Neck					
D	Shoulders					
E	Arms/hand/fingers					
F	Abdomen					
G	Legs/feet/toes					
H	Back					
I	Marma Points					
J	Sen Lines					

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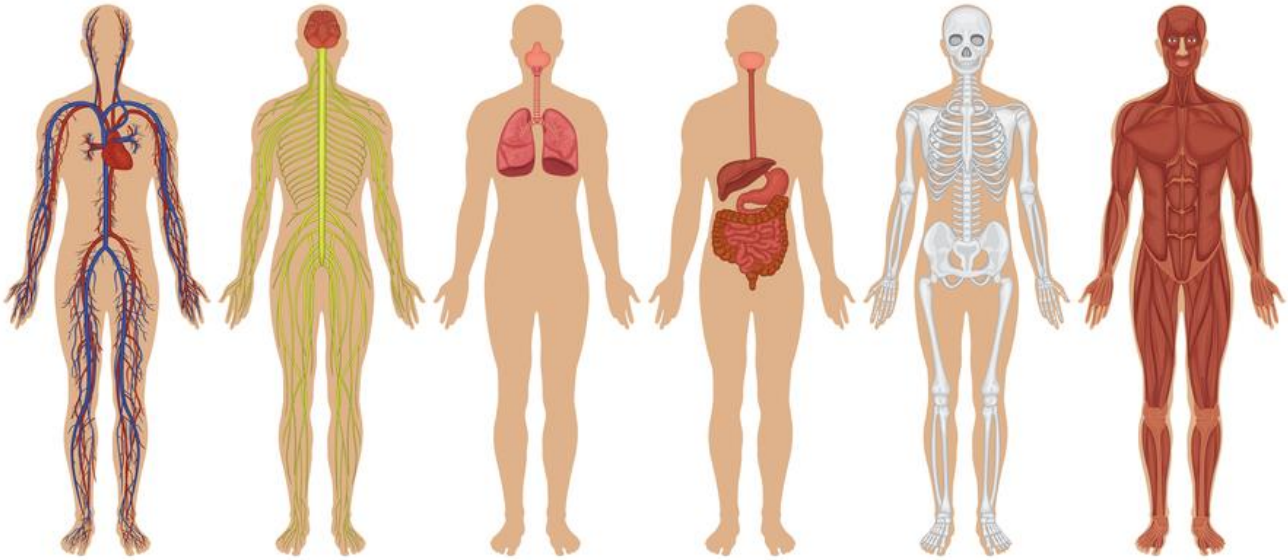
Anatomy & Physiology for Thai Massage



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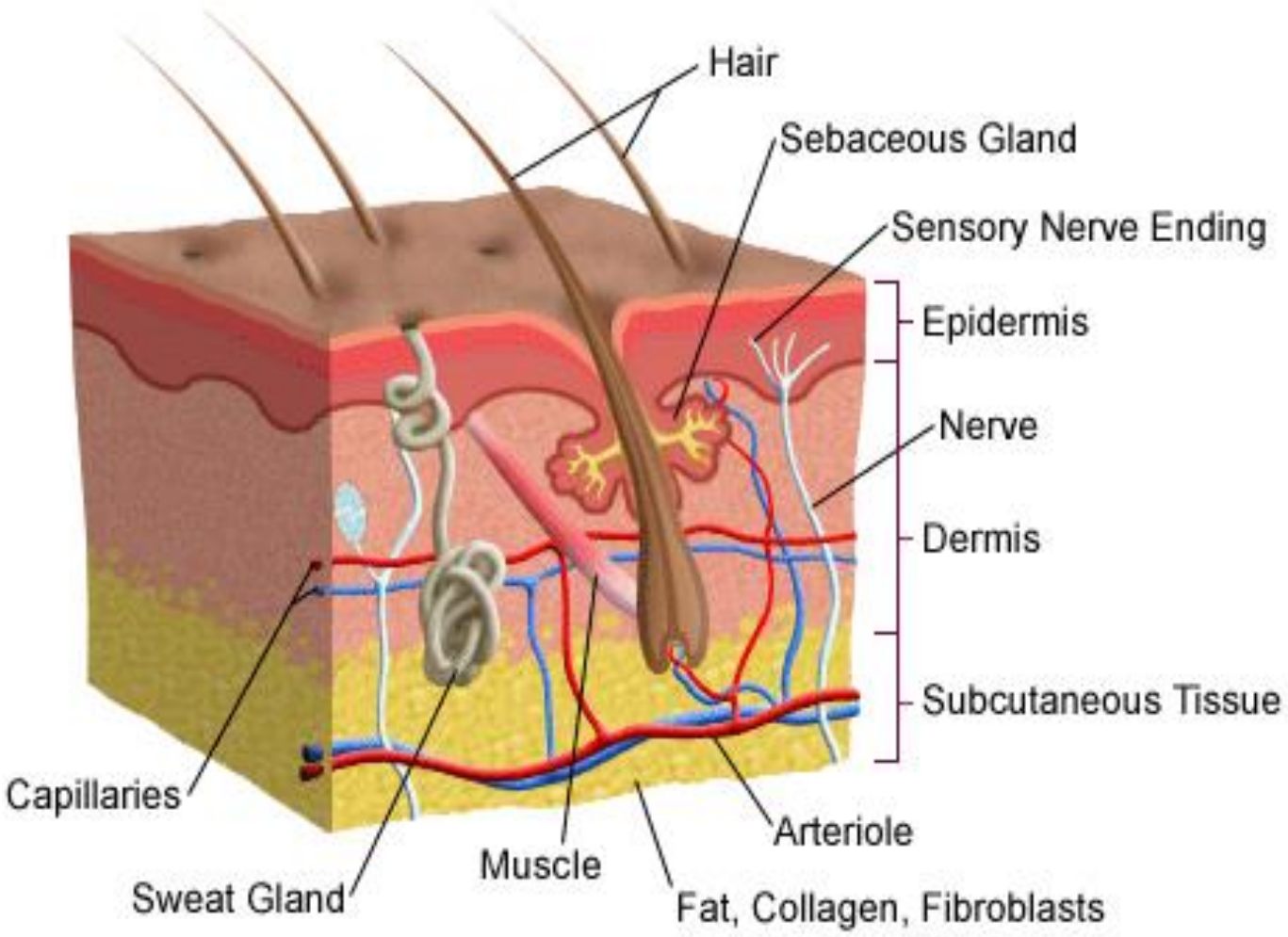
The Skin

The skin is the **LARGESTORGAN** in the body. Its thickness varies over the body being thin over the eye lid to thick on the soles and palms.

STRUCTURE OF THE SKIN

The skin can be divided in to two zones:

1. **EPIDERMIS**
2. **DERMIS**
3. **(Subcutaneous Layer)**



Structure of the Skin

THE EPIDERMIS (Outer Skin)

This consists of 5 layers. These are:

1. **STRATUMCORNEUM** - hardened cells. The cells of this layer are constantly being shed, a process called **DESQUAMATION**.

2. **STRATUMLUCIDUM**.

3. **STRATUMGRANULOSUM**
   KERITINISATION (laying down of keratin) takes place in this layer.

4. **STRATUMSPINOSUM** (aka: **Malphigian Layer**)

5. **STRATUMGERMINATIVUM** (aka: **Basal Layer**)
   Layer contains melanin (skin pigment) – produced by cells called **MELANOCYTES**.

It is estimated that the Epidermis is replaced every 28 - 30 days.

Takes 28 to 30 Days

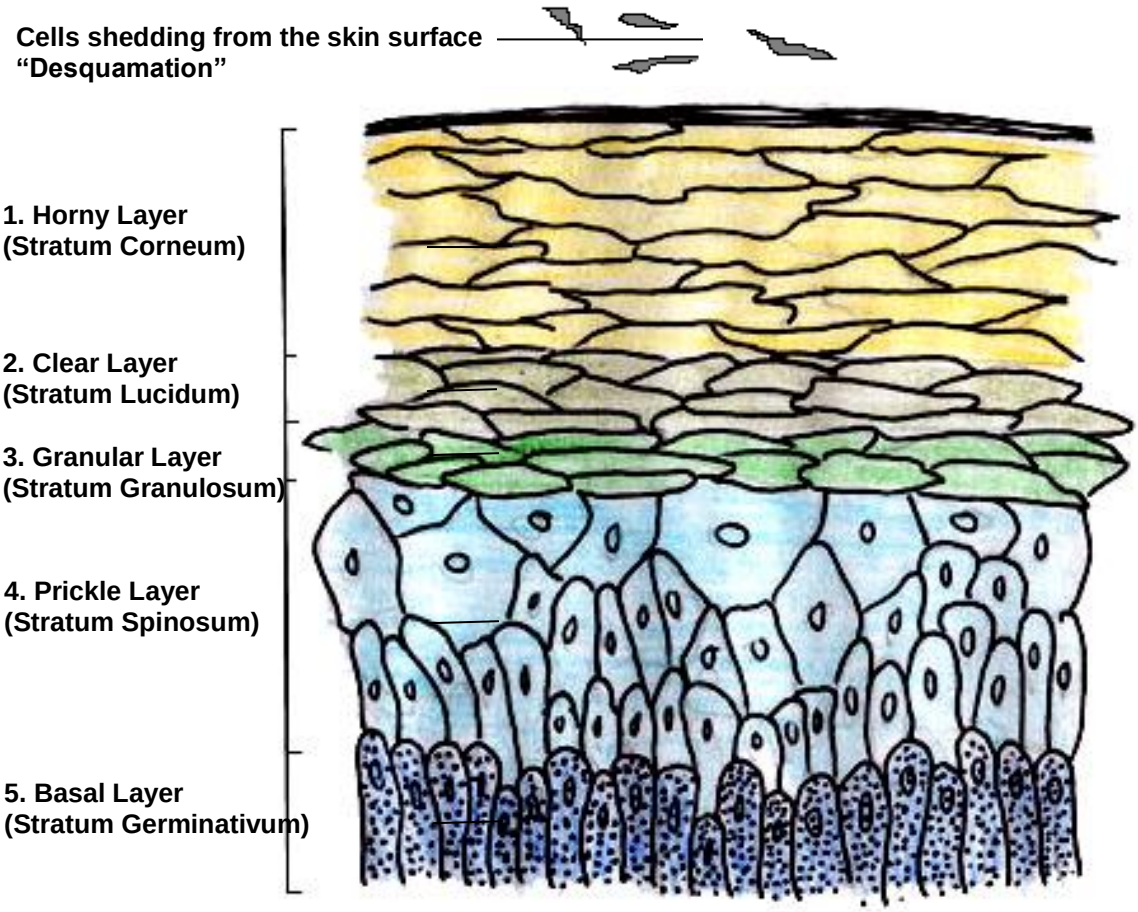


Diagram of the 5 layers of the Epidermis

THE DERMIS

The dermis consists of tough connective tissue**.** It contains:

1. **BLOOD** and **LYMPH** vessels: A fine network of blood vessels exist to provide the dermis with nutrients. The Epidermis has no direct blood supply.
2. **SWEATGlands**

   a) **Apocrine** - These excrete a **milky fluid** which results in body odour when it mixes with bacteria on the skin surface. Found in the axilla (armpit) and genital areas.

   b) **Eccrine** - Responsible for the **EXCRETION** of water, urea, salt and toxins. They are involved in the heat regulation of the body which helps maintain core body temperature at 36.8 C. They are found in all parts of the body, especially the palms of the hands, soles of the feet and in the axilla.

   Freshly produced sweat is sterile and inoffensive, but its decomposition by bacteria gives rise to its odour.

3. **SEBACCEOUS GLANDS** - Found in all parts of the body, esp. the **FACE**, **SCALP** and **GROIN**. They secrete sebum (oily) into the hair follicle. This keeps it soft and pliable. It also provides some waterproofing and acts as an **ANTIBACTERIAL** and **ANTIFUNGAL** agent.

4. **ARRECTOR PILI MUSCLE** - This is a **STRIATED** muscle attached to the hair follicle. The muscle contracts in times of cold / (fear) making the hair stand up. This traps air and prevents **HEAT** loss from the body.

5. **SENSORY NERVES** - These are present in the skin and alert the brain to HEAT, COLD, PRESSURE, PAIN etc

SUBCUTANEOUS LAYER

SUBCUTANEOUS FAT - Provides **protection**, **insulation** and **storage**
The skin in maintaining temperature control relays information to the **HYPOTHALAMUS** in the brain. This houses the thermostatic control of the body and helps regulate body temperature.

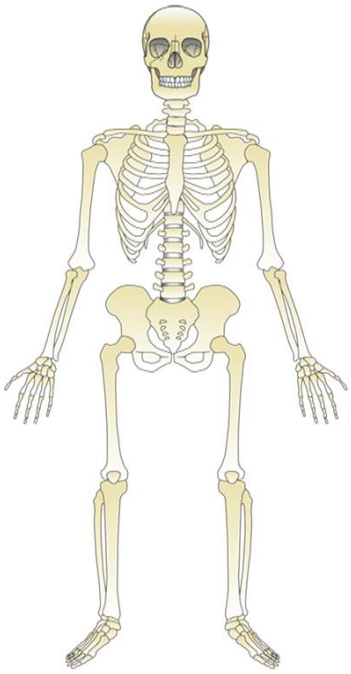
THE FUNCTIONS OF THE SKIN

The functions of skin can be remembered as **"SHAPES VM"**

	Function	Description
S	***Secretion***	**Sebum** is a fatty substance secreted from the sebaceous gland on to the skin's surface. It keeps the skin supple and helps to waterproof it.
H	***Heat Regulation***	It is important for the body to have a constant internal temperature of 36.8 °C. The skin helps to maintain this temperature by: **Vasoconstriction**: This is the constriction of blood vessels in the skin and occurs when the body becomes cold. The blood vessels constrict reducing the flow of blood through the capillaries. Heat lost from the surface of the skin is therefore reduced. **Vasodilation**: This is the dilation of blood vessels in the skin and occurs when the body becomes too hot. The capillaries expand and the blood flow increases; this allows heat to be lost from the body by radiation. **Goose Bumps:** Contraction of the arrector pili muscle when we are cold causes the hairs to stand on end, keeping a layer of warm air close to the body. This contraction causes the skin to pucker giving the appearance of goose bumps. **Shivering** helps to warm the body as the contraction of the muscles produces heat within and increases internal temperature. **Sweating** fromthe production of sweat from eccrine glands helps cool the body as heat is lost when water evaporates from the skin.
A	***Absorption***	The skin is largely waterproof and absorbs very little, although certain substances are able to pass through the basal layer. Essential oils can pass through the hair follicles and into the bloodstream. Certain medications such as hormone replacement therapy can be given through patches placed on the skin. Ultraviolet rays from the sun are also able to penetrate through the basal layer
P	***Protection***	The skin protects the body by keeping harmful bacteria out and provides a covering for all the organs inside. It also protects underlying structures from the harmful effects of ultraviolet (UV) light. The other functions of the skin also help to protect the body **ACID MANTLE:**This is an acidic layer formed on the skin by: Sebum + Perspiration ⟶ Moisturiser + barrier against bacteria.
E	***Excretion***	Eccrine glands excrete sweat on to the skin's surface. Sweat consists of water, toxins and salts.
S	***Sensation***	The skin contains sensory nerve endings that transmit messages to the brain like **touch**, **temperature** and **pain**. These help us to respond to our surroundings as well as feel objects and their shapes.
V	***Vitamin D Formation***	UV rays from the sun penetrate through the skin's layers and activate a chemical found in the skin called **ergosterol**, which changes into vitamin D. Vitamin D is essential for healthy bones and deficiency can cause rickets, a condition in which the bones malformed.
M	***Melanin Production***	Melanin is produced by **Melanocytes** in the Stratum Germinativum (Basal Layer) of the epidermis. This gives skin its colour and protects from the harmful rays of the sun / ultra violet (UV) light.

The Skeletal System

The human skeleton is made up of **206** bones and can be divided into two parts:



- **Axial Skeleton** – Skull, spine ribs and sternum

- **Appendicular Skeleton** – includes the limbs, "arms and legs"

FUNCTIONS OF THE SKELETON

The skeleton provides the framework for the body and has 6 principal functions. These are:

It:

1. Provides shape and **SUPPORT** for the body

2. Provides **JOINTS** where movement takes place

3. Provides areas of **ATTACHMENT** for muscles

4. Provides **PROTECTION** for vital internal organs, e.g.

   - **Pelvic Girdle**-reproductive organs, bladder, intestine etc.
   - **Thorax& Ribs**-heart and lungs
   - **Skull** - brain

5. Manufactures **ERYTHROCYTES** (**Red Blood Cells**) in red bone marrow

6. Provides **CALCIUM** reserves

COMPOSITION OF BONE

Bone is a dry dense tissue composed of approximately:

25% Water
30% Organic material -fibrous material ➔ toughness and resilience
45% Minerals - mainly calcium and phosphorus salts ➔ rigidity and hardness

Bones are living tissue made from cells called **OSTEOBLASTS**.

Most bones have a central cavity containing marrow which is the site of manufacture for most blood cells. The marrow is also a site for storage of fat.

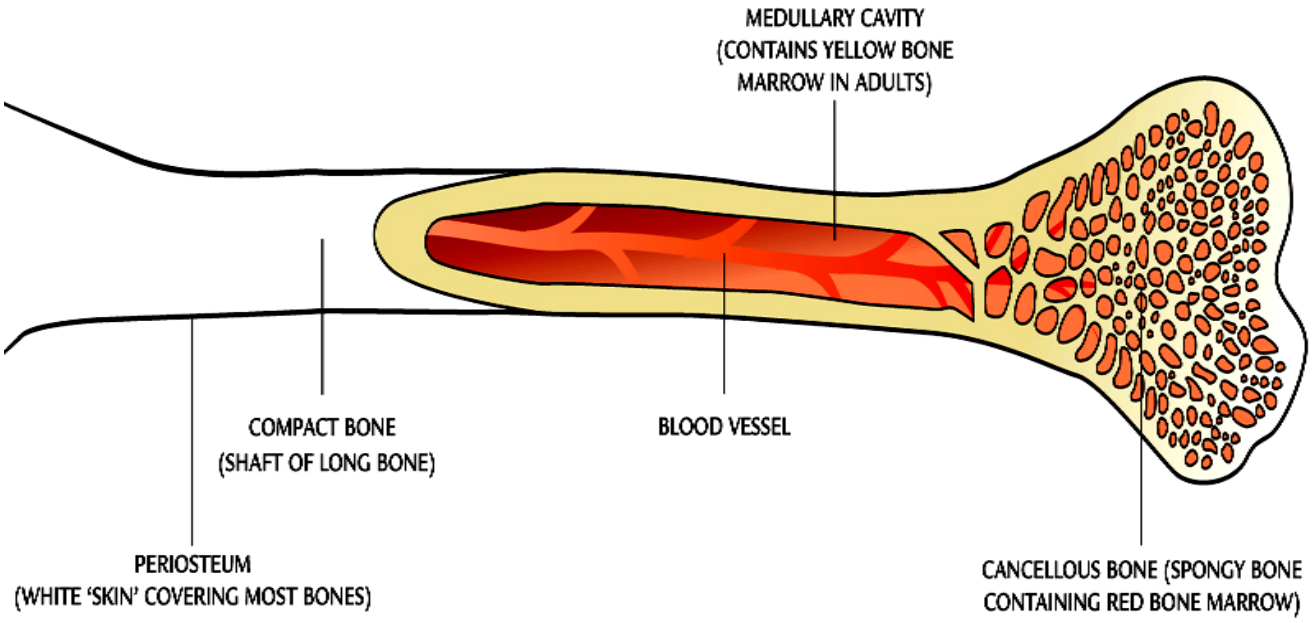
There are two main types of bone.

1. COMPACT (HARD) BONE

- This is dense bone tissue containing few spaces.
- Under the microscope, its structure resembles a honeycomb shape. These are called the **HaversianCanals** through which pass **blood vessels, lymph capillaries** and **nerves**.
- It is deposited in a layer over the spongy bone tissue.
- It is found on the outside of most bones and in the shaft

2. CANCELLOUS (SPONGY) BONE

- This type of bone looks like a sponge
- Is found at the ends of a long bone and in flat, and irregularly shaped bones
- Red bone marrow only exists in cancellous bone



Both type of bone tissue is found in ALL bones in the body in different proportions.

THE SKELETON

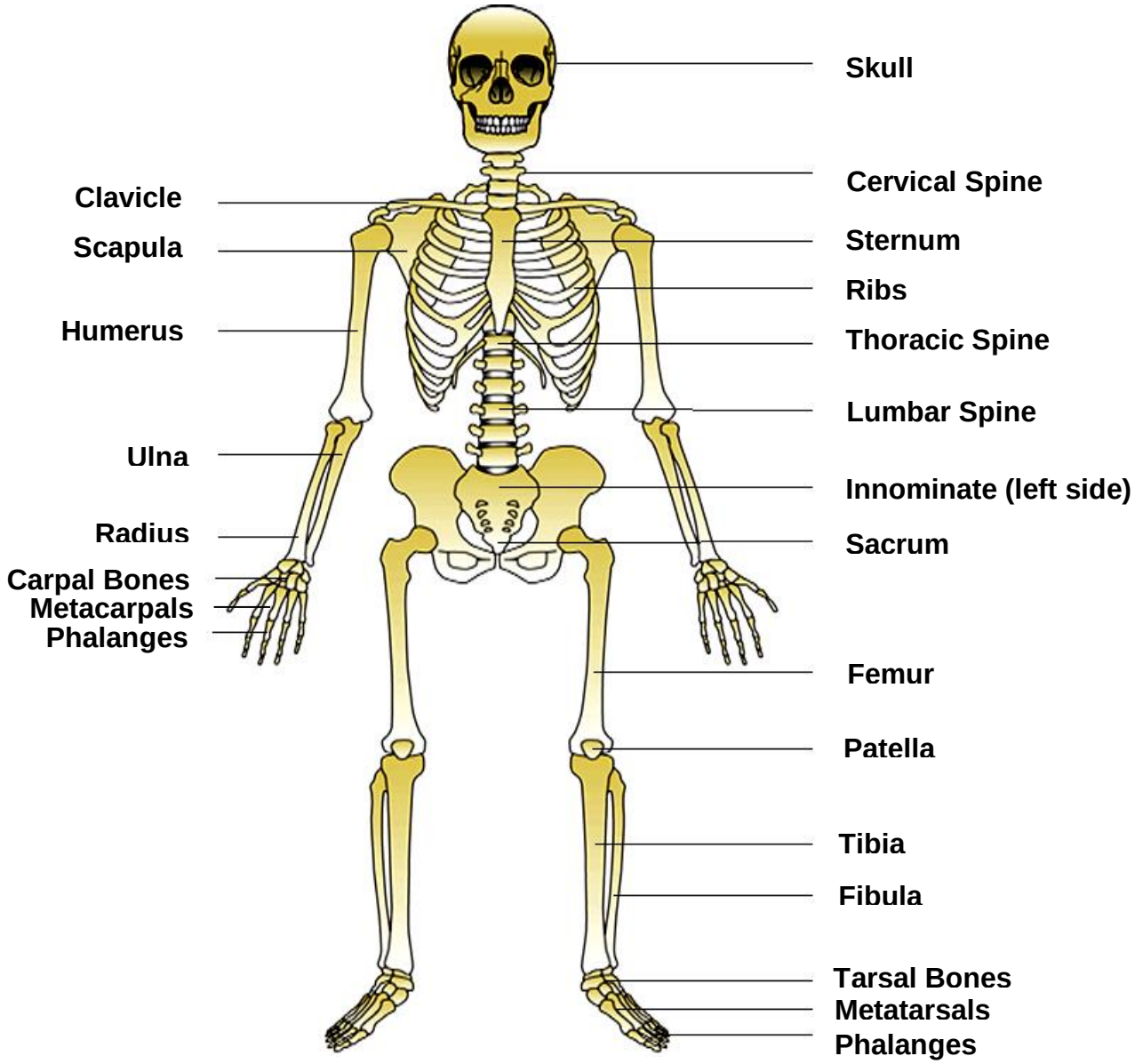


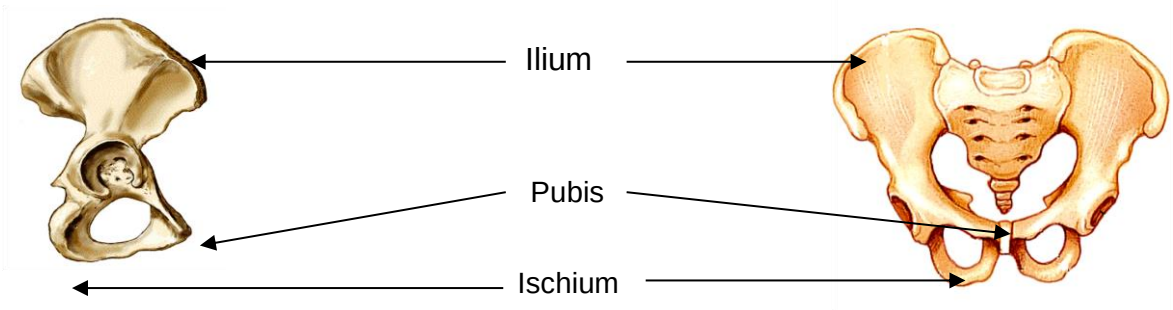
Diagram of the Skeleton

PELVIS

The Pelvis is made up 2 ***Innominate*** bones and ***sacrum***.

Each innominate bone is made up of 3 **FUSED** bones called:

1. Ilium (iliac) **2. Ischium (ischial)** **3. Pubis (pubic)**



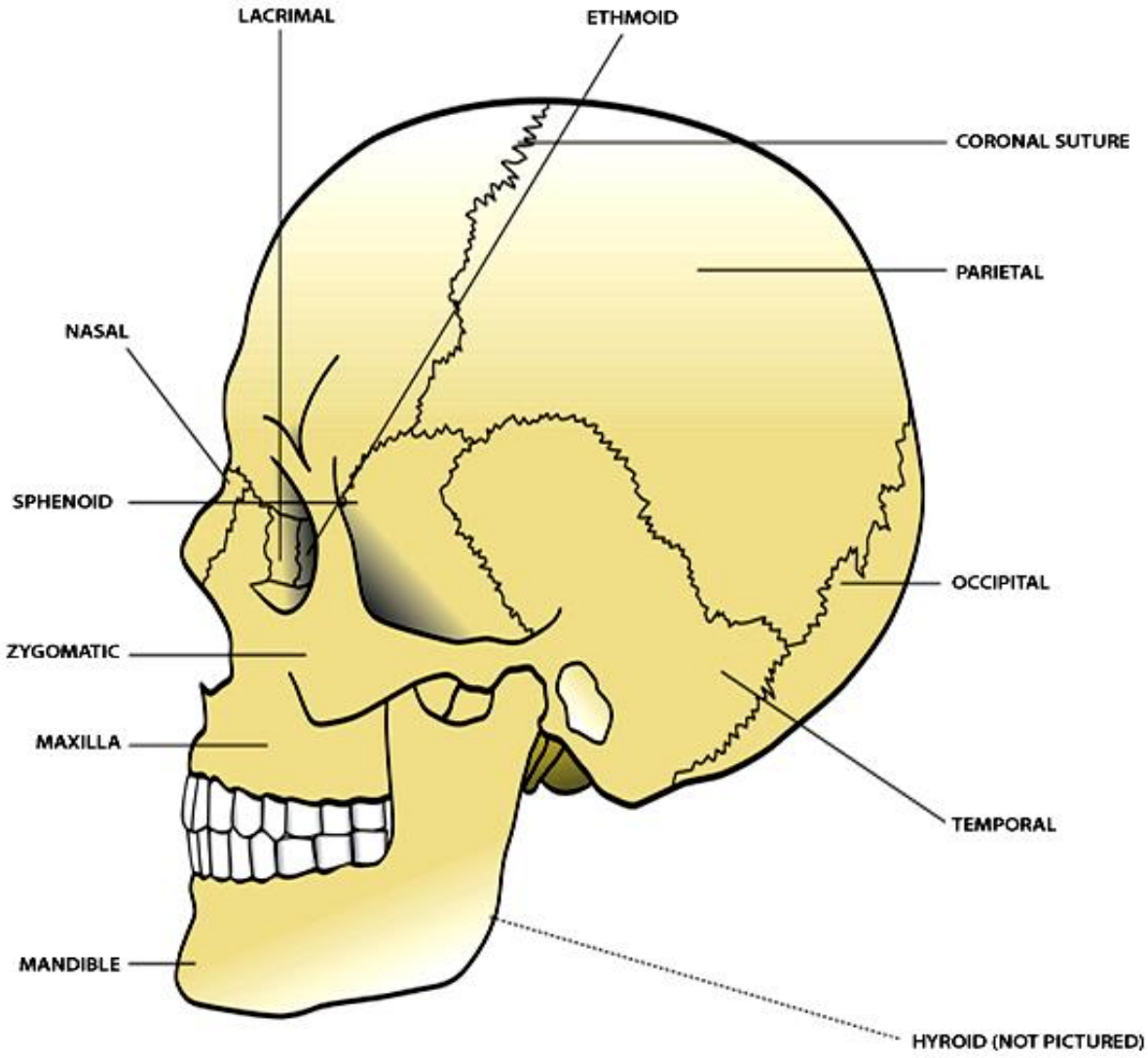
Side View ***Anterior view***

THE SKULL

The skull is made up of the

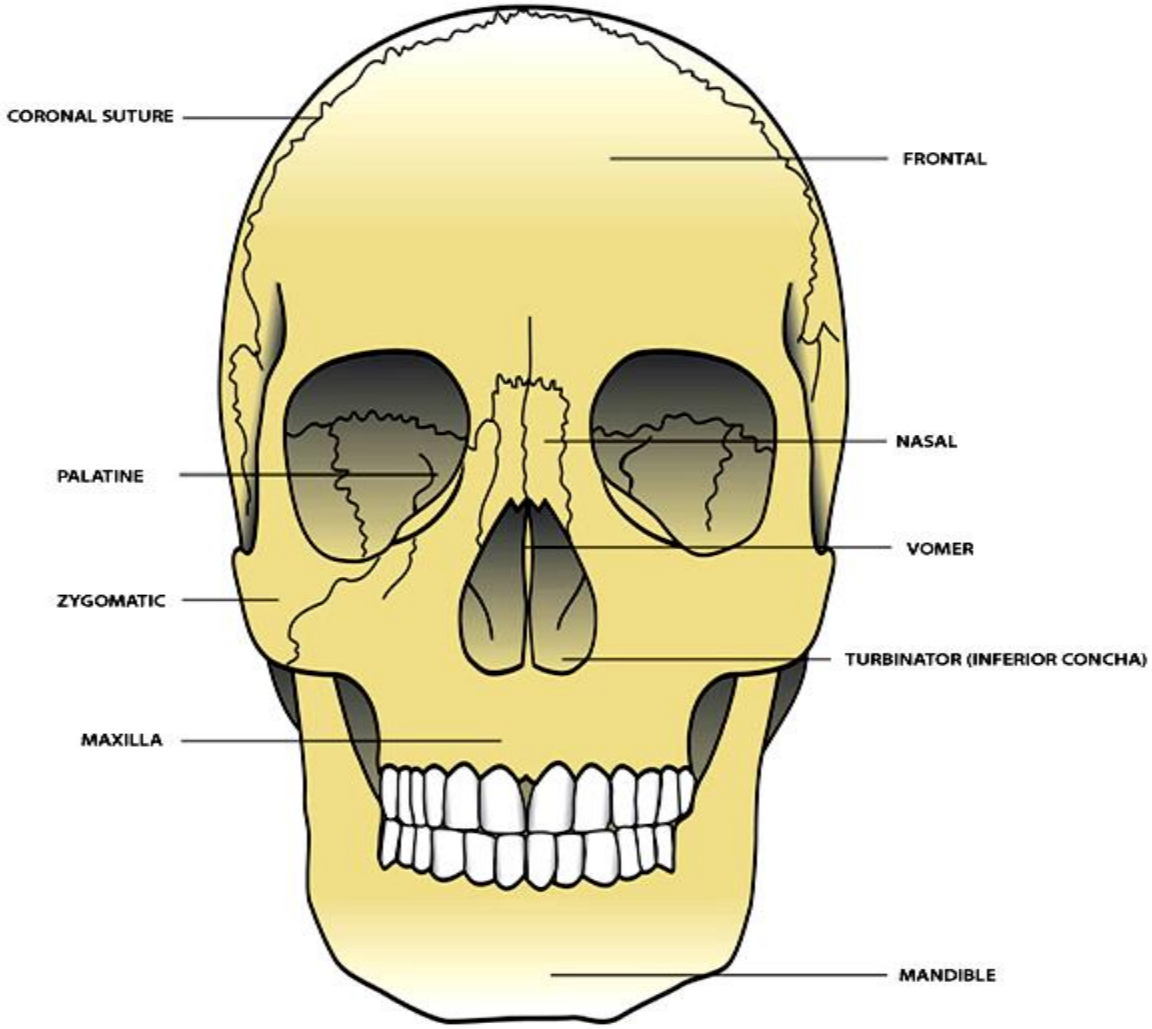
1. Cranial Bones (Cranium)
• Parietal • Frontal •Ethmoid• Sphenoid • Occipital • Temporal

2. Facial Bones
• Nasal •Zygomatic• Maxilla • Lacrimal •Turbinator• Palatine • Mandible •Vomer•Hyoid

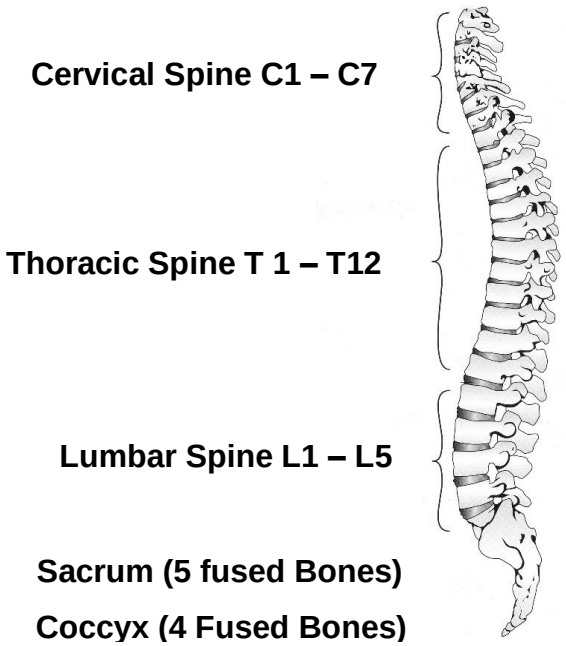


(Hyoid bone lies in the upper neck region – not shown)

Lateral View: Bones of the Skull

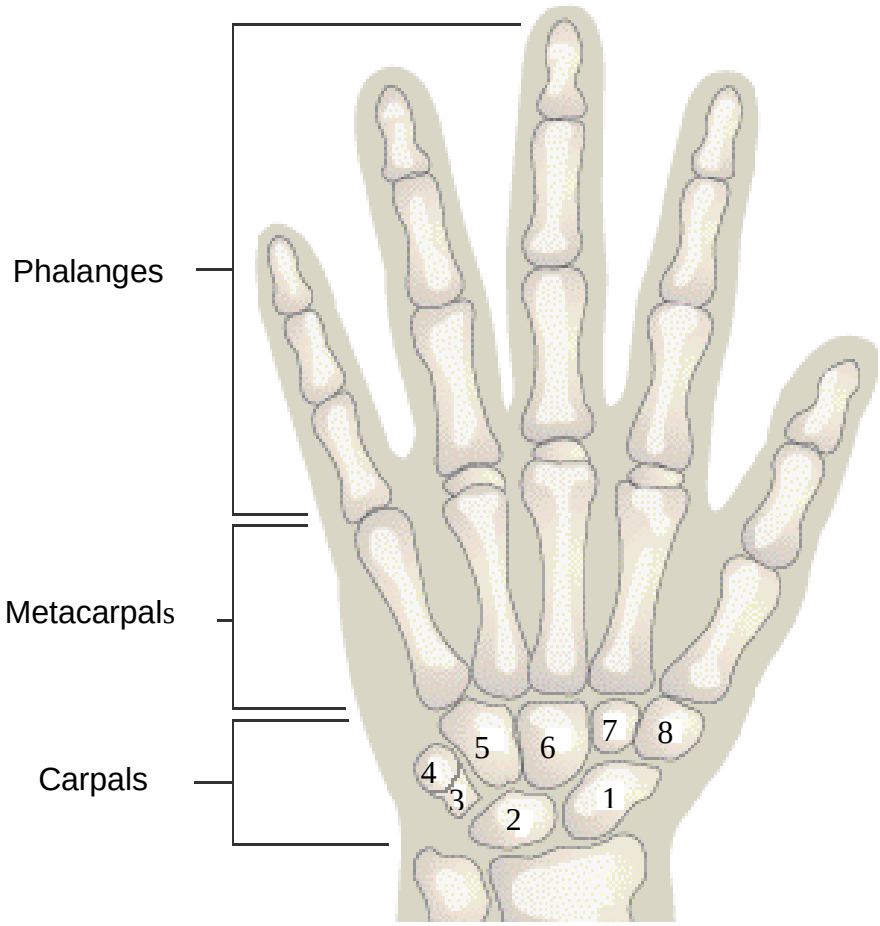


Anterior View: Bones of the Skull (refer to course book)



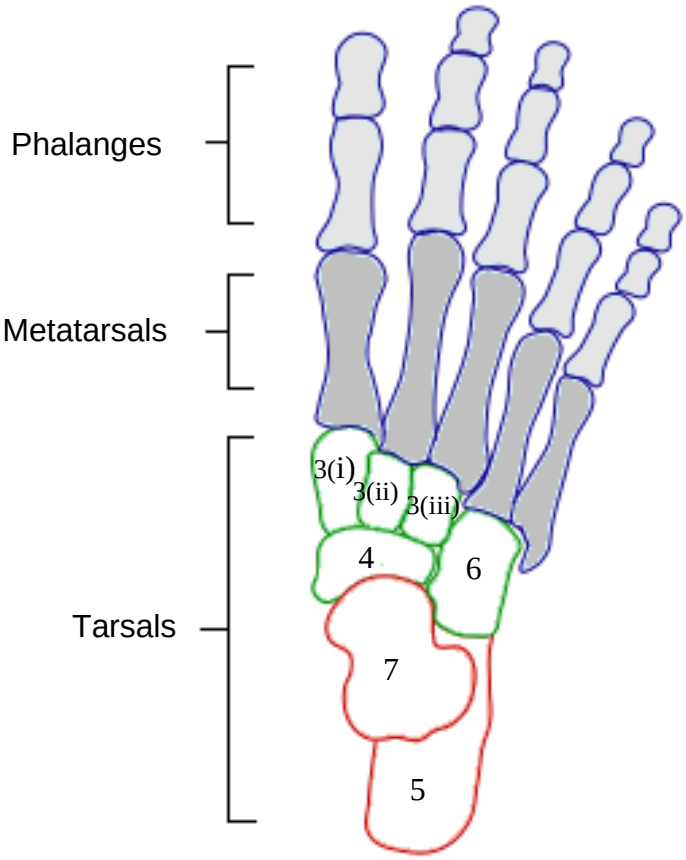
The Spine

	Carpal Bone
1	**Scaphoid**
2	**Lunate**
3	**Triquetrum**
4	**Pisiform**
5	**Hamate**
6	**Capitate**
7	**Trapezoid**
8	**Trapezium**



Bones of the Right Hand – Anterior View (refer to course book)

	Tarsal Bone
1	Phalanges
2	Metatarsals
3	Cuneiform i. Medial ii. Middle iii. Lateral
4	Navicular
5	Calcaneus
6	Cuboid
7	Talus



Bones of the right foot – dorsal view

CONDITIONS OF THE SKELETAL SYSTEM

Condition	Cause	Effect	Picture
Arthritis	"**Arth**" = joint, "**itis**" = inflammation	Symptoms may be acute and show signs of **inflammation** which are: 1. *Redness* 2. *Heat* 3. *Swelling* 4. *Pain*	
Ankylosing Spondylitis	Autoimmune disease which affects the spine	Acute and chronic phases which result in fusion of the joints of the spine causing serve deformity and immobility	
Osteoporosis	Calcium deficiency; accelerated bone loss especially in post-menopausal women	Porosity and brittleness of bones	
Gout	Deposition of uric acid crystals within the joint capsule and cartilage	Attacks of acute gouty arthritis chronic destruction of joints	
Whiplash	Hyper flexion – extension injury to the neck as a result of a rear end collision	Pain and stiffness in the cervical spine with possible radiation of symptoms in the arms.	

Muscular System

Muscle is a group of specialised **elastic** tissue. It is the most abundant type of tissue in the body.

GENERAL FUNCTION OF MUSCLE

Through contraction, muscle performs 4 important functions:

1. **MOVEMENT** (both locomotion and internal movement,)

2. Maintenance of **POSTURE** and **stabilises** joints

3. **HEAT** production (through shivering)

4. **MUSCLE PUMP**: as well as the heart being a pump, skeletal muscle also helps to pump ***blood*** in blood vessels and ***lymph*** in lymphatic vessels)

COMPOSITION OF MUSCLE

- **20% PROTEIN** - Actin & Myosin
- **75% WATER**
- **5%** - Glycogen, glucose and salts

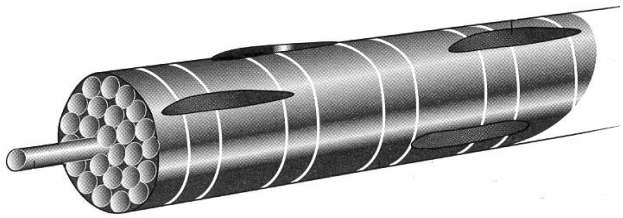
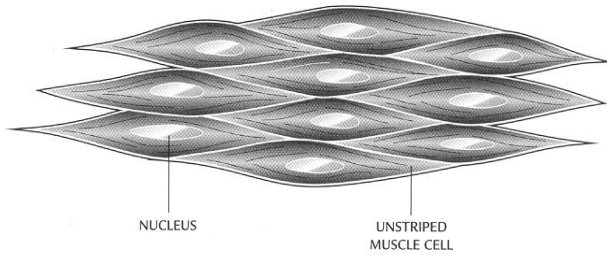
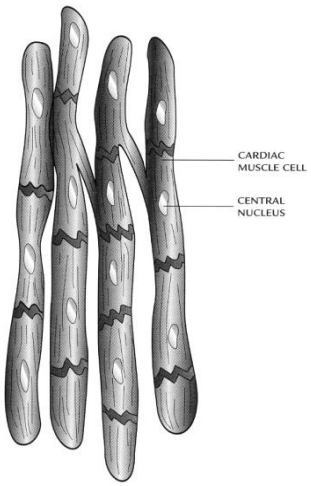
CONNECTING STRUCTURES

Tendon - fibrous white collagen cords which are at the ends of the **MUSCLE**.
They connect **MUSCLE** to **BONE**.

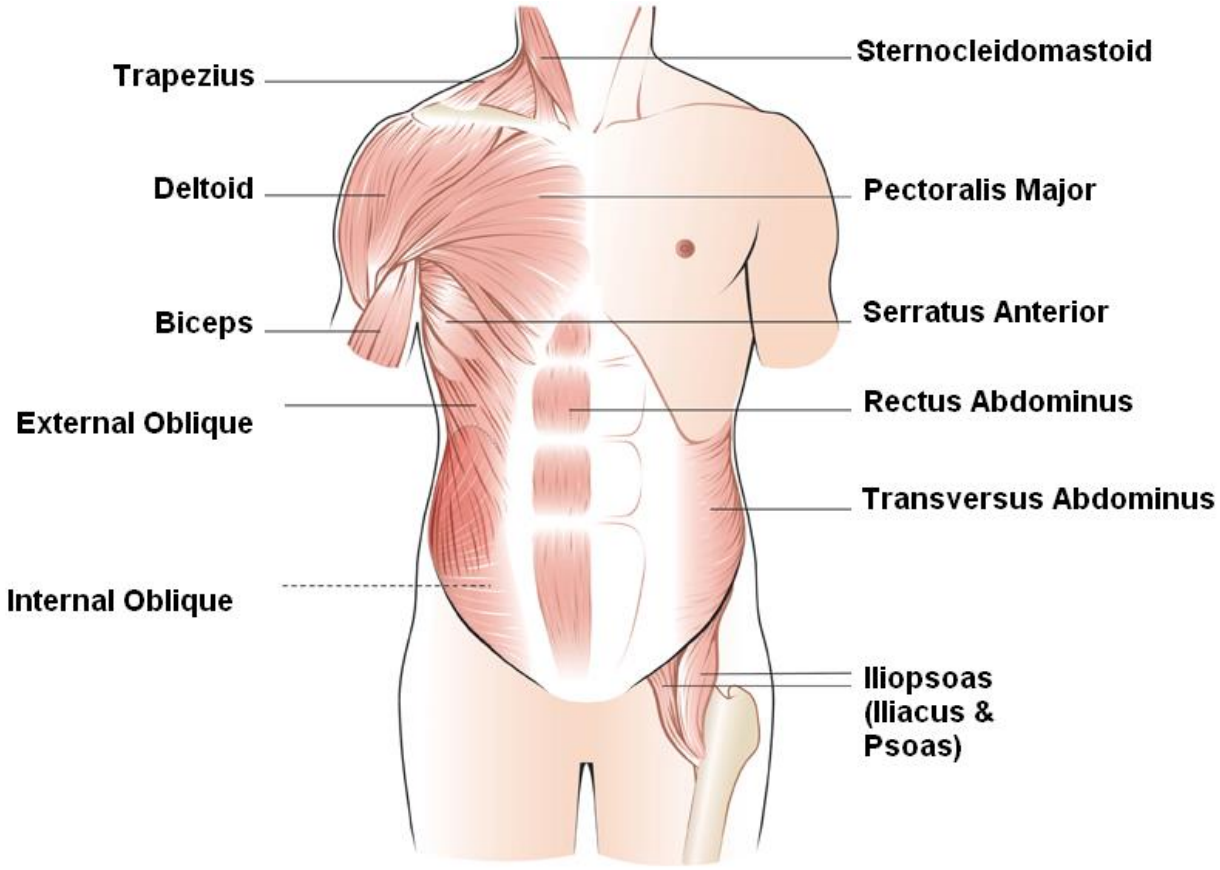
Ligament - **INELASTIC** white fibrous cords which join **BONE** to **BONE**

TYPES OF MUSCLE

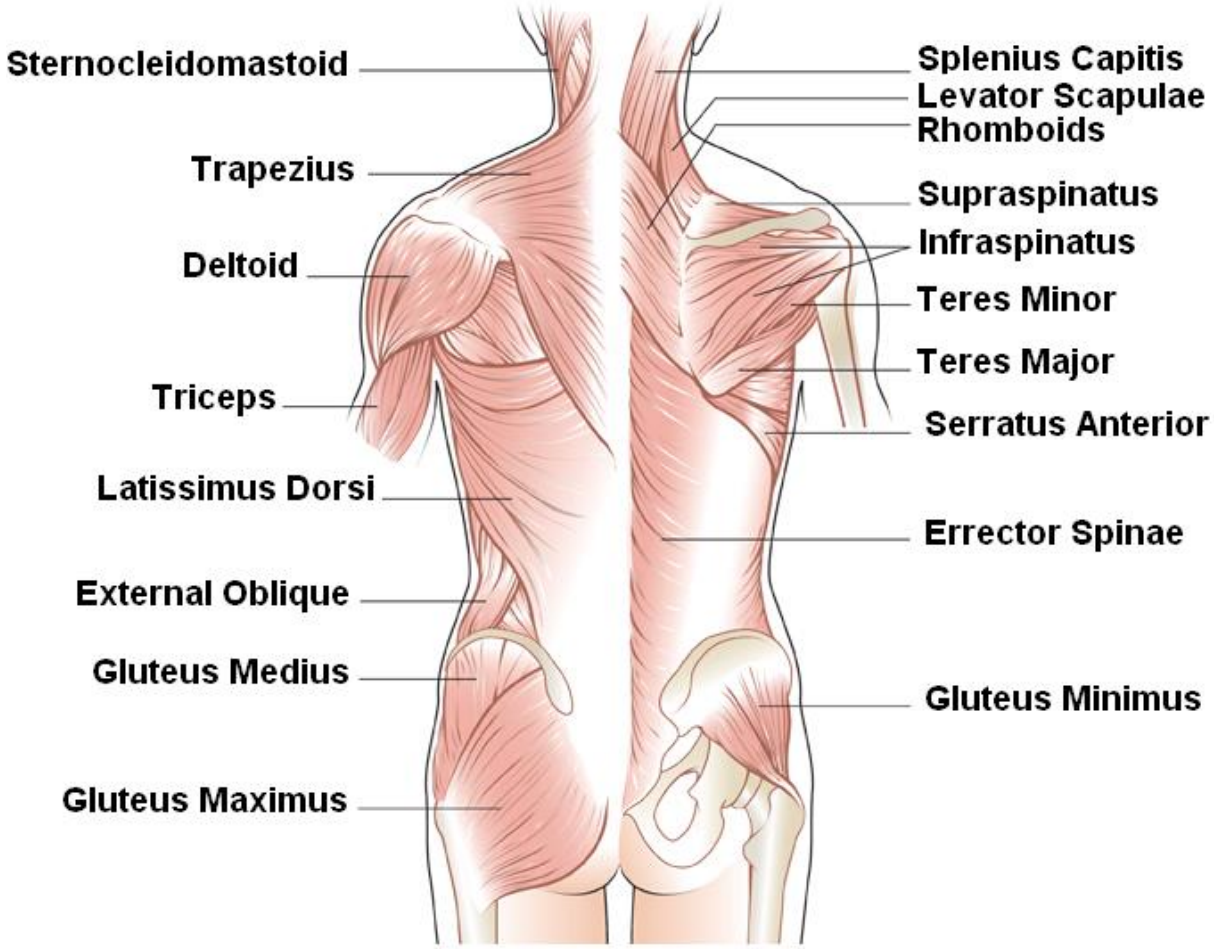
There are 3 types of muscles:

Type	Structure	Function
1. Voluntary (Striated / Skeletal)	Cylindrical cells making up fibres. Each fibre has several nuclei and is surrounded by the sarcolemma. Under the microscope the muscle looks "striped" **"Myo" = Muscle** 	▪ Provides voluntary movement. e.g.: **ELBOW FLEXION**
2. Involuntary (Smooth / Non striated)	Spindle shaped cells with no distinct membrane and only one nucleus. 	▪ Provides involuntary movement. e.g.: **PERISTALSIS** **VASOCONSTRICTION** **VASODILATION**
3. Cardiac	Only exists in the heart. It is involuntary, but its fibres are striated and each cell has a nucleus.  Note: Heart is **"Myogenic" – beats even without nerve supply**	▪ Powers the pump action of the heart.

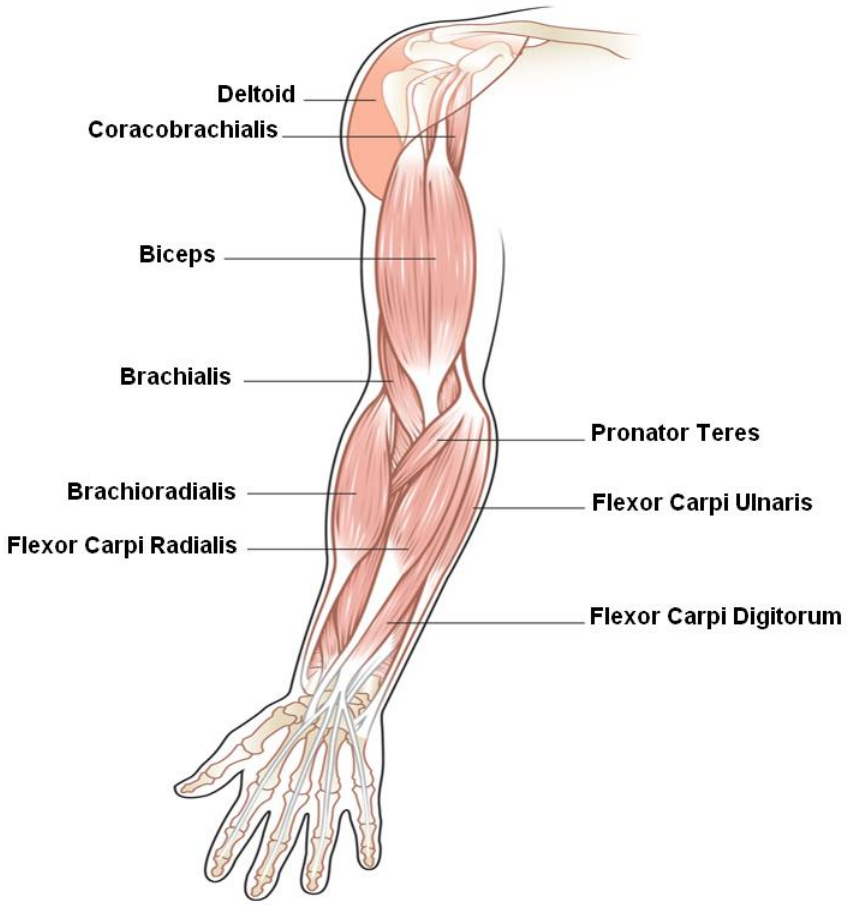
MUSCLES OF THE TRUNK (ANTERIOR VIEW)



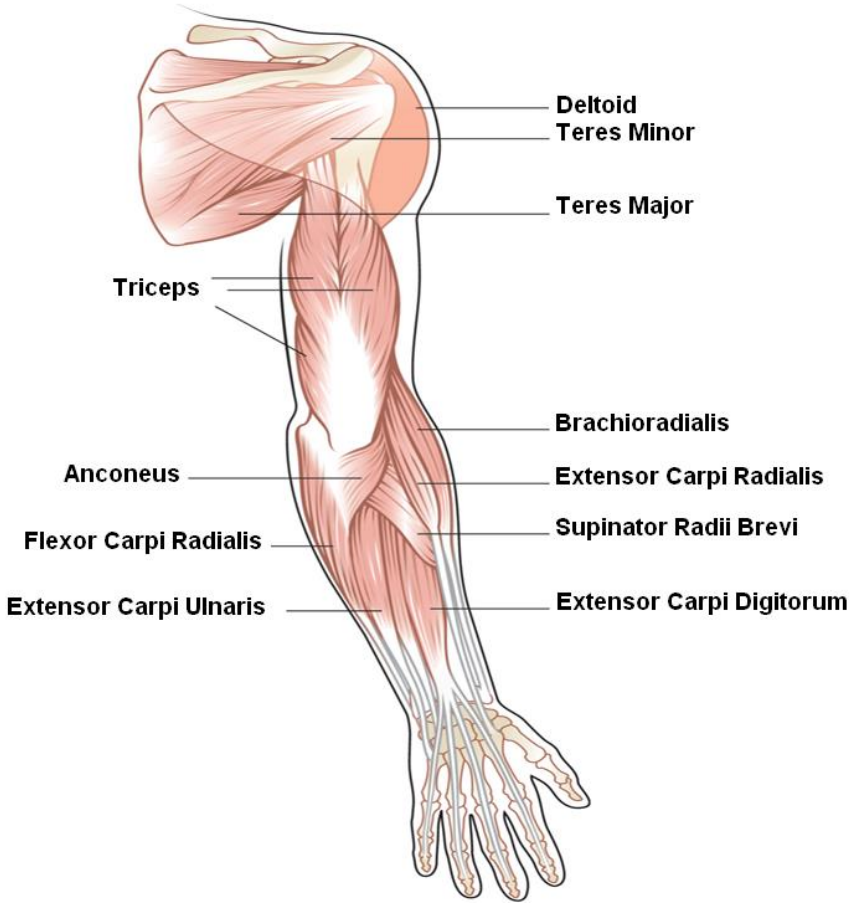
MUSCLES OF THE TRUNK (POSTERIOR VIEW)



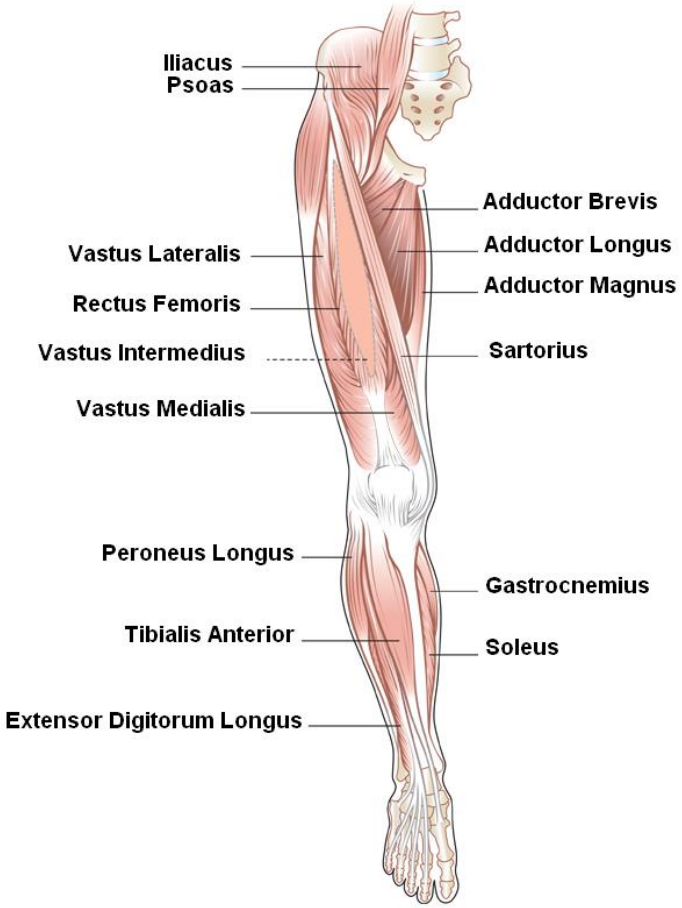
MUSCLES OF THE RIGHT UPPER EXTREMITY (ANTERIOR VIEW)



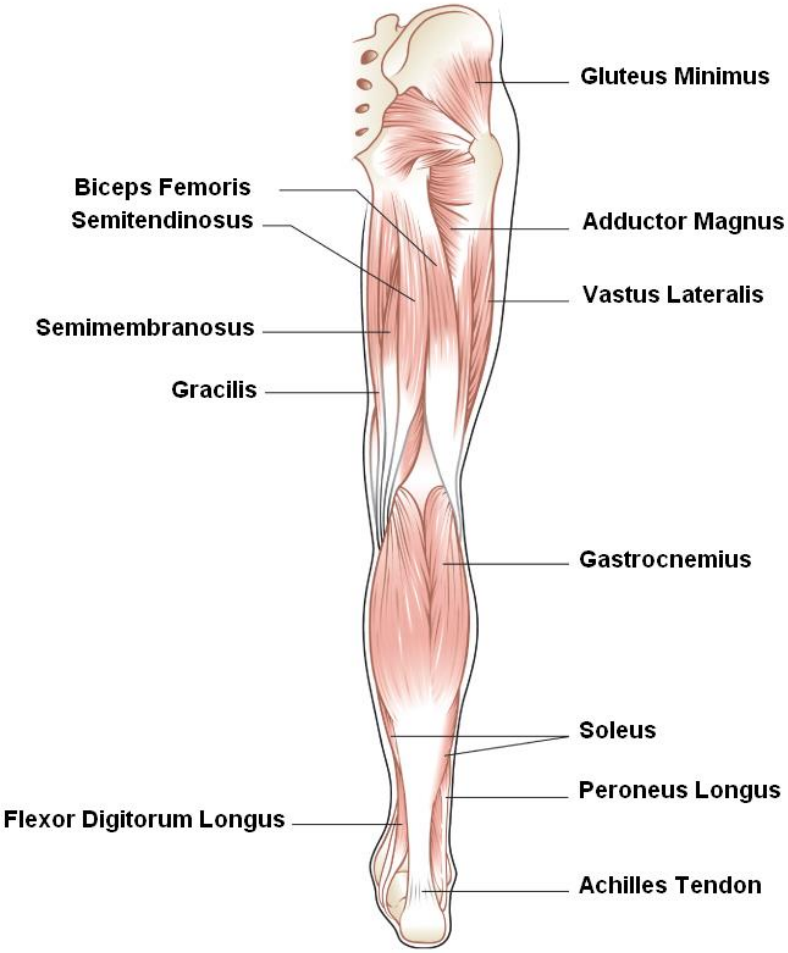
MUSCLES OF THE LEFT UPPER EXTREMITY (POSTERIOR VIEW)



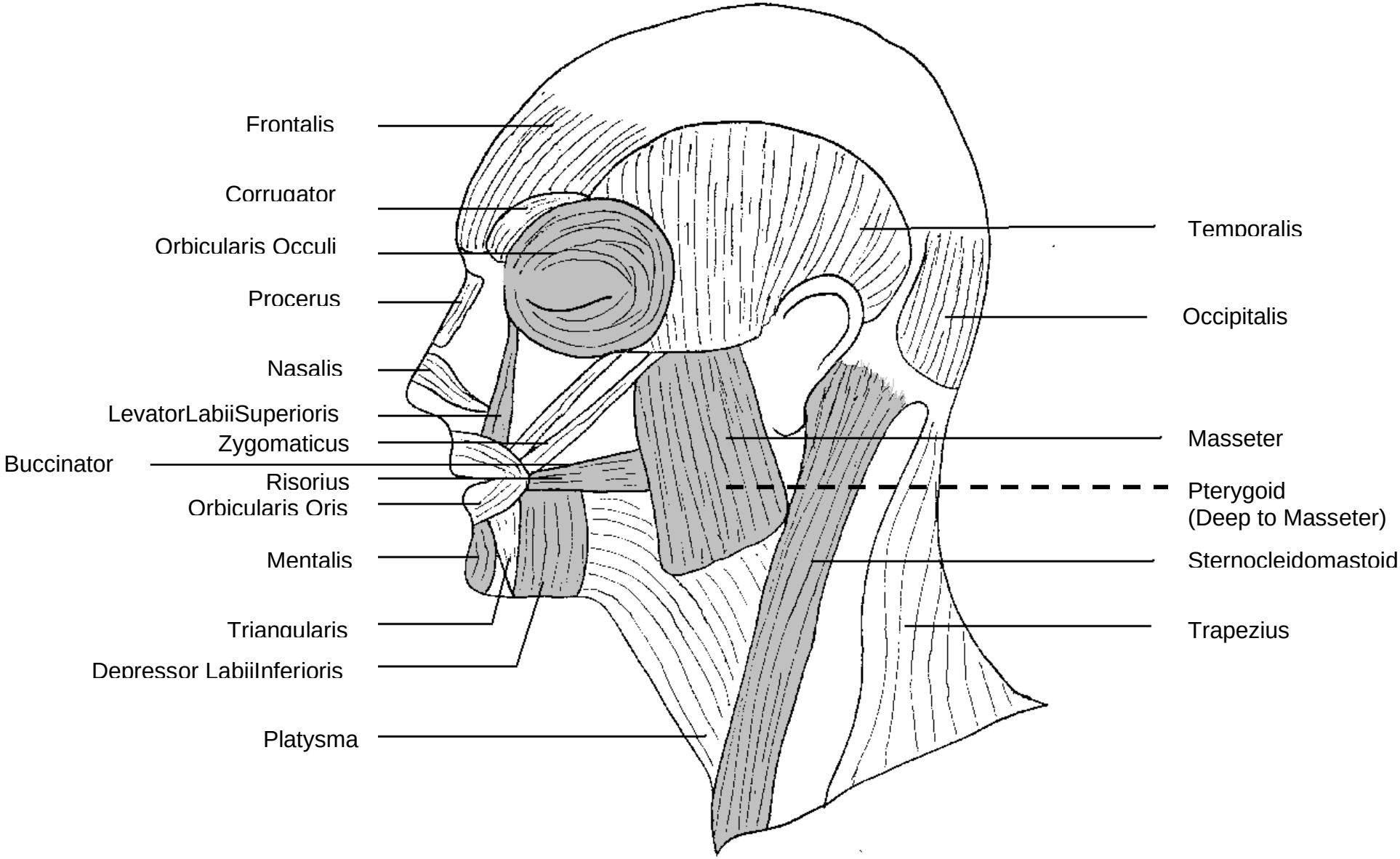
MUSCLES OF THE LOWER EXTREMITY (ANTERIOR VIEW)



MUSCLES OF THE LOWER EXTREMITY (POSTERIOR VIEW)



MUSCLES OF THE FACE (LATERAL VIEW)



DISEASES & DISORDERS: MUSCULAR SYSTEM

Term	Cause	Effect
Adhesions	"Sticking" of tissues	Poor functioning of area and discomfort
Atrophy	Undernourishment; lack of use	Wasting away or failure to reach normal size, of bulk of muscle.
Back Pain Lumbago Rheumatism	Can be caused by muscle strain or arthritis	Backache affecting the lumbar region or lower back;
Fibromyalgia (Fibrositis)	unknown	pain, stiffness and tenderness of the muscles, tendons and joints. Most common in the back, neck, shoulders and feet
Repetitive Strain Injury (RSI)	Injury to an area resulting from repetitive movements. Usually affects the extensor muscles of the wrist and hand.	Pain on moving the affected joint
Rupture	Tear of a muscles, tendon or ligament	Pain and loss of function of the area
Shin Splints	Pain on the medial aspect of the tibia due to running on hard ground or poor footwear	Pain on movements of the foot as well as on touch.
Sprain	sudden twist or wrench of the joint's ligaments	An injury or damage to a joint; painful swelling of the joint; the most commonly sprained joint is the ankle (often called a 'twisted ankle'). A sprained ankle is usually caused by the joint 'going over', thus putting all the body weight on the ankle.
Strain	Overexertion, over-stretching, over-use; failure to warm up before strenuous activity, especially sport.	An injury to a muscle or its tendon; may occasionally involve rupture (tearing) of muscle fibres, muscle sheath or tendon.
Tendonitis	Inflammation of the tendon e.g. Achilles Tendonitis	Pain and swelling over the affected tendon.

Circulatory System

CONSTITUENT PARTS OF THE CIRCULATORY SYSTEM

The Circulatory system includes the ***Cardiovascular System (CVS)*** and the ***Lymphatic System***. These systems respectively consist of:

1. **Blood**
2. **Blood Vessels** } Cardiovascular System
3. **Heart**

4. **Lymph** } Lymphatic System
5. **Lymphatic Vessels**

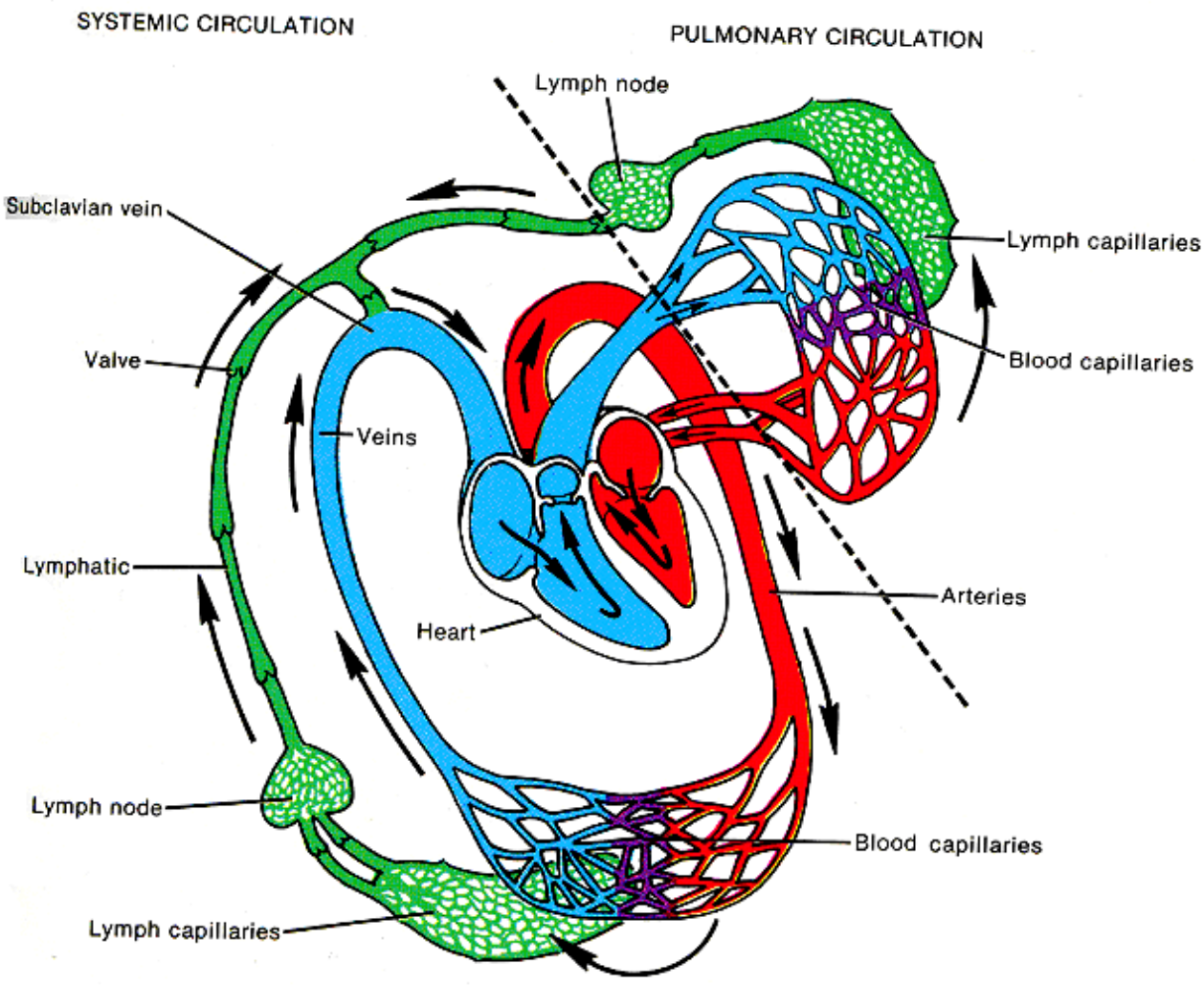


Diagram showing the CVS & Lymphatic System

Cardiovascular System

BLOOD

Blood is a **FLUID CONNECTIVE TISSUE** found in the body and is pumped around the body by the heart through arteries and veins.

Blood is **alkaline (pH 7.4)** in nature.

There is approximately **4-5 litres** of blood in the adult body

FUNCTIONS OF BLOOD

1. **TRANSPORT** of oxygen, nutrients, hormones and enzymes around body as well as waste material to organs of excretion.

2. Helps fight **INFECTION** through white blood cells and antibodies

3. Prevents loss of body fluid through wounds via a CLOTTING mechanism.

4. **MAINTAINANCE** of body temperature.

BLOOD CONSTITUTION

There are two parts to blood: A. PLASMA & B. BLOOD

A.PLASMA (55%)

Plasma is a **STRAW** coloured fluid consisting mainly **WATER** (90%) and **PROTEINS** (10%) (**Fibrinogen, Globulin, Thrombin, Albumin).**

Plasma also helps to **TRANSPORT** the following substances around the body:

1. **MINERAL SALTS** e.g. sodium chloride
2. **NUTRIENTS** e.g. proteins and glucose
3. **WASTE** e.g. urea
4. **HORMONES** - (chemical messengers)
5. **ENZYMES** - (biological catalysts)
6. **GASES** e.g. oxygen and carbon dioxide

7. **ANTIBODIES & ANTITOXINS** - part of the immune system

B. CELLS (45%)

- **ERYTHROCYTES (RED BLOOD CELLS)**

Function: Transport oxygen in the body bound to cell as **OXYHAEMOGLOBIN**

Characteristics:

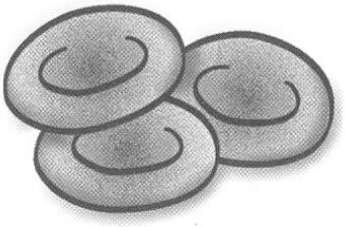
a. Small**BICONCAVE** disc shaped cells

b. Have no **NUCLEUS**

c. Produced in **RED** bone marrow

d. Have a life span of approx. **120days**

e. Broken down in the spleen and then the liver where any spare **IRON** is recycled



- **LEUCOCYTES (WHITE BLOOD CELLS)**

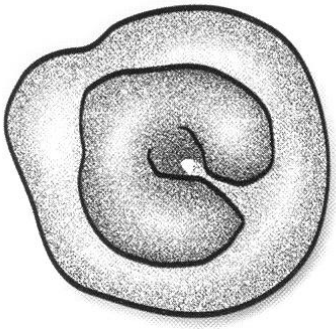
Function: Protect the body from ***infection***

Characteristics

a. Have a large ***nucleus***

b. Rapidly increase in number when there is an **INFECTION**

c. Can pass through capillary walls into tissues



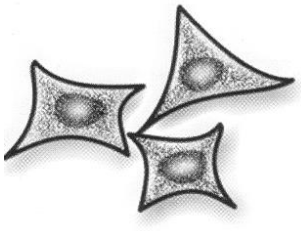
- **THROMBOCYTES (PLATELETS)**

Function: Responsible for clotting of blood

Characteristics

a Contain mitochondria but no **NUCLEUS**

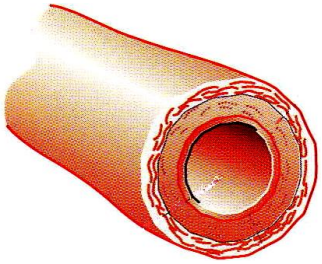
b. a life span of approx. **10 days**



BLOOD VESSELS

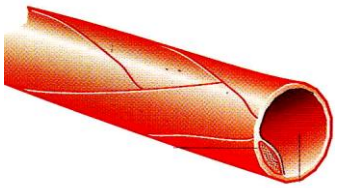
Blood is circulated throughout the body in blood vessels. These change names as the type of blood they carry alters as well as the way they change in structure.

Arteries
(exit the heart)

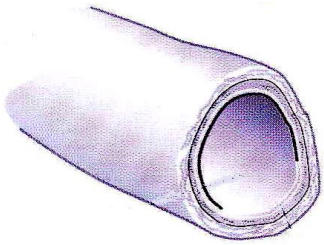


Arterioles
(Smaller version of arteries)

Capillaries
(where exchange of gases and
fluids takes place between cells and blood)



Venules
(Smaller version of veins)



Veins
(return to the heart)

THE HEART

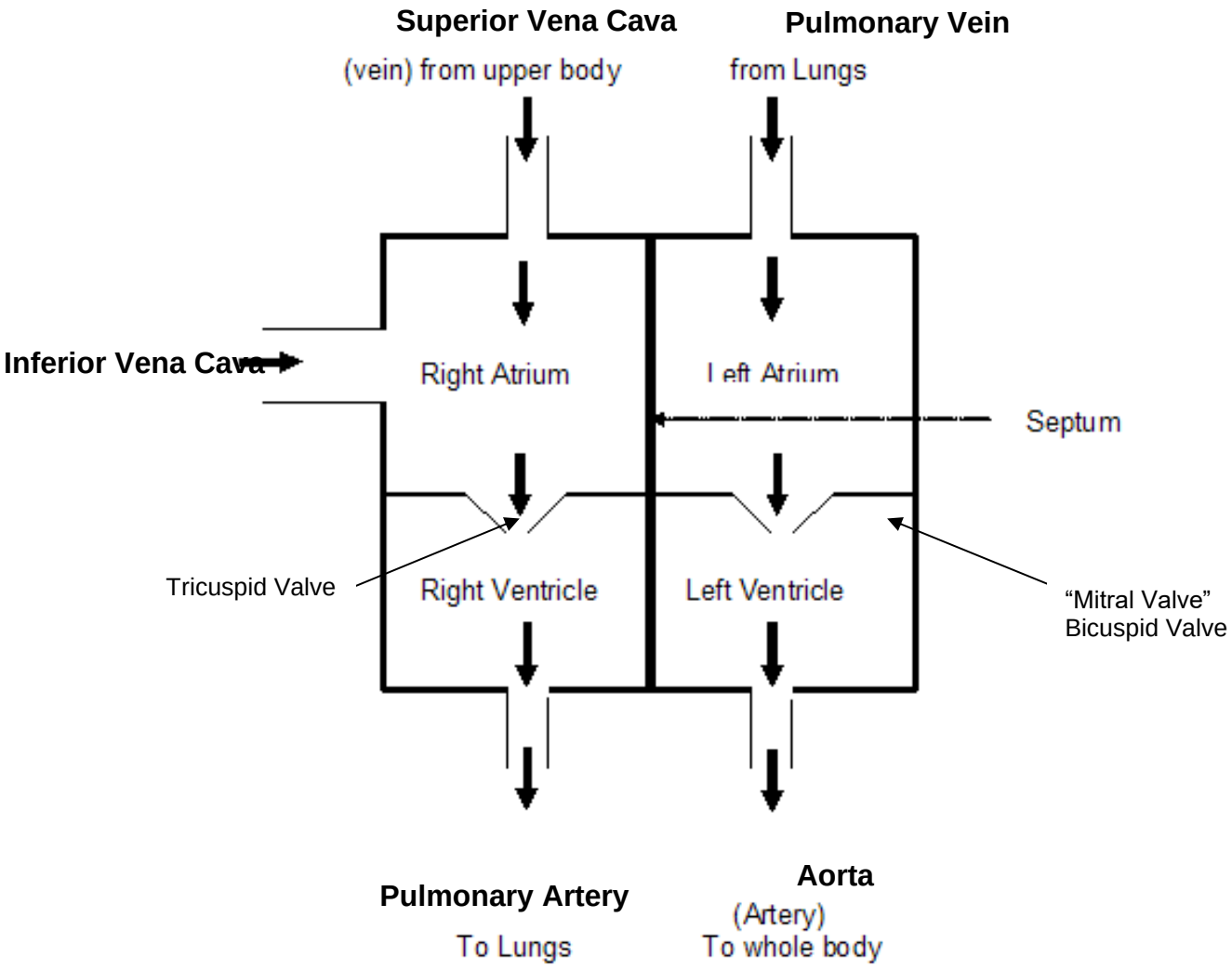
The heart is an **ORGAN** which is at the centre of the cardiovascular system. It acts like a **PUMP**, contracting rhythmically forcing blood through vessels and maintains circulation of blood.

The adult heart rate averages to approximately **70 beats per minute.**

The heart is divided into **4 chambers:**

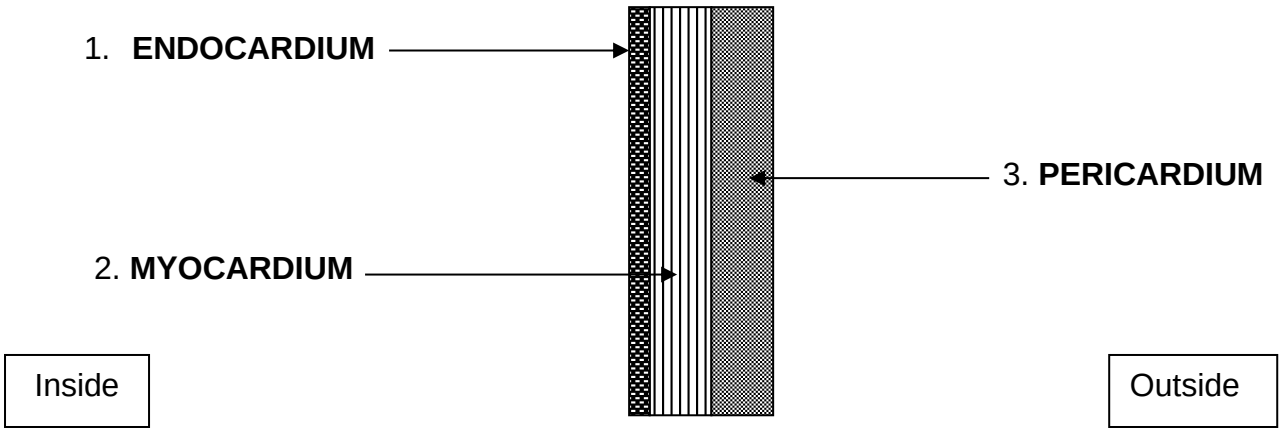
- **Right and left ATRIUM**
- **Right and left VENTRICLE**

The blood vessels attached to the heart are:

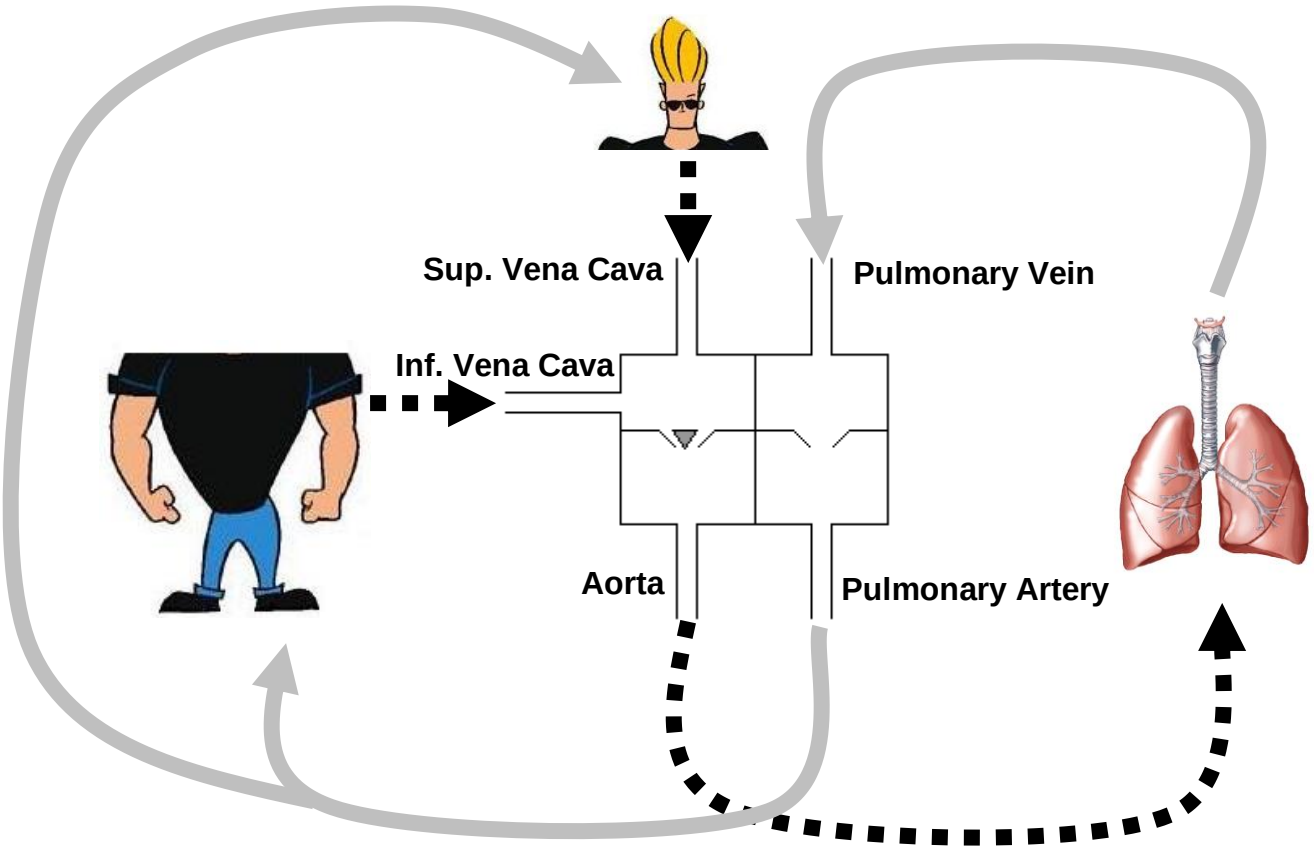


Schematic Diagram of the Heart & Blood Vessels

DIAGRAM OF THE HEART WALL



SCHEMATIC DIAGRAM OF CIRCULATION OF BLOOD IN THE BODY



Schematic diagram of circulation of blood in the body

THE CIRCULATION OF BLOOD

Blood has to pass through the heart twice before it has made a full circulation of the body.

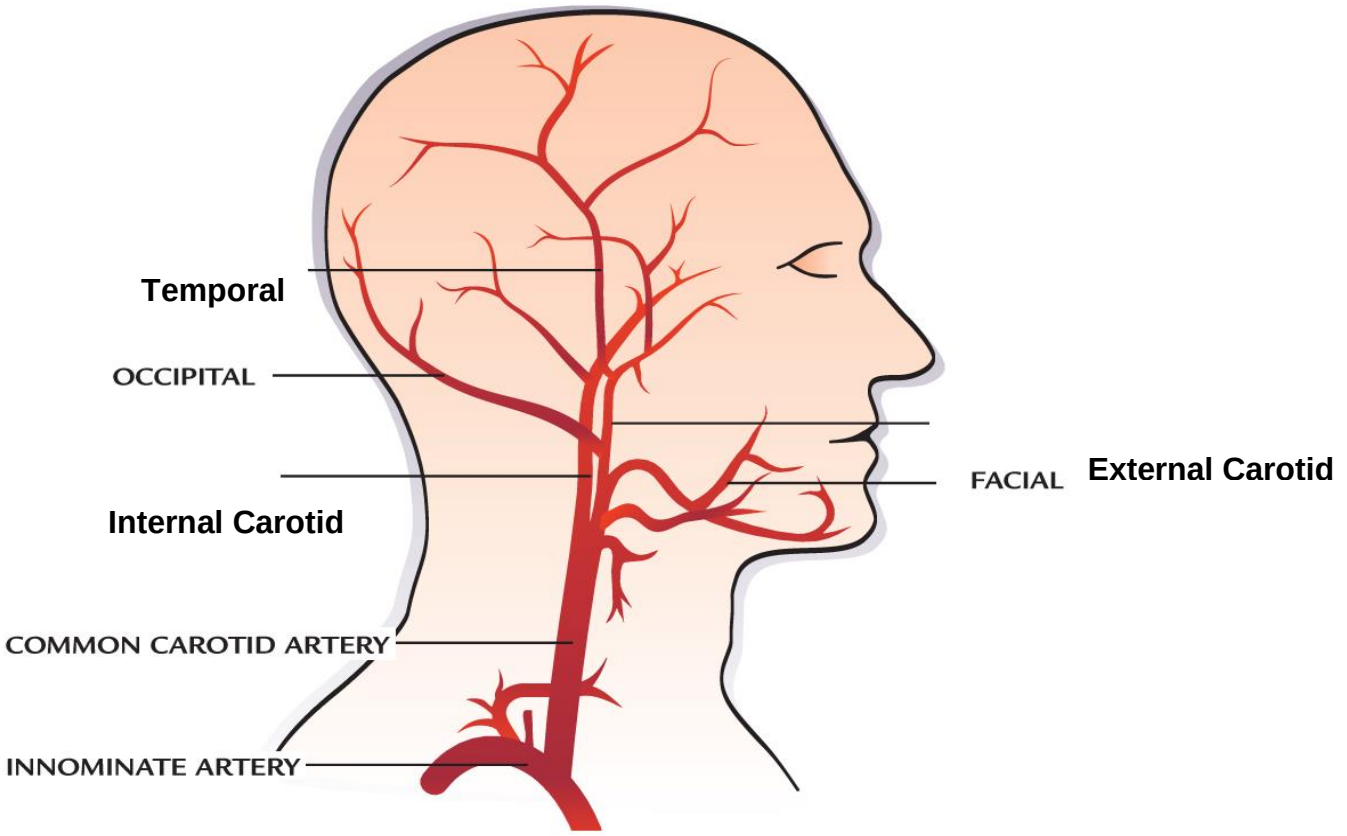
The circulation is divided into two principal systems:

1. **SYSTEMIC / GENERAL CIRCULATION**: This is the circulation to all body parts and includes the **CORONARY CIRCULATION** which is circulation of blood to the myocardium (heart muscle) itself.

   CORONARY CIRCULATION: The right and left **coronary arteries** leave the aorta and branch into the heart wall as **capillaries**. These then continue to become the **coronary veins** where they enter the **right atrium** of the heart**.**

2. **PULMONARY CIRCULATION**: This is the circulation of blood to and from the **LUNGS**

MAIN ARTERIES OF THE HEAD



MAIN VEINS OF THE HEAD

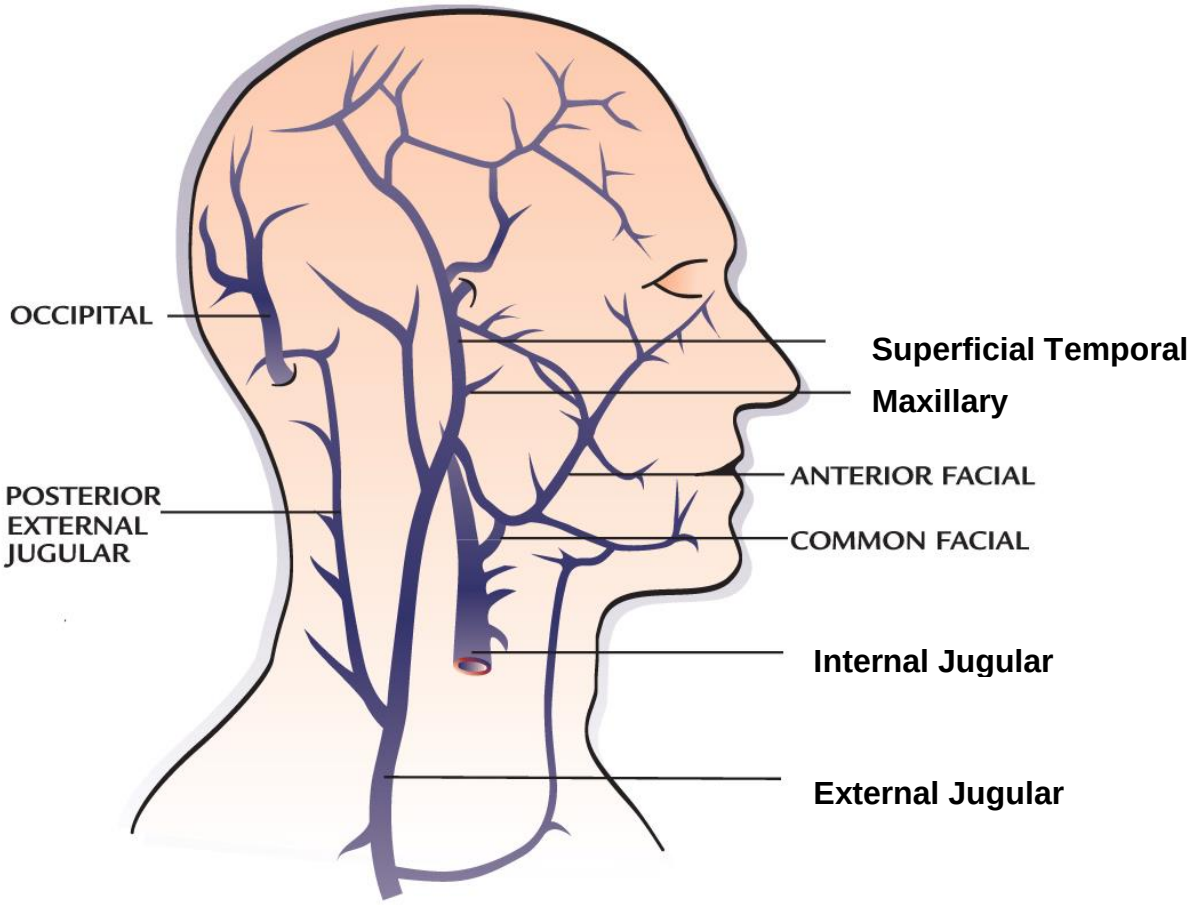


DIAGRAM OF THE MAIN ARTERIES & VEINS OF THE BODY

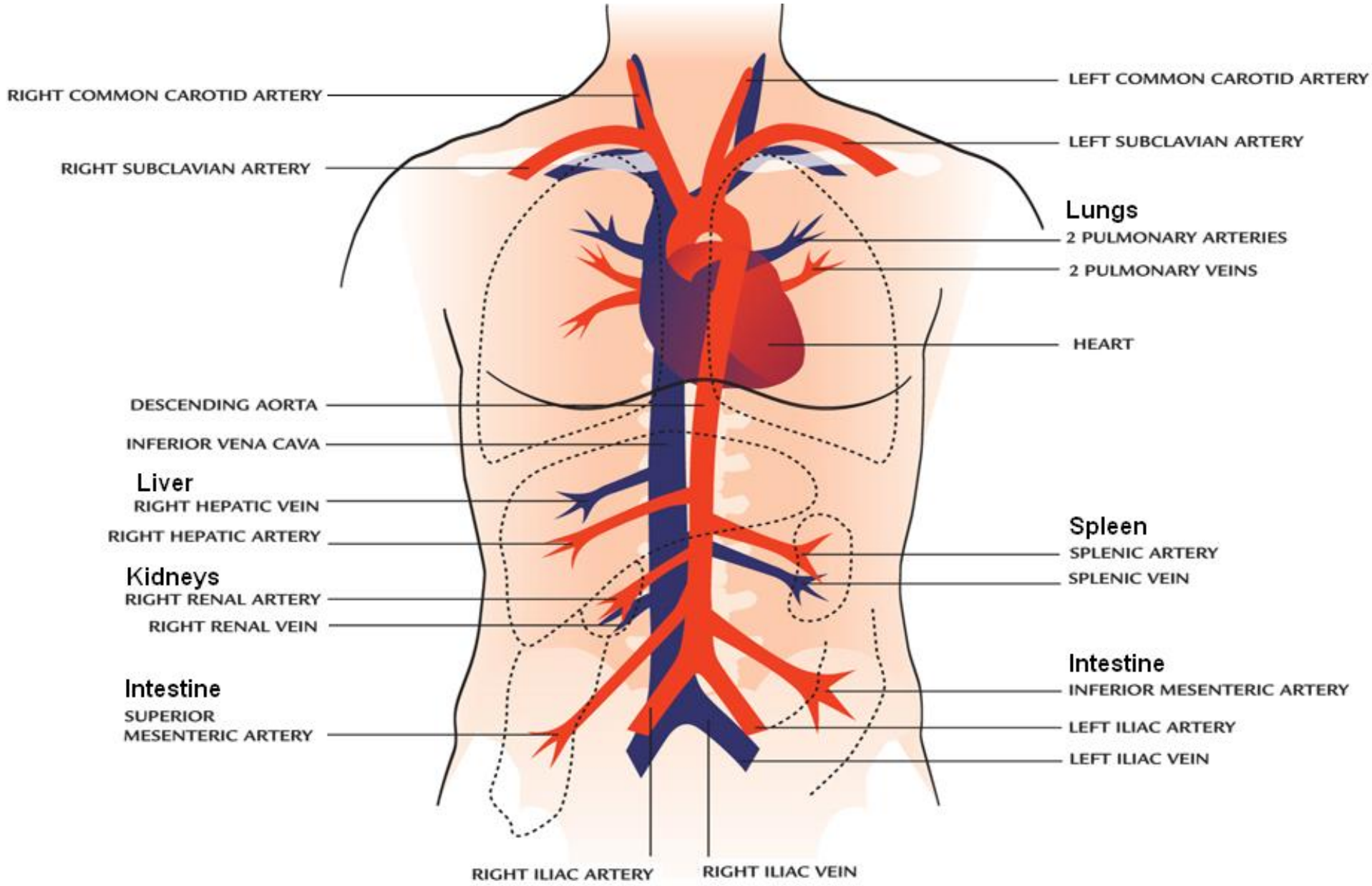


DIAGRAM OF THE MAIN ARTERIES & VEINS OF THE UPPER EXTREMITY

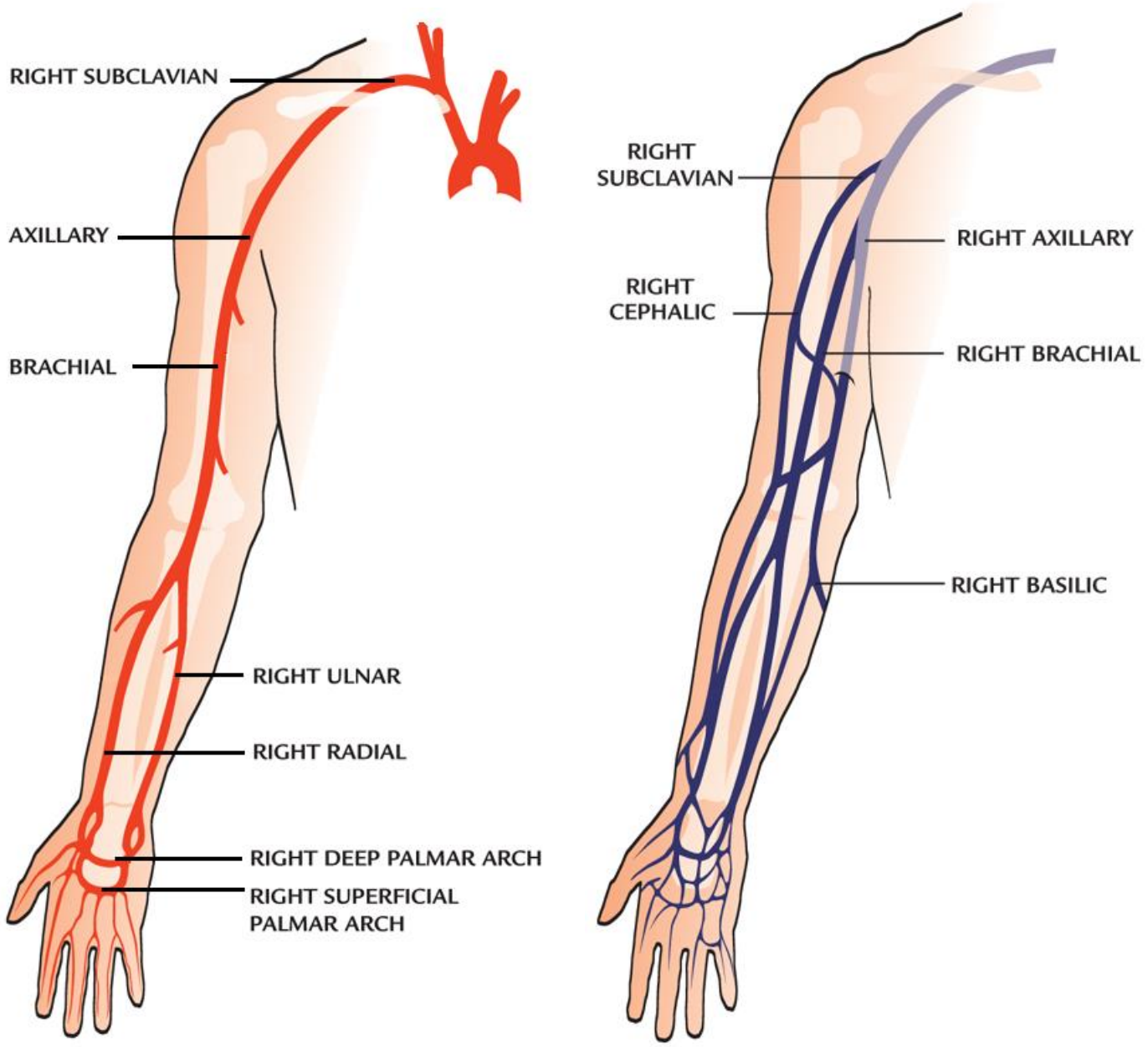
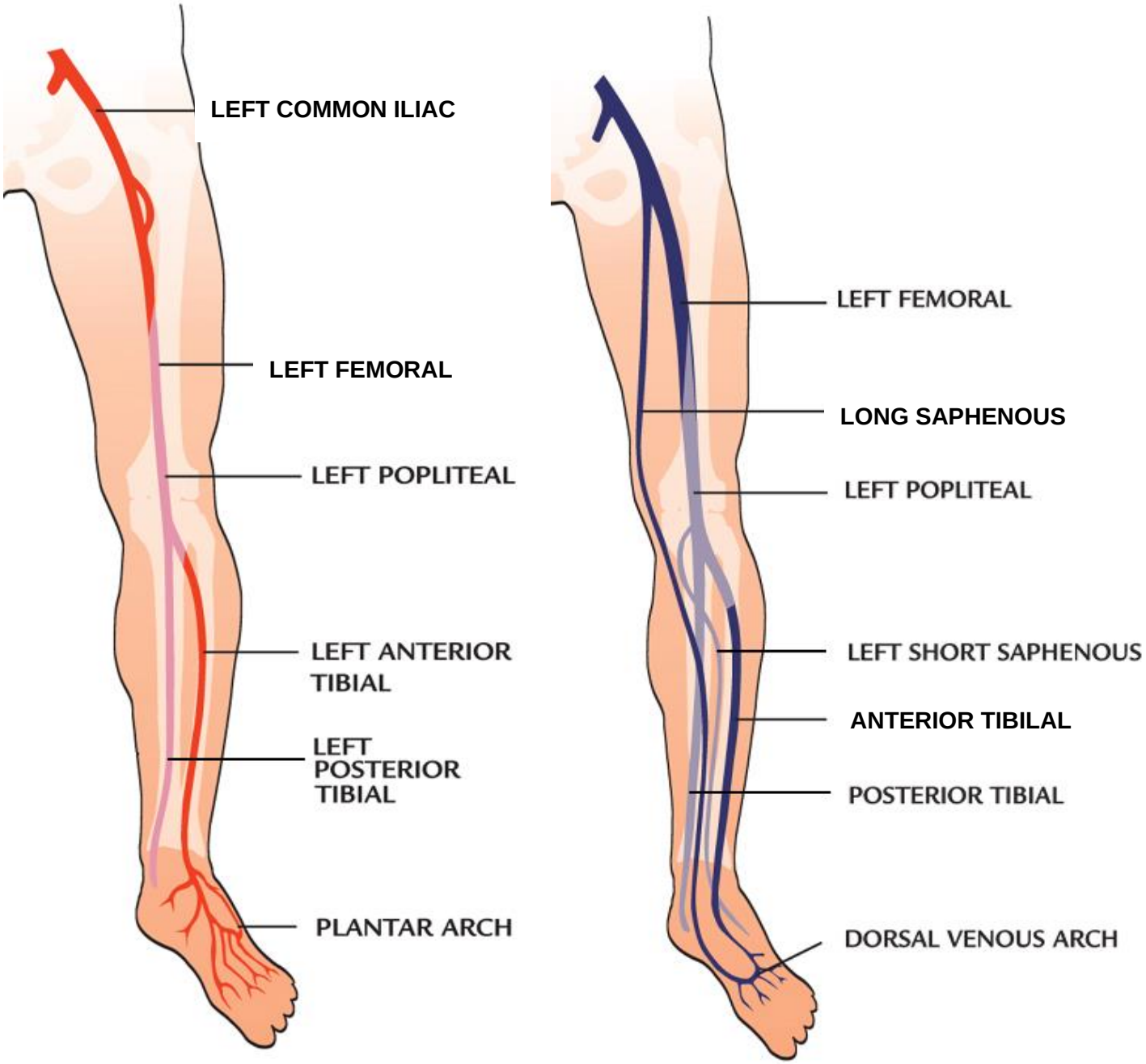


DIAGRAM OF THE MAIN ARTERIES & VEINS OF THE LOWER EXTREMITY



SCHEMATIC DIAGRAM OF THE MAIN ARTERIES OF THE BODY

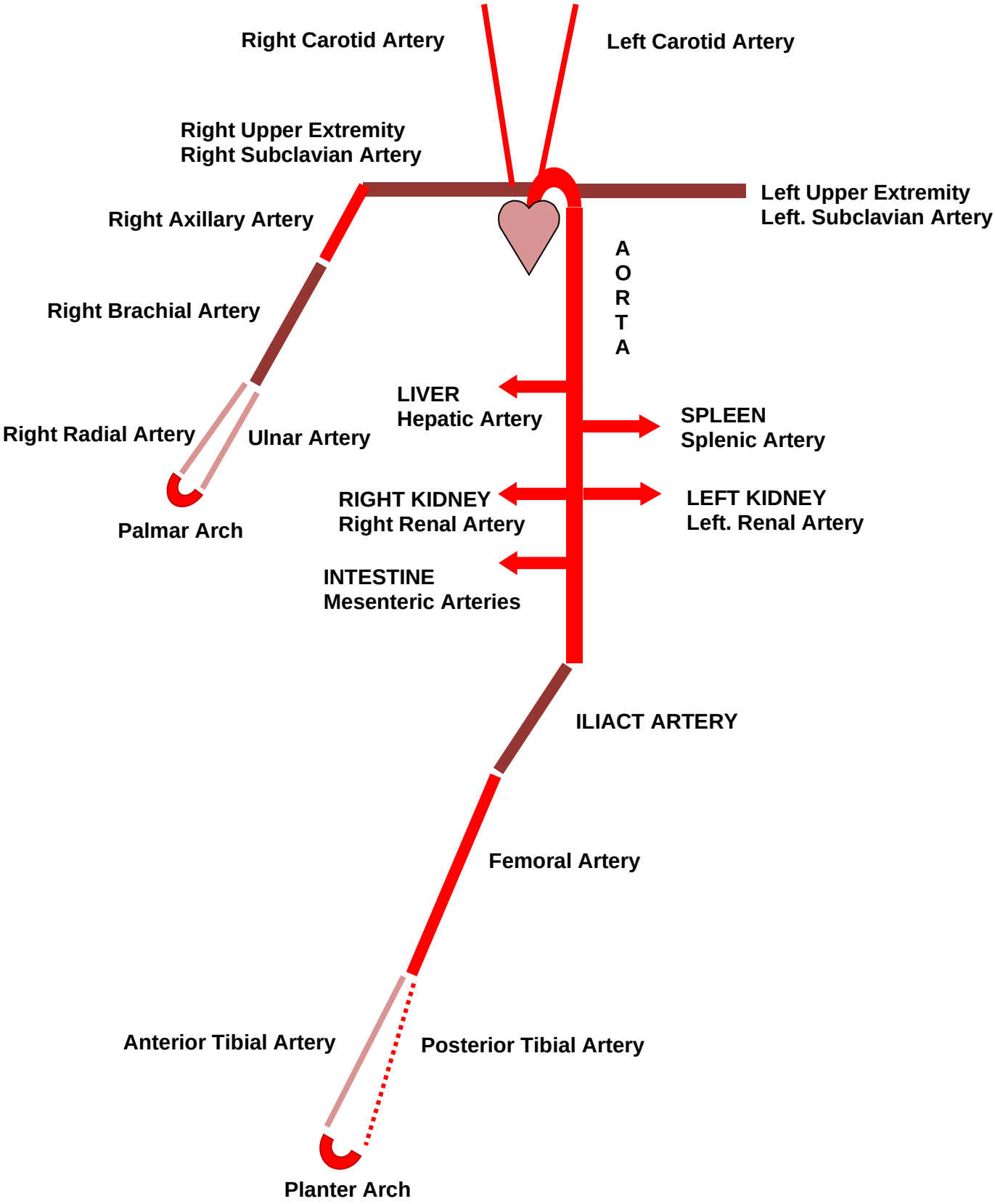
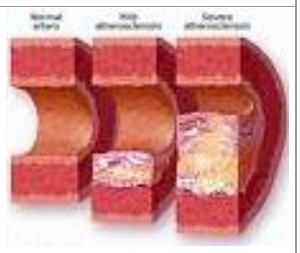
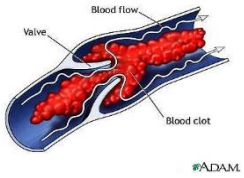
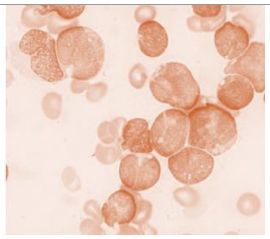


Diagram of the main arteries of the body

Veins: The names of the veins are very similar except:
Neck: There is the Jugular Vein & no Carotid
Trunk: There is the Vena Cava and no Aorta
Upper Extremity: There are some additional veins – **Cephalic**&**Basilic** veins

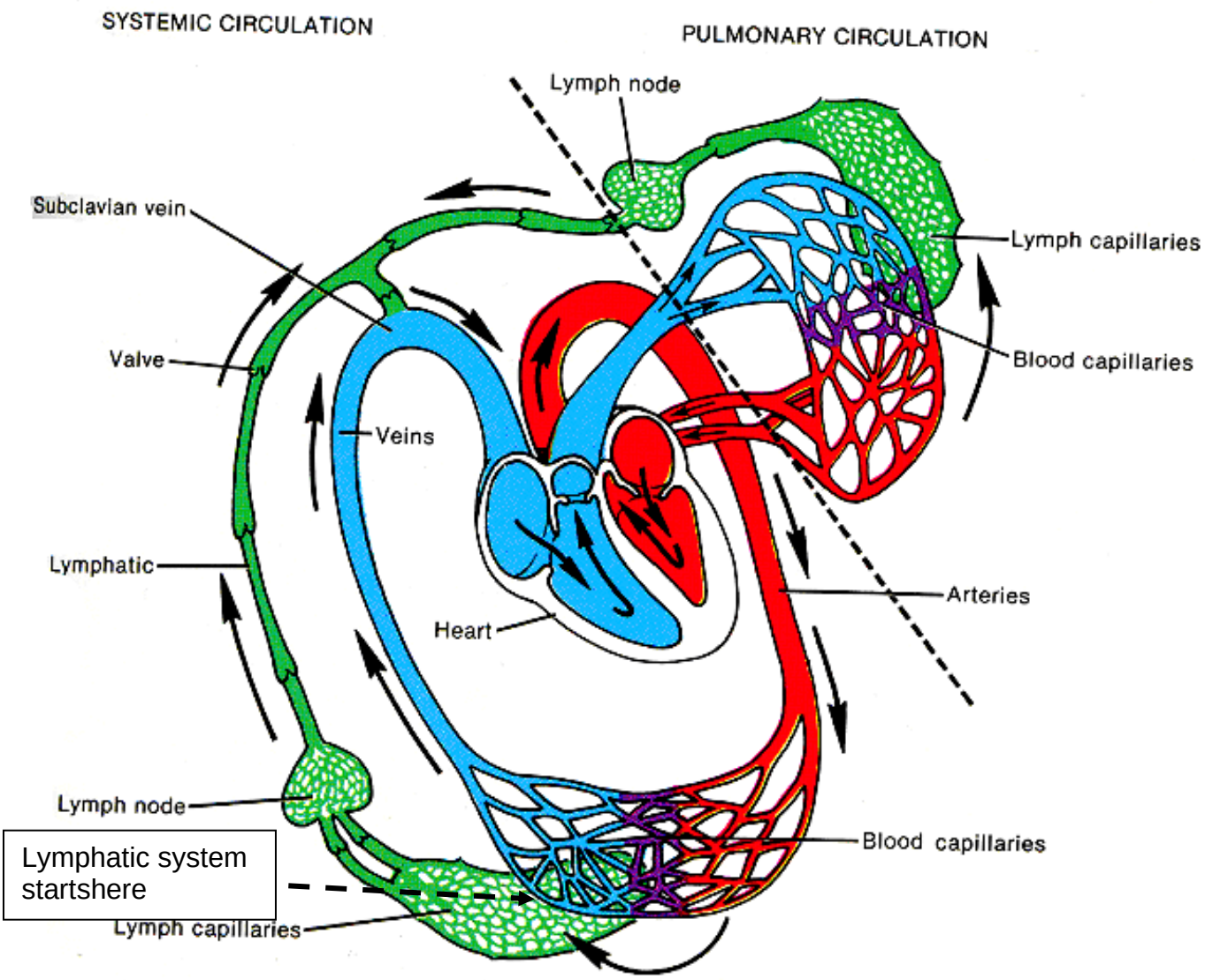
DISORDER OF THE CARDIOVASCULAR SYSTEM

Condition	Description	Picture
Anaemia	Anaemia is a reduction in the blood's ability to carry oxygen, caused either by a decrease in red blood cells, or the haemoglobin they carry, or both. It may be caused by extensive loss of blood, lack of iron in the diet, the failure of bone marrow to produce the normal level of cells or it may be inherited	
Angina	Angina is chest pain or discomfort that occurs when an area of your heart muscle doesn't get enough oxygen-rich blood.	
Atherosclerosis/ Atheroma	A build-up of fats, including cholesterol, inside the arteries which causes a narrowing of the artery passage, hardening of the vessel walls and a loss of elasticity.	
Deep Vein Thrombosis (DVT)	DVT is the formation of a blood clot in a deep vein	
HIV/AIDS	Acquired Immune Deficiency Syndrome (AIDS) is a complex disease that follows infection with the Human Immunodeficiency Virus (HIV). The virus attacks T-lymphocytes, making the immune system incapable offighting disease. It is transmitted through blood and other body fluids.	
High blood pressure (hypertension)	Chronicmedical condition in which the blood pressure is elevated.	
Low blood pressure (hypotension)	Hypotension refers to an abnormally low blood pressure which can be life-threatening.	

Leukaemia	Leukaemia is a cancer of the blood, caused by over-production of white blood cells.	
Varicose Veins	When veins become varicose, the leaflets of the valves no longer meet properly, and the valves don't work. This allows blood to flow backwards and they enlarge even more	

The Lymphatic System

This is a divisional part of the circulatory system. The Cardiovascular system and the Lymphatic system are intimately connected.



Schematic diagram of the Circulatory System

FUNCTION OF THE LYMPHATIC SYSTEM

1. Uptake of **TISSUE FLUID** into lymph capillaries

2. Adding **LEUCOCYTES**&**LYMPHOCYTES** (white cells) into the circulatory system

3. **FILTER** the circulatory system of harmful foreign organisms

4. Absorb **FATS** from the **SMALL INTESTINE**

5. Return excess tissue fluid to blood – about 3 litres per day

TISSUE FLUID (INTERSTITIAL FLUID)

All body tissues are bathed in “Tissue Fluid”. This consists of diffusible elements of the blood (through diffusion or osmosis) and waste materials from cells. See diagram below.

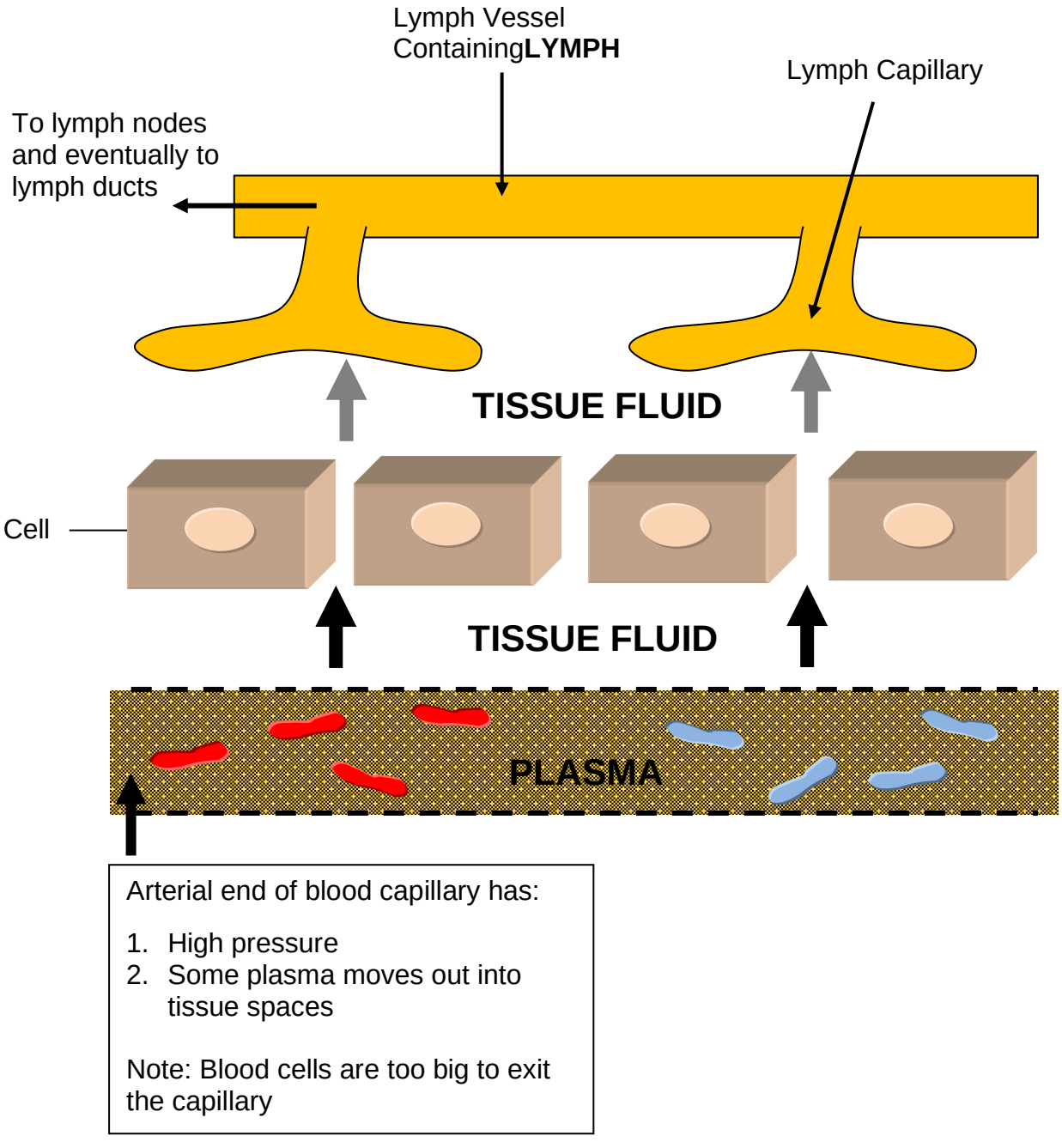
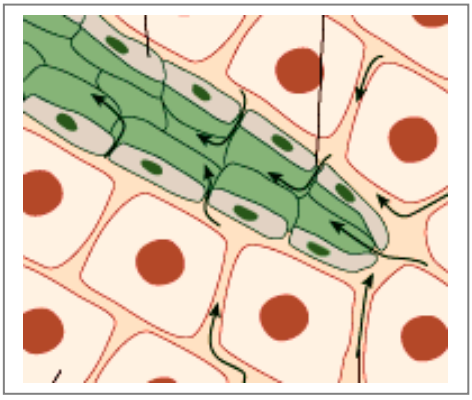


Diagram showing formation of Tissue Fluid & Lymph

COMPONENTS OF THE LYMPHATIC SYSTEM

1. LYMPHATIC CAPILLARIES



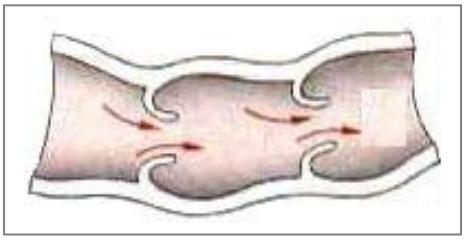
Structure:

- Single layer of **ENDOTHELIAL (SQUAMOUS)** cells
- Are "**blind ending**" i.e. they have a dead end.
- Are in all parts of the body except the **NERVOUS SYSTEM**

Function:

- Carry excess **TISSUE FLUID** away from tissue spaces

2. LYMPHATIC VESSELS



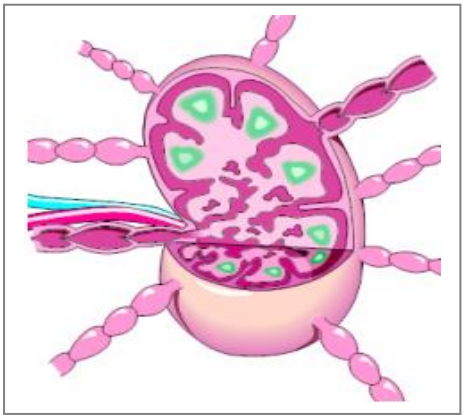
Structure:

- Thin walled, **COLLAPSIBLE** vessels
- They have **VALVES** to prevent back flow
- Valves give a **KNOTTED** appearance
- Have a middle **muscular** and **elastic** layer

Function:

- Collect lymph from lymphatic capillaries to push towards the heart
- Can be found subcutaneous to skin (beneath dermis of skin)

3. LYMPH NODE



Structure:

- Consist of **LYMPHATIC** tissue surrounded by

fibrous tissue and inward strands called **TRABECULAE**

Function:

- **FILTER** lymph of harmful micro-organisms etc.
- Produce **LEUCOCYTES**&**ANTIBODIES**

to add to blood stream via lymph when necessary

4. LYMPHATIC DUCTS

All lymph vessels finally join to form a one large duct on each side to return lymph to the blood.

i. Right side: **LYMPHATIC DUCT** joins the right **SUBCLAVIAN VEIN**

ii. Left side: **THORACIC DUCT** joins the left **SUBCLAVIAN VEIN**

5. LYMPH FLUID

COMPOSTION OF LYMPHATIC TISSUE

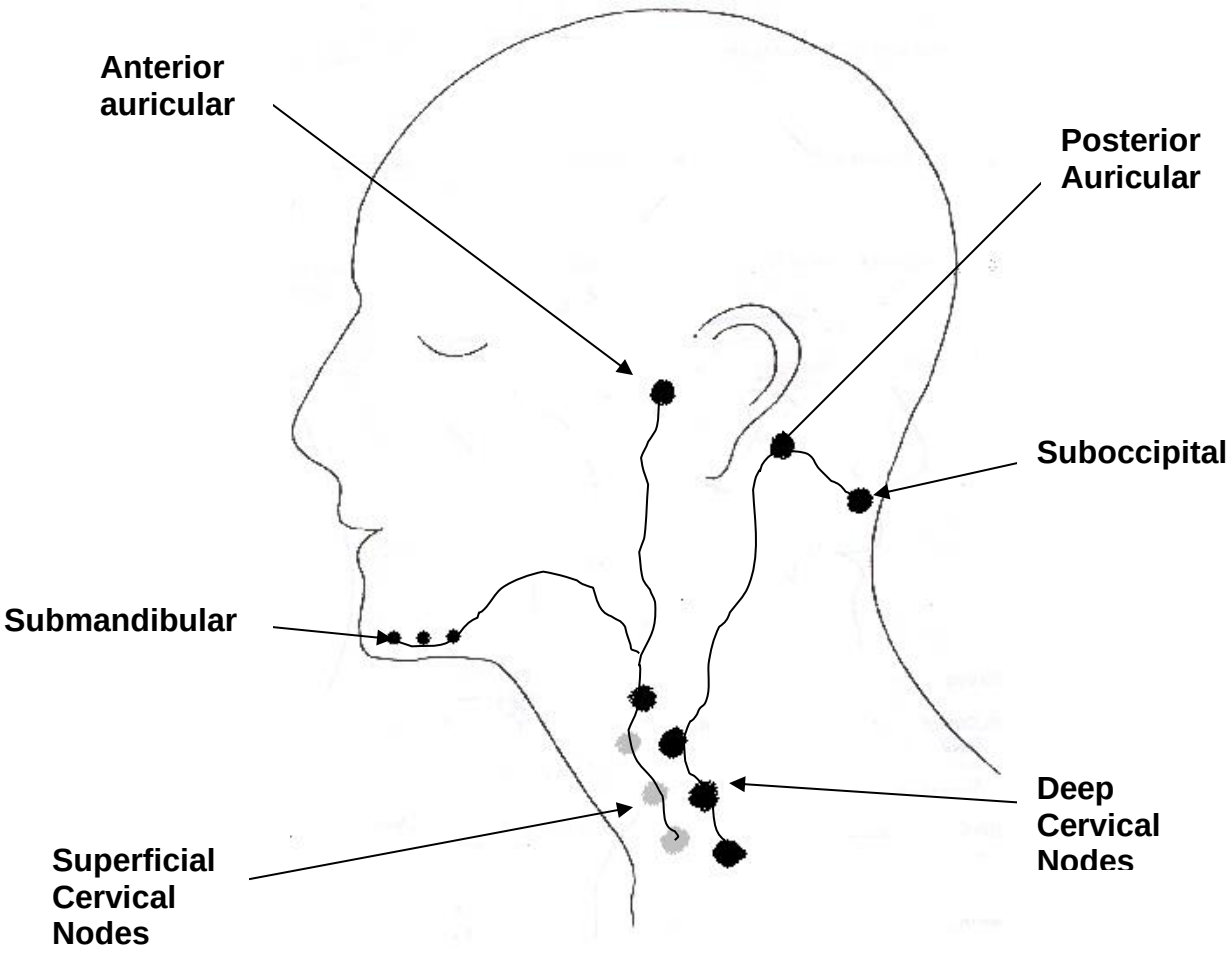
Lymphatic tissue consists of:

- **PHAGOCYTES**: white blood cells which engulf (eat) harmful waste and bacteria
- **LYMPHOCYTES**: white blood cells that produce antibodies

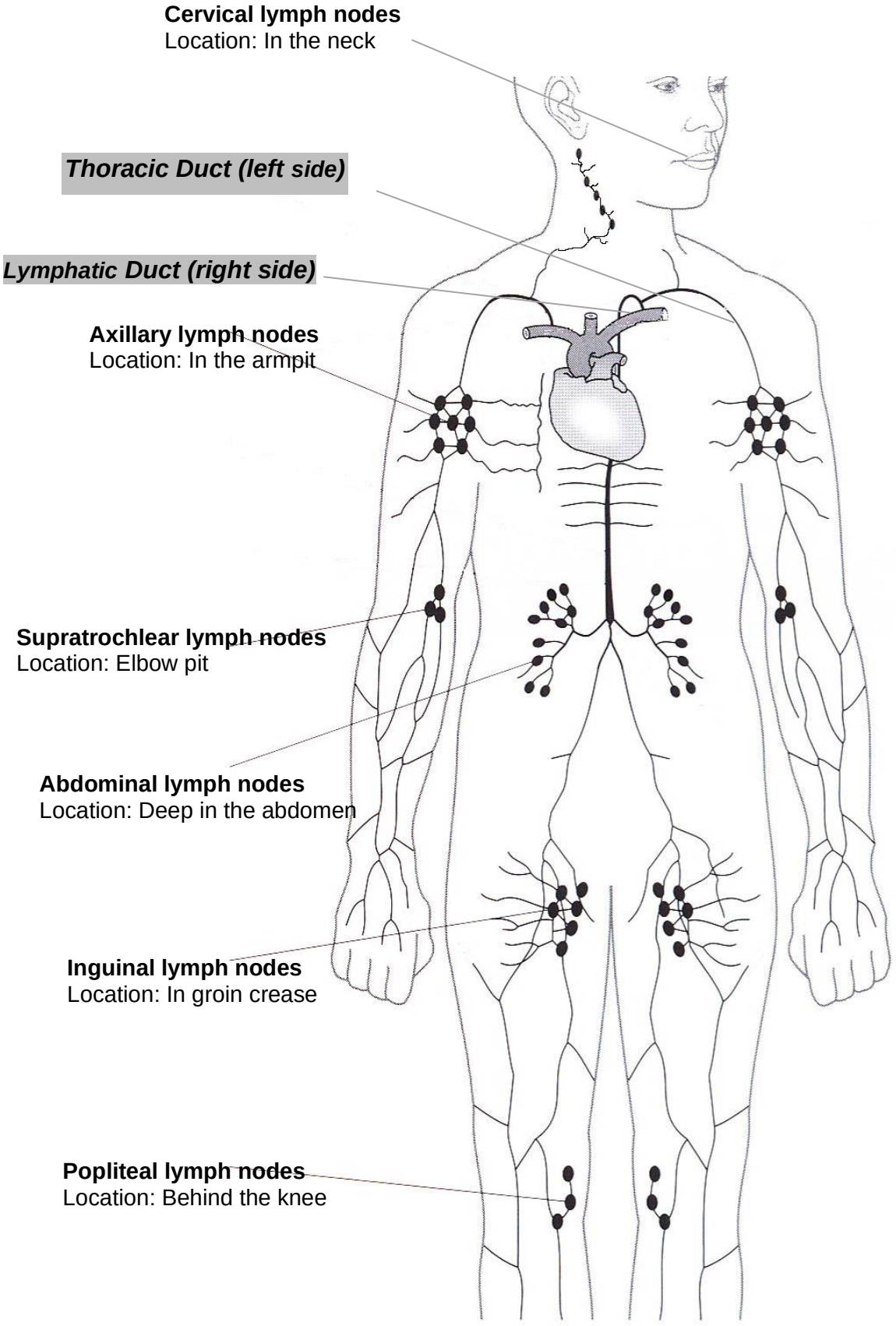
MOVEMENT OF LYMPH

1. Through the contraction of **SKELETAL MUSCLE** (massage action)
2. Slight on-coming pressure from tissue fluid
3. **SUCTION** movement of lymph towards the **THORAX** during **INHALATION**(breathing in).
4. **VALVES** are present to prevent backflow

POSITION OF LYMPH NODES ON THE HEAD AND FACE



POSITION OF LYMPH NODES IN THE BODY



Position of major Lymph nodes in the body

<u>Note: Lymph from BOTH LOWER EXTREMITIES drains into the LEFT SUBCLAVIAN VEIN via the Thoracic Duct</u>

DRAINAGE OF LYMPH IN THE BODY

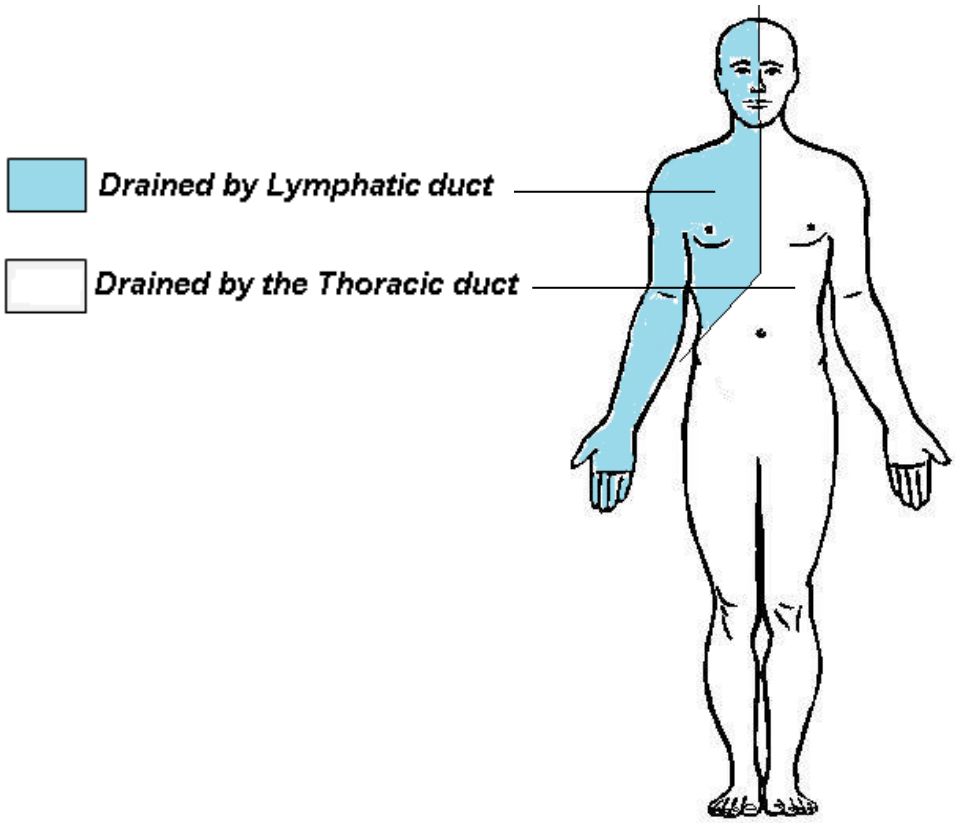
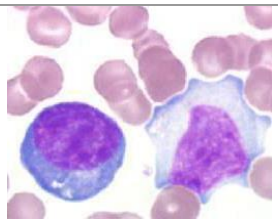
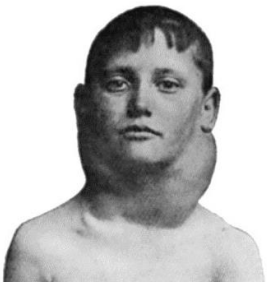


Diagram showing the major lymph drainage of the body

DISORDER OF THE LYMPHATIC SYSTEM

Condition	Description	Picture
Infectious Mononucleosis (Glandular Fever)	Mononucleosis is a viral infection caused by the Epstein-Barr virus. It begins slowly with fatigue, a general ill feeling, headache, and sore throat and the lymph nodes in the neck are frequently swollen and painful.	
Lymphadenitis	Lymphadenitis is the inflammation of lymph nodes.	
Hodgkins Disease ***Non-Hodgkins Lymphoma***	Cancer of the one type lymphatic tissue cells. Cancer of the lymphatic tissue, but different to cells affected in Hodgkins type only. The distinction is important because the treatment and outcomes for each type can be very different.	
Lymphoedema	Oedema associated with an obstruction is the lymphatic vessel and flow of lymph.	

The Respiratory System

FUNCTION OF THE RESPIRATORY SYSTEM

The energy needed by the body to perform given tasks is derived from chemical processes which require the presence of **Oxygen** (**AEROBIC RESPIRATION**).

The Respiratory System provides a route through which oxygen in the atmosphere is taken into the body and a pathway for the excretion of waste products such carbon dioxide into the atmosphere.

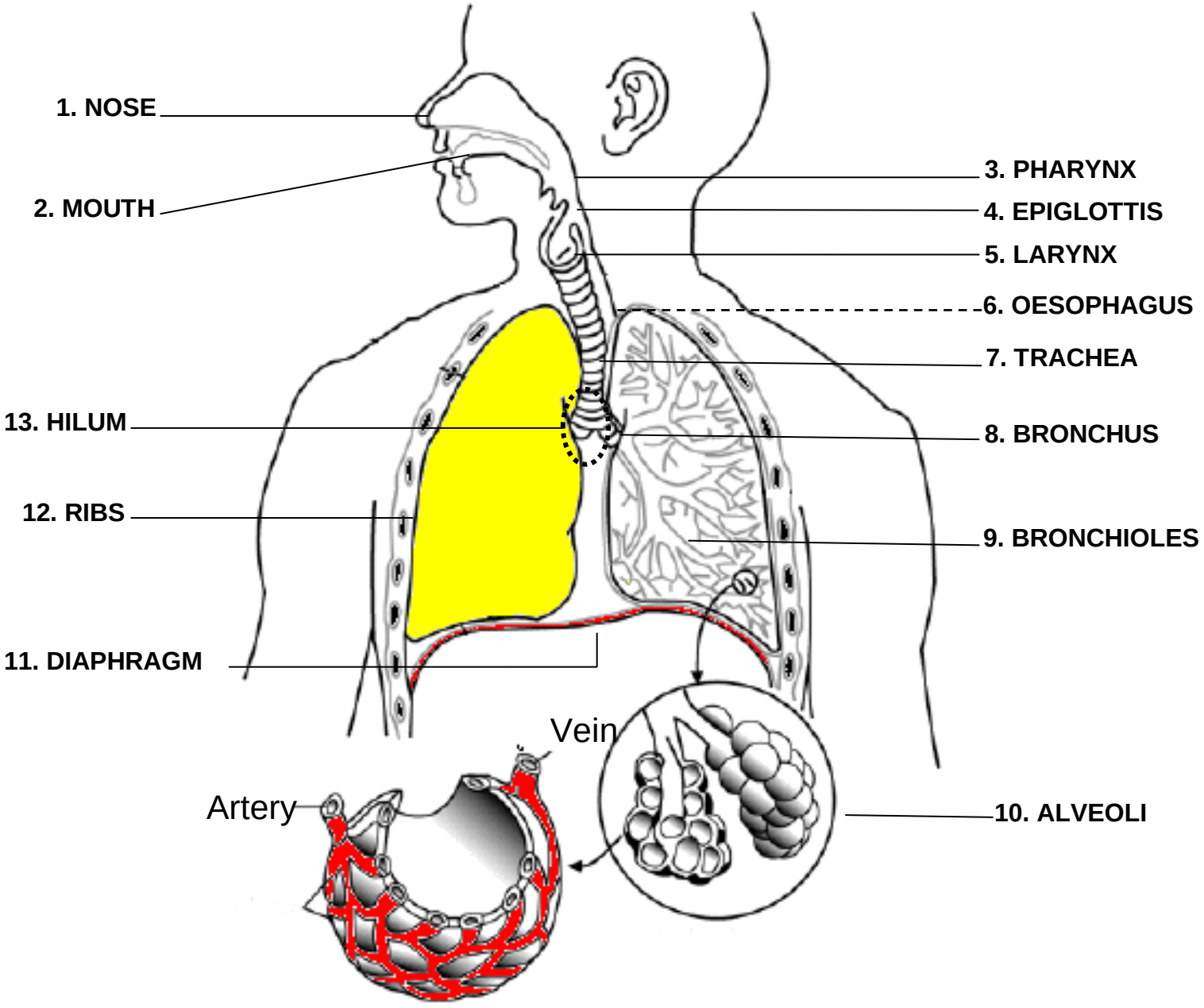
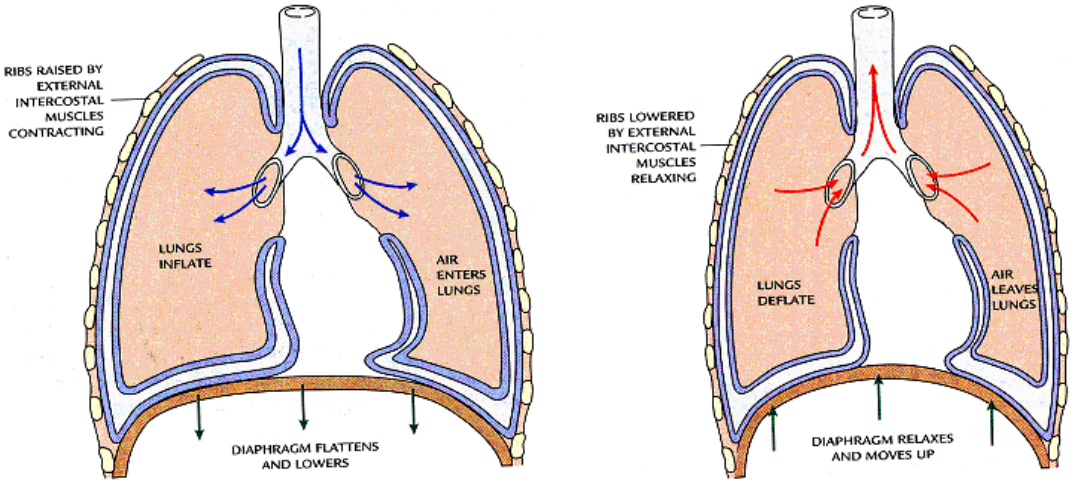


Diagram of the organs of respiration

MECHANISM OF BREATHING

During inspiration, the external intercostal muscles found between the ribs contract, moving the ribs up and out. The diaphragm muscle also contracts and so the ***dome*** shape is ***flattened***. This increases the space in the lungs and causes air to be automatically drawn into them.



During expiration, the external intercostal muscles relax and the ribs return to their resting position. The diaphragm relaxes, returning to its original ***dome*** shape. This causes the space in the lungs to get smaller, forcing air out of them.

ROLE OF THE BRAIN IN BREATHING

Breathing is controlled by the ***medulla oblongata***in the brain. Messages are sent from the brain, through the phrenic nerves to the diaphragm, and by the intercostal nerves to the external intercostal muscles, which cause these muscles to contract. This causes us to breathe in.

When the messages stop, relaxation of the muscles occurs, and so exhalation takes place.

Chemical control

When exercising, more oxygen is required as body metabolism is speeded up. Cells thus produce more waste, including carbon dioxide as a byproduct. The body needs to get rid of this carbon dioxide, and does so by increasing the breathing rate. **Chemoreceptors** are found in the medulla oblongata and in the walls of the aorta and carotid arteries. They are sensitive to carbon dioxide levels in the blood. When stimulated, they send messages to the respiratory centre in the brain, which causes an increase in the breathing rate.

EXTERNAL RESPIRATION

This is the mechanism which enables the entrance and exit of air into the body as well as exchange of gases between the BLOOD and the ALVEOLI.

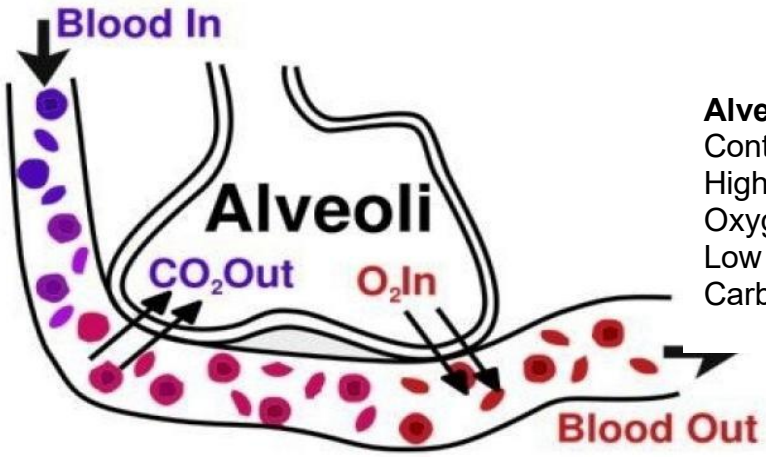
This exchange of gases occurs due to **DIFFUSION**(see below).

Although the diaphragm is the principle muscle involved, the **EXTERNAL INTERCOSTAL** muscles also assist in breathing.

External Respiration at Cellular Level

Deoxygenated Blood:
Contains:

Low levels of Oxygen
High levels of Carbon Dioxide

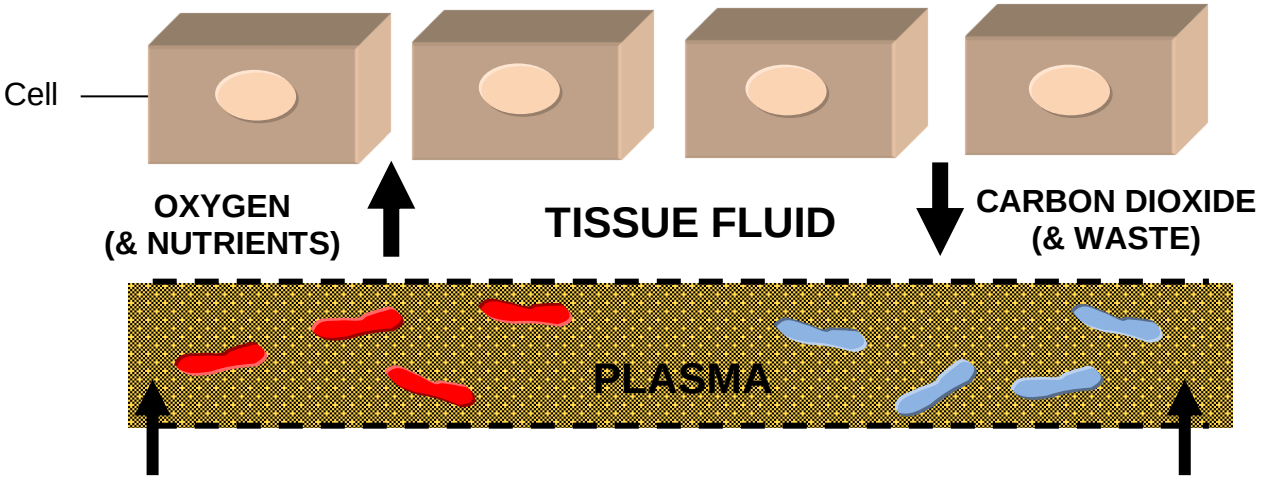


Alveolus:
Contains
High levels of Oxygen
Low levels of Carbon Dioxide

Gases move by process of **DIFFUSION**

INTERNAL RESPIRATION

This is the process of gaseous exchange that happens at cellular level once the heart has pumped the oxygenated blood to areas which require oxygen. The process of gaseous exchange is based on the same principle as above.



Arterial end of blood capillary has:

3. High pressure
4. Oxygen & Nutrients diffuse into the tissues

Note: Blood cells are too big to exit the capillary

Venous end of blood capillary has:

1. Low pressure
2. Waste Material e.g. CO^2 have diffused into the vessel

Diagram showing exchange of gases at tissue level

Digestive System

The Digestive system (Alimentary Canal) provides a system whereby large complex foods are broken down and absorbed into the body so that the raw materials for body normal functioning are made available.

Food substances are digested by chemicals called ***enzymes*** which help break down food into its basic compounds. You can usually tell if a substance is an enzyme as the name ends in “ase”. E.g. Amylase, Maltase, Sucrase.

THE STRUCTURES OF THE DIGESTIVE SYSTEM

The Digestive track is more than 10 metres long, starts at the mouth and ends at the anus.

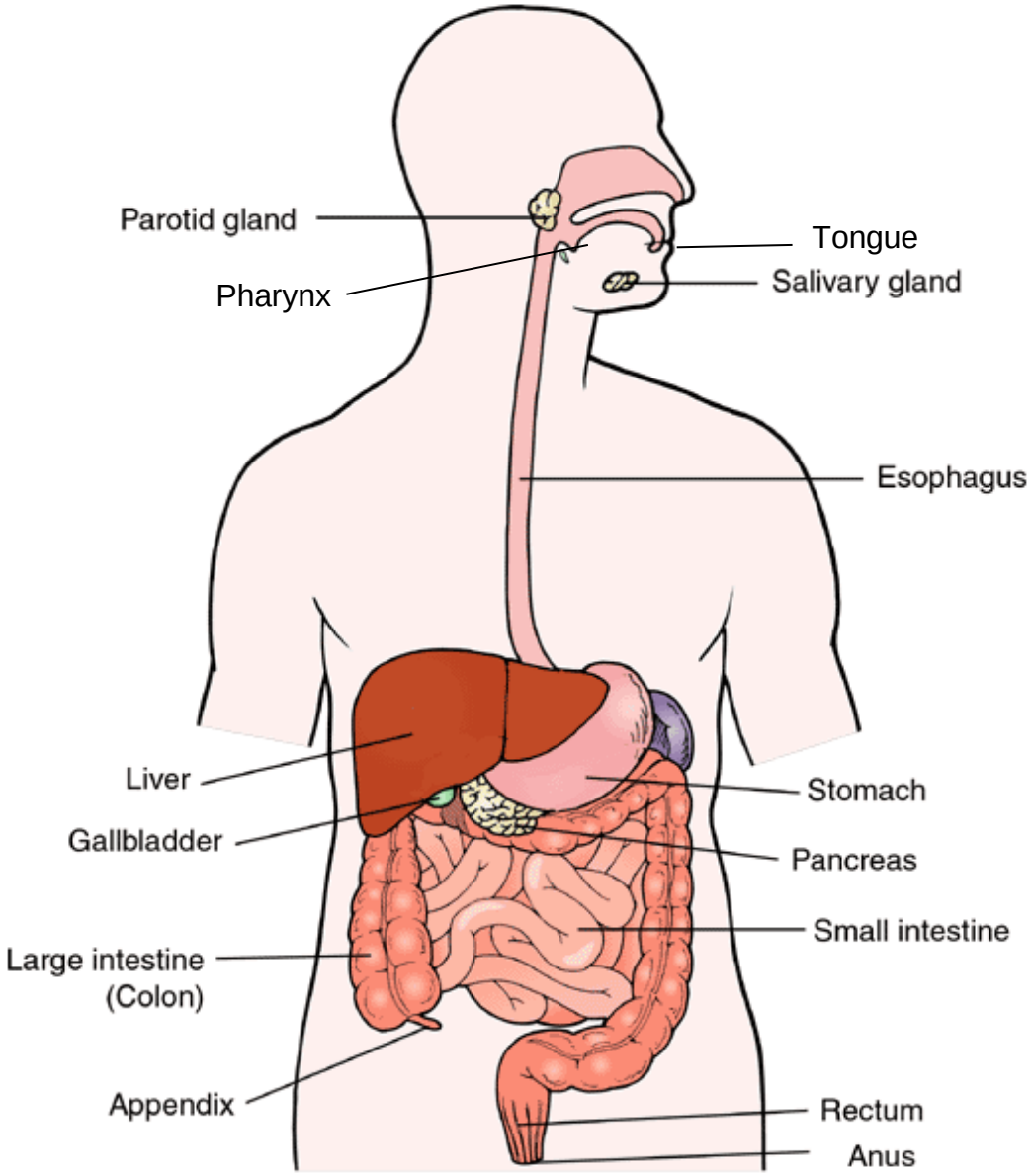
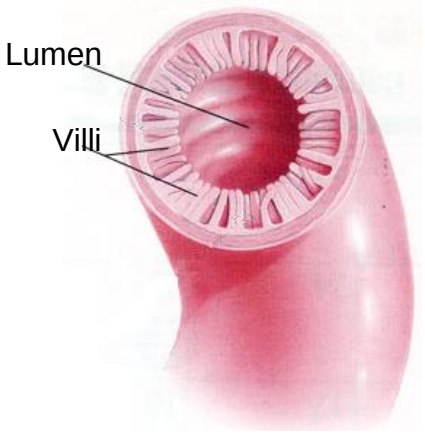
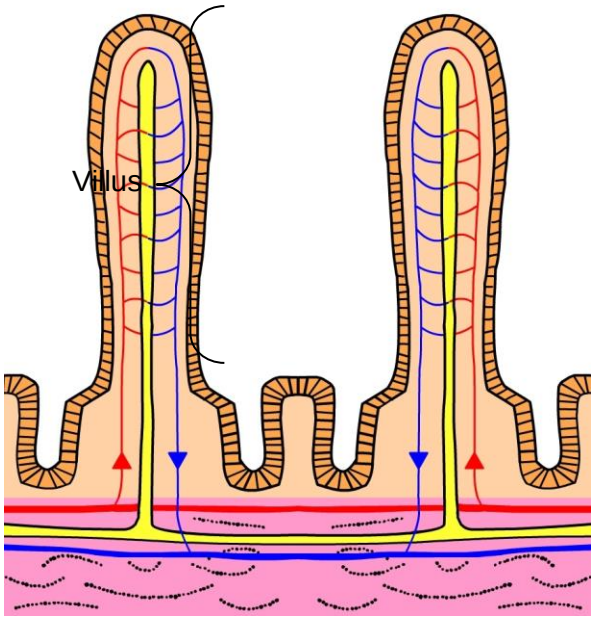
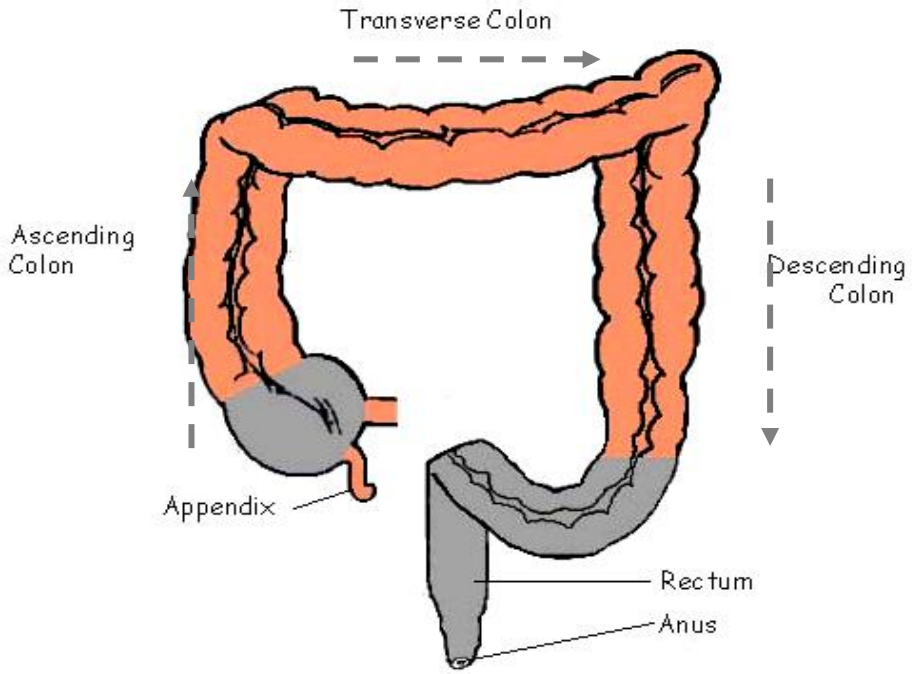


Diagram showing the Digestive System

THE ORGANS & FUNCTIONS OF THE DIGESTIVE SYSTEM

Organ	Structure
Salivary Glands	There are 3 salivary glands which secrete saliva. 1. ***Parotid glands*** – situated below the ***ear*** 2. ***Sublingual glands*** - situated below the ***tongue*** 3. ***Submandibular glands*** - situated below the ***tongue*** Saliva lubricates the food and has enzymes which start to break down food. ***Teeth*** in the mouth help to break food into ***small*** parts which are easier to swallow and digest.
Tongue	The tongue is covered by small projections called ***papillae***which contains taste buds. It is able to taste ***sweet, salty, sour*** and ***bitter*** flavours. The tongue helps to roll chewed food into a ***bolus*****,** which makes it easier to swallow.
Pharynx	This is essentially the ***throat*** area and has muscles which help push food down into the Oesophagus. There is a small flap of cartilage called the ***Epiglottis*** that prevents food being swallowed entering the lungs.
Oesophagus	This is a muscular tube that leads to the ***stomach***. It is lined by mucus so as to allow smooth passage of food material and to protect the oesophageal tissue from digestion of body acids and enzymes. Food is propelled down towards the stomach by the process of ***peristalsis***. Peristalsis is a wave of contraction occurring in the muscles of the oesophageal wall which helps push food along.
Stomach	The stomach is a ***muscular j shaped sac*** and has the primary function of churning ingested food material. Its openings are guarded by circular bands of muscle - the ***Cardiacsphincter*** and the ***Pyloricsphincter*** which control the movement of food in and out of the stomach. **T**he stomach contains glands which will release ***Gastric Juices***. This contains ***1. Pepsin –*** for protein digestion 2. ***Rennin –*** to help curdling of milk (usually only present in infants) 3. ***Hydrochloric acid –*** helps neutralises bacteria entering the stomach

Small Intestine	This is 6m long and is the place where most of the digested nutrients are absorbed. The Small Intestine is divided into 3 different parts: **1. *Duodenum*** **2. *Jejunum*** **3. *Ileum*** The Ileum has millions of tiny finger like projections called ***Villi***. Its structure is as follows:   The Small Intestine functions to complete digestions and absorb any ***nutrients*** into the blood vessels. ***Fats*** take a different route and are absorbed into the ***Lacteals*** which are part of the Lymphatic system. This is eventually returned to the blood circulation via the two main Lymphatic Ducts. The Small Intestine also has glands and secretes ***Intestinal Juices*** which contains enzymes that will assist in the further digestion of food.

Large Intestine (Colon)	The large Intestine is apprximately1.5m long and divided into 3 parts: 1. ***Ascending Colon*** 2. ***Transverse Colon*** 3. ***Descending Colon***  It deals with ***undigested*** products of digestion such as fibre which is now waste matter. Its main function is to absorb any remaining ***water*** and therefore make the remainder of waste more compact so that it is easier to expel. The expelled waste is called ***Faeces*** and contains unwanted leftovers, combined with cellulose, dead blood cells, bacteria, fatty acids and mucus.
Rectum (part of colon)	About 13 cm long and has two sphincter muscles at the end which forms the ***Anus***. Waste matter is expelled through the anus. This is called ***elimination.***

ACCESSORY ORGANS OF DIGESTION

There are 3 other organs involved in the digestive process. They are termed "***Accessory***" because although food does not pass through them directly, they help the digestive process.

Liver	The Liver lies under the diaphragm on the right hand side of the body and is protected by the lower ribs. Most of the blood entering the Liver comes from the ***Hepatic Portal Vein*** which carried blood from the Stomach, Intestine, Spleen, Pancreas and Gall Bladder **Functions**: The functions of the liver include: • storing and filtering the ***blood*** • destroying bacteria and worn out ***red blood cells*** • breaking down excess proteins into ***urea*** which is excreted in the urine • secreting ***bile*** to help break down fat • ***detoxification*** of harmful substances such as alcohol, paracetamol and other chemicals into safer forms • storage of ***vitamins*** A, D, E and K, and iron • storage of ***glycogen***, which can be broken down into ***glucose*** and used for energy by the body when required • ***converting*** certain nutrients into others - amino acids (protein) can be turned into lipids (fats) or glucose (sugar) if required.
Gall Bladder	The Gallbladder is a pear-shaped sac which stores ***bile*****,** a greenish fluid produced by the liver. After food has been eaten, bile is released and travels down the ***bileduct***to the duodenum where it begins to break down ***fats*** into small droplets which are easier for lipase to digest.
Pancreas	The Pancreas is a gland which is situated behind the stomach and attached to the duodenum through the pancreatic duct through which it secretes ***PancreaticJuices***. Pancreatic Juices contain many enzymes which help digestion. Some of these are: • ***Lipase*** for fat digestion. • ***Amylase*** for starch digestion. • ***Trypsin*** for protein digestion The Pancreas also releases the hormone (chemical messenger) ***Insulin*** which helps regulates blood sugar. This is released from structures called the ***Islets of Langerhan.***

BREAKDOWN OF FOODS

The aim of chemical digestion is to breakdown complex foods into smaller substances which the body can then use.

Food substances can be divided into the following 3 main categories, plus Vitamins & Minerals.

The table below shows how the various substances are broken down, each stage requiring the presence of ***enzymes*** (***biological catalysts***).

Proteins	Fats (Lipids)	Carbohydrates
Protein Food (Large Polypeptide Chains) ↓ ***Small Peptides*** ↓ ***Amino Acids***	***Fats*** ↓ ***Fatty Acids + Glycerol***	***Polysaccharides (Complex sugars)*** ↓ ***Disaccharides "double sugars" (e.g. maltose, lactose, sucrose)*** ↓ ***Monosaccharides single units of sugar (e.g. glucose, fructose)***
Vital for ***growth*** and ***repair*** of cells	Provide ***insulation***&***energy*** Protect the ***organs*** Transport fat soluble vitamins	Provide ***energy*** for the ***body***

FATS

There are two main types of fat:

Saturated fat is found in animal products such as meat, butter, and full-fat cheese. These fats are the most damaging to health as saturated fat is converted to cholesterol by our bodies. This may cause raised levels of bad blood cholesterol, which clog up the arteries and lead to heart disease and strokes.

Unsaturated fats are derived from plants. There are two kinds of unsaturated fats: monounsaturated and polyunsaturated. Monounsaturated are the healthier choice as they are said to lower bad blood cholesterol. Olive oil and rapeseed oil are good sources.

CARBOHYDRATES (SUGARS)

Monosaccharidesare known as **single sugars** or **simple sugars.** They are small, sweet to taste and soluble in water. An example is fructose found in fruit and honey. The liver converts fructose into glucose. Glucose is very important as all the body's cells require it.

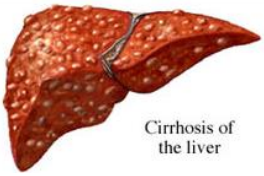
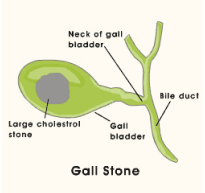
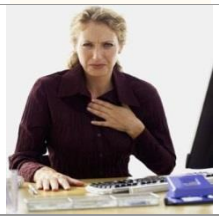
Dissaccharidesare known as **double sugars.** They are small, sweet to taste and soluble in water. They are formed when two monosaccharides join together. Examples of disaccharides include lactose (the sugar found in milk) and sucrose (found in sugar).

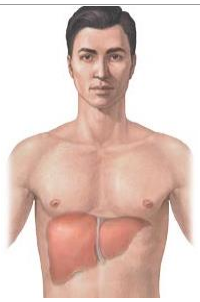
ENZYMES INVOLVED IN THE BREAKDOWN OF FOODS

The table below shows some enzymes involved in the breakdown of the three main food categories.

Organ	Enzyme	Action
Mouth **(Salivary Glands)**	***Saliva*** ▪ ***Salivary Amylase***	Cooked starch into ***polysaccharides***
Stomach	***Gastric Juices*** ▪ ***Renin*** ▪ ***Pepsin*** ▪ ***Hydrochloric Acid***	Turns milk into ***curds*** ***Proteins*** → Polypeptides Neutralises ***bacteria***
Duodenum	***Pancreatic Juice*** ▪ ***Trypsin*** ▪ ***Lipase*** ▪ ***Amylase***	Polypeptides → ***Peptides*** Fats → Fatty Acids &***Glycerol*** Polysaccharides → Disaccharides (***Maltose***)
Small Intestine	***Intestinal Juice*** ▪ ***Maltase*** ▪ ***Sucrase*** ▪ ***Lactase***	Disaccharides to Monosaccharides Maltose → Glucose + Glucose ***Sucrose*** → Glucose + ***Fructose*** Lactose →***Glucose*** + Galactose

DISORDER OF THEDIGESTIVE SYSTEM

Condition	Description	Picture
Anorexia Nervosa	Anorexia is a loss of appetite. Anorexia nervosa is a psychological condition which often affects teenage girls and young women. The sufferers have a fear of gaining weight or being fat and refuse to eat very much or stop eating altogether. It can be severely debilitating and sometimes fatal.	
Appendicitis	Acute inflammation of the appendix, usually treated by removal of the organ.	
Bulimia Nervosa	Bulimia is an insatiable hunger during binging episodes coupled with compensatory evacuation methods such as self-induced vomiting and excessive use of laxatives. Bulimia nervosa is a psychological condition which often affects teenage girls and young women, and increasingly young men	
Cirrhosis of the Liver	Chronic damage to an organ causing hardening. Several types of cirrhosis exist but the most common is cirrhosis ofthe liver, which is frequently caused by excessive alcohol consumption.	
Coeliac's Disease	Celiac disease is a digestive disease that damages the small intestine and interferes with absorption of nutrients from food. People who have celiac disease cannot tolerate gluten, a protein in wheat, rye, and barley.	
Gall Stones	Stones formed from residues of bile pigments, cholesterol and calcium salts, found in the gall bladder.	
Heartburn - Reflux oseophagitis	Burning sensation in oesophagus or throat, caused by back flow and regurgitation of acidic stomach contents.	

Hepatitis A, B & C	**Hepatitis A** is the most common of the seven known types of viral hepatitis. Infection with the hepatitis A virus leads to inflammation of the liver, but complications are rarely serious. **Hepatitis B** is similar to hepatitis A in its symptoms, but is more likely to cause chronic long-term illness and permanent damage to the liver if not treated. **Hepatitis C**, like other forms of hepatitis, causes inflammation of the liver. The hepatitis C virus is transferred primarily through blood, and is more persistent than hepatitis A or B.	
Hernia - Abdominal, Hiatus	A rupture, in which an organ pushes through the surface of the structures which normally hold it in.	
Indigestion (Dyspepsia)	Indigestion is just another name for an upset stomach. Indigestion usually happens when people eat too much or too fast, or certain foods don't agree with them.	
Irritable Bowel Syndrome (IBS)	No exact cause is yet known for irritable bowel syndrome (sometimes referred to as IBS), though stress and low-fibre, high fat diets are said to contribute. Symptoms include stomach and bowel pain and alternate bouts of diarrhoea and constipation.	
Ulcer (Duodenal, Peptic)	Erosion in the walls of the digestive system, often caused by too much acid	

Neurological System

The Neurological or Nervous System transmits and receive messages to and from the brain and all parts of the body. It can be thought of as the electrical wiring of the body.

THE NERVE CELL

The basic cell of the nervous system is called the **NEURONE**

DENDRITES
Transmit nerve impulses **to** the Cell Body

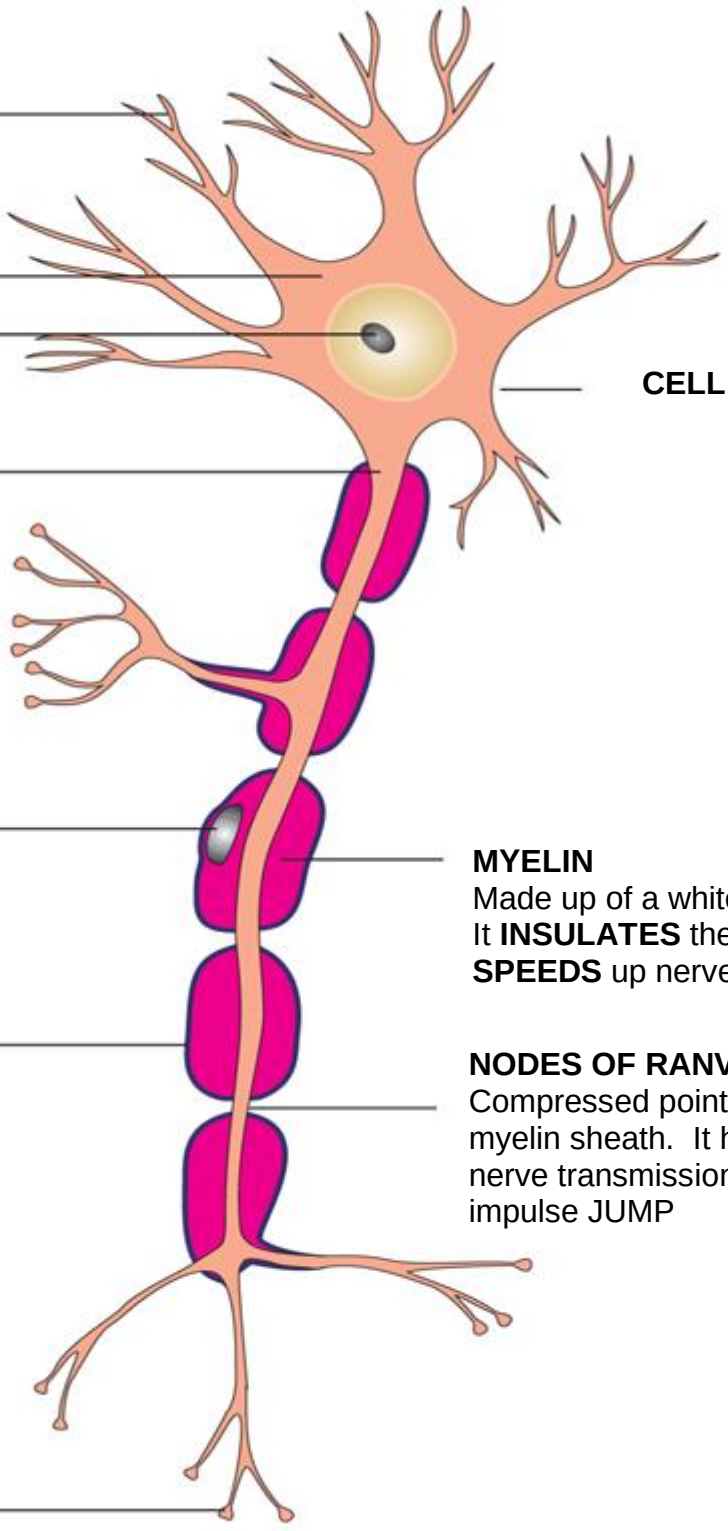
CYTOPLASM

NUCLEUS

CELL BODY

Direction of Impulse

AXON
Long single nerve fibre which transmits impulses **away** from the cell body



NUCLEUS IN MYELIN SHEATH

MYELIN
Made up of a white fatty substance. It **INSULATES** the axon and **SPEEDS** up nerve transmission

NEURILEMMA
Fine delicate membrane which surrounds the axon and helps **REGENERATE** the nerve cell.
It is only found in **PERIPHERAL NERVES**

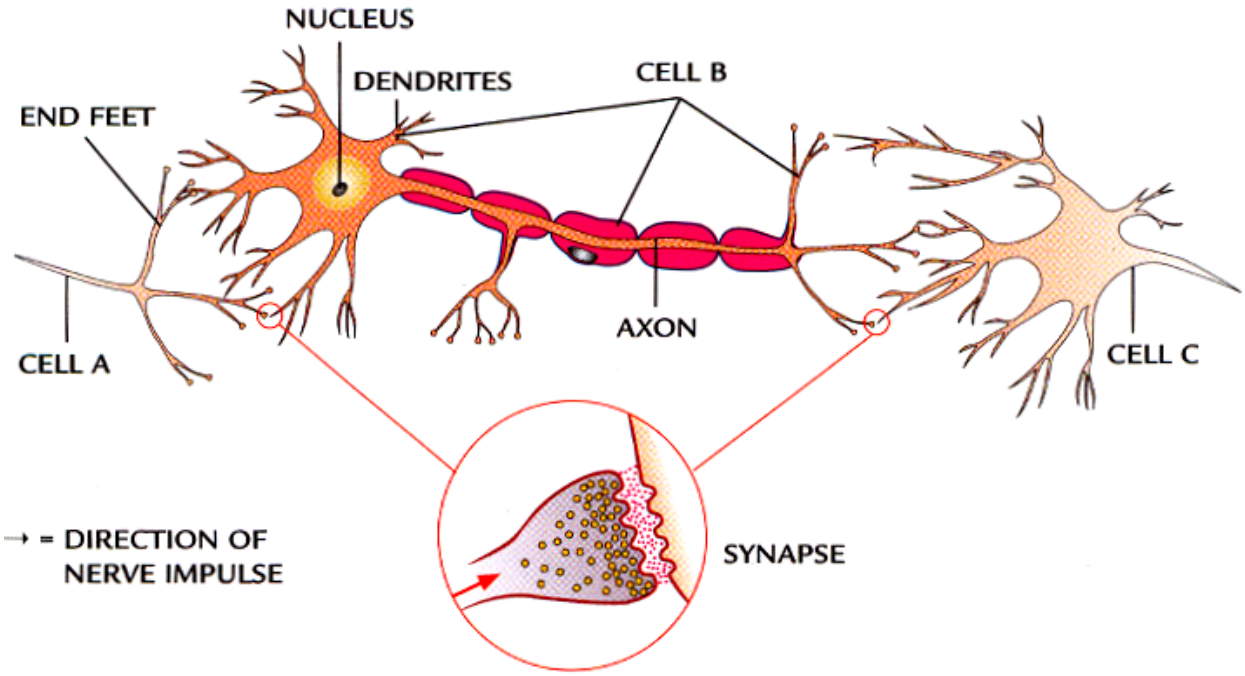
NODES OF RANVIER
Compressed points along the myelin sheath. It helps **SPEED** up nerve transmission by making the impulse JUMP

AXON TERMINAL

Diagram of Neuron and Nerve Sheath

HOW NERVES TRANSMIT IMPULSES

Neurones transmit nerve impulses to other neurones or organs such as muscles. When two neurones meet there is a gap between them called a ***synapse***. The nerve impulse is transferred to the next neurone by the release of chemicals (neurotransmitters), which diffuse across the synapse. The chemicals then set off a new ***electrical signal*** in the next neurone.



The signal is thus transmitted along a nerve fibre until it reaches its target.

TYPES OF NERVOUS TISSUE

Individual neurones have the same function throughout the body (to transmit information), but collectively they make up three different types of nerves and nervous tissue which have specific function:

	Type	Function
1	***Motor Nerve (Efferent Nerves)***	▪ Carry impulses from brain or spinal cord to muscular tissue ▪ Provide instruction to muscle on movement and contraction
2	***Sensory Nerve (Afferent Nerves)***	▪ Carry impulse from all sensory parts of the body, including the sense organs to the brain.
3	***Mixed (Motor & Sensory Nerves)***	▪ Carry both motor and sensory nerves ▪ Are only present in the **PERIPHERAL NERVES**

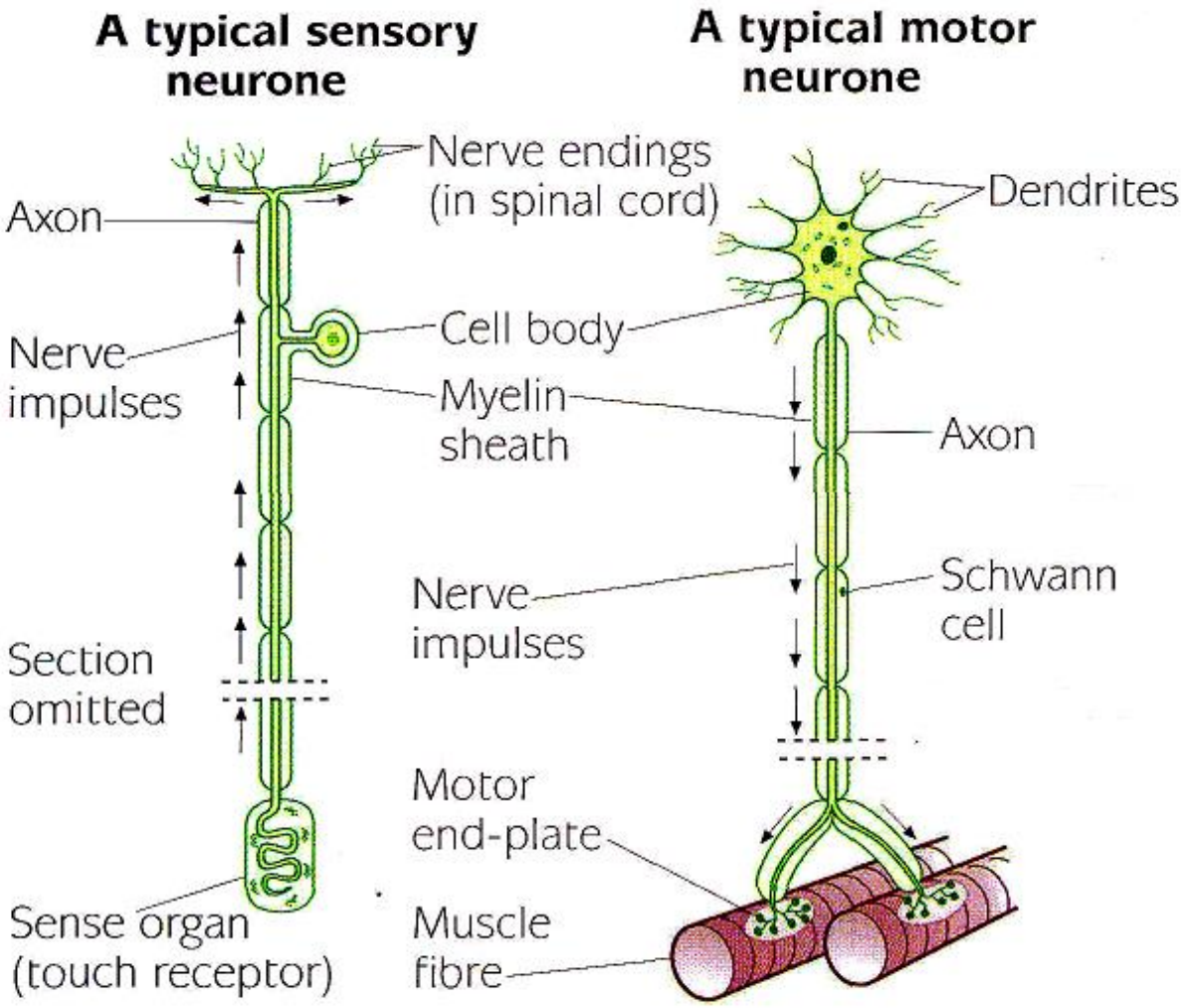


Diagram showing a Sensory & Motor Nerve

DIVISIONS OF THE NERVOUS SYSTEM

The nervous system can be divided into the

1. **Central Nervous System (CNS) – Brain & Spinal Cord**
2. **Peripheral Nervous System – All nerves outside CNS**
   - ***Cranial Nerves – 12 pairs***
   - ***Spinal Nerves – 31 pairs***
3. **Autonomic Nervous System**
   - ***Sympathetic Nervous System***
   - ***Parasympathetic Nervous System***

1. CENTRAL NERVOUS SYSTEM (CNS)

BRAIN

The central nervous system consists of the Brain and Spinal Cord. The brain is the most important part of the system and contains 100 billion neurones. The brain receives and stores messages as well as transmitting them to all parts of the body to stimulate organs to do their work.

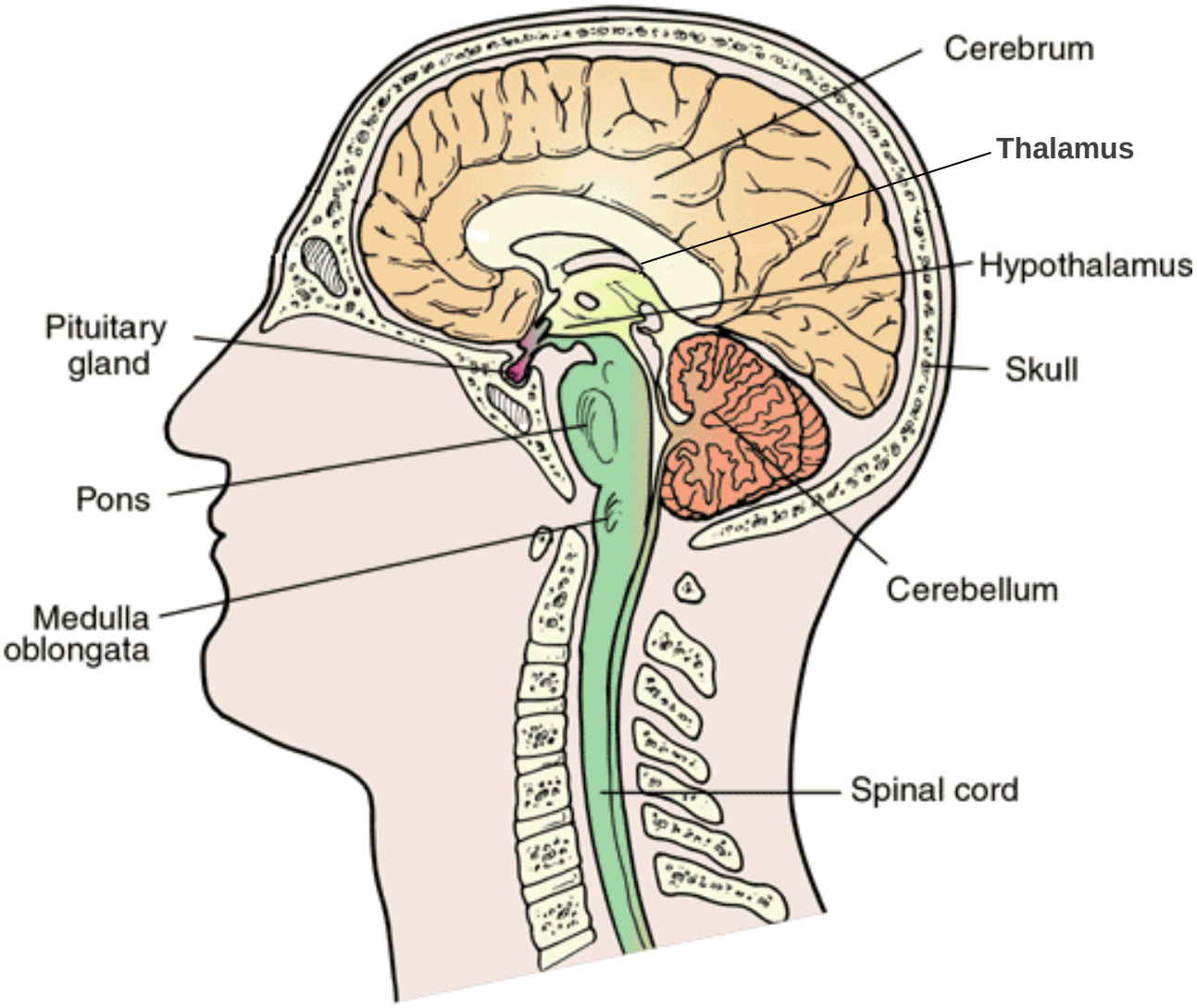


Diagram of a longitudinal section of the Brain

STRUCTURES OF THE BRAIN

Structure	Function
Cerebrum	The cerebrum is the largest portion of the brain. It is a dome shaped area of nervous tissue split into two halves: the**left hemisphere,** which controls the right side of the body. In most people the left hemisphere is more important for language, numerical and scientific skills the**right hemisphere,** which controls the left side of body. The right side is the creative side and is important for musical and artistic ability. The **grey matter** on the surface of the brain is made up of nerve cell bodies and is where the main functions of the cerebrum are carried out. These include all conscious activities such as touch, taste, smell, hearing, vision and all voluntary muscular movement. The cerebrum also controls the powers of reasoning, learning, emotion and memory. The **white matter** of the brain and spinal cord consists of nerve fibres (axons) in white myelinated sheaths.
Cerebellum	The cerebellum deals with movement. It helps to control our balance and posture. It maintains muscle tone and co-ordinates muscles during activities such as walking and running. It is also responsible for learning skills such as playing the piano or riding a bike.
Brain Stem	The brain stem is made up of three parts: the **medulla oblongata,** the **pons varolii**and the **mid-brain.** The midbrain is found between the cerebrum and cerebellum.
Medulla oblongata	The medulla oblongata is a mass of grey matter. It regulates the heart and breathing rates, constriction and dilation of the blood vessels, body temperature and the reflex actions of sneezing, coughing, vomiting and swallowing.
Pons Varolii	The pons varolii forms a bridge *(pons* is Latin for `bridge') that transmits messages between the spinal cord, cerebellum and cerebrum.
Hypothalamus	The hypothalamus controls the activities of the autonomic nervous system and an endocrine gland called the **pituitary gland.** The hypothalamus is one of the main regulators of homeostasis, helping to maintain a constant internal environment in the body.

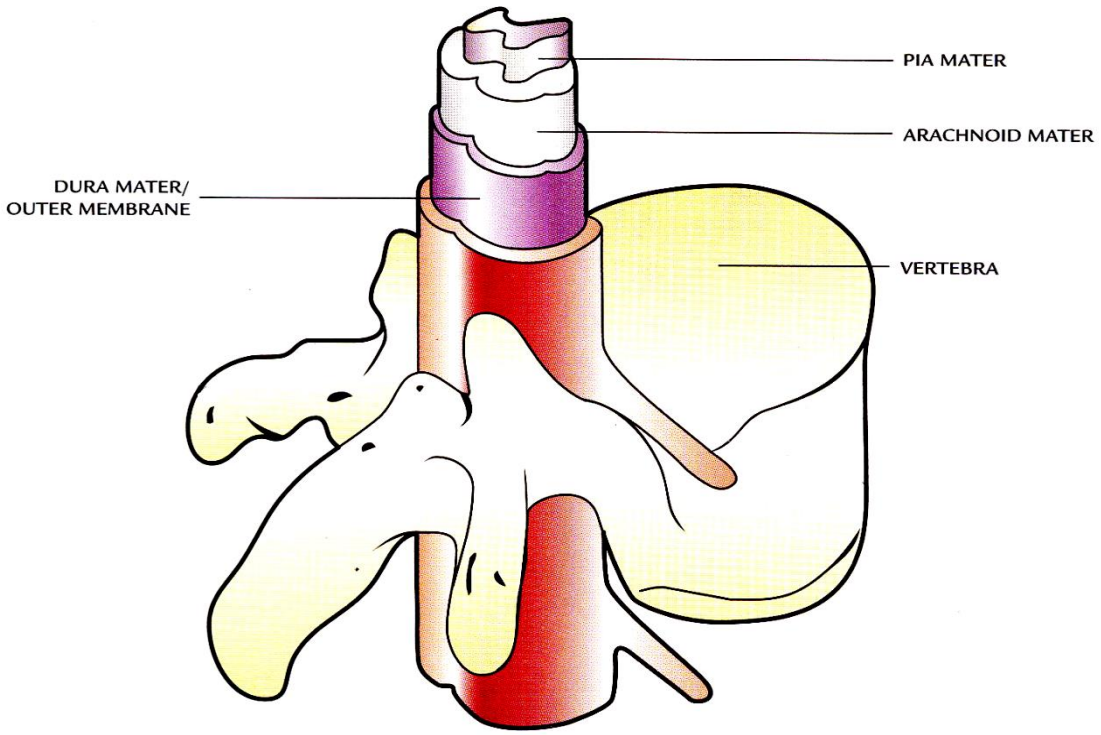
The Brain will also give off 12 pairs of nerves which will form the Cranial Nerves (see later).

SPINAL CORD

The Spinal Cord is continuous with the Medulla Oblongata and continues downwards through the vertebra until it reaches the lumbar region. It functions to provide communication between the brain and all parts of the body. It is also involved in Reflex actions of the body.

COVERINGS OF THE BRAIN & SPINAL CORD

The Brain and the spinal cord are surrounded by 3 membranes. These are called the ***Meninges*** and lie between the skull and brain and spinal cord and vertebra (see diagram below).



From outside to inside these membranes are called:

1. ***Dura Mater:*** Tough fibrous double layered membrane. Travels from the skull to the sacrum

2. ***Arachnoid Mater***: A delicate membrane positioned under the dura. The space below it, called the ***Subarachnoid Space*** is filled with a nutritious fluid called ***Cerebrospinal Fluid***.

3. ***Pia Mater***: A thin vascular membrane which closely covers the brain. It supplies blood to the Brain and Spinal Cord

2. PERIPHERAL NERVOUS SYSTEM

The Peripheral Nervous System involves nerves outside the Central Nervous System (CNS) and includes:

- ***Cranial Nerves – Nerves which arise directly from the Brain***
- ***Spinal Nerves – Nerves which arise directly from the Spinal Cord***

CRANIAL NERVES

There are twelve pairs (12 for the left and 12 for the right side). These nerves exit the brain directly without travelling down the vertebra.

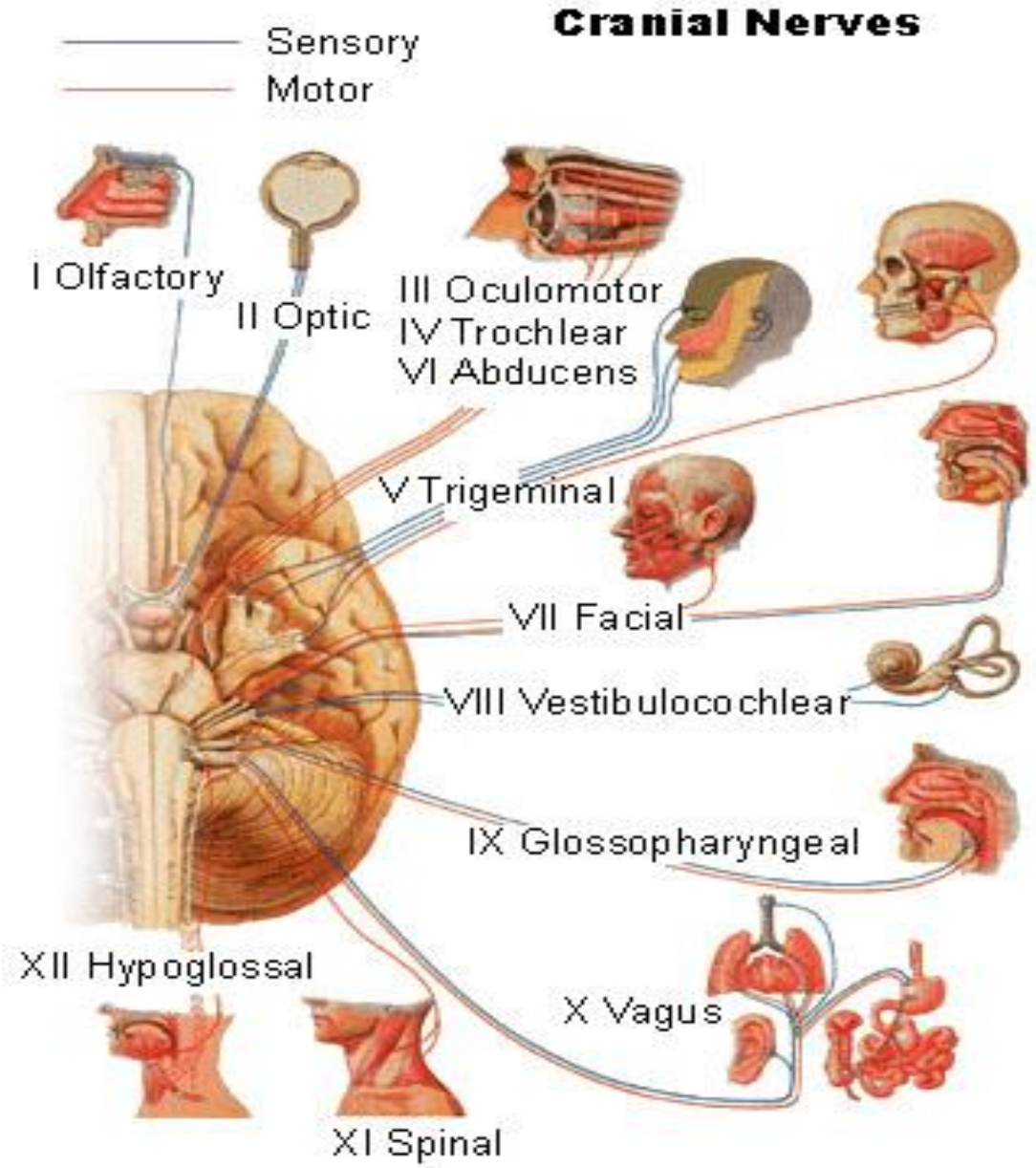


Diagram Showing the Cranial Nerves

SPINAL NERVES

The Spinal nerves exit the Spinal Cord directly and pass in between the cervical, thoracic and lumbar vertebra. They are made up of ***Sensory***, ***Motor***and***Mixednerves***.

There are 31 pairs of spinal nerves. These are:

- Cervical region - 8 pairs
- Thoracic region - 12 pairs
- Lumbar region - 5 pairs
- Sacral region - 5 pairs
- Coccygeal region - 1 pair

Spinal nerves at the various regions of the spine combine in different ways to form a nerve ***Plexus.*** These are:

Name of Plexus	Supplies
Cervical Plexus	Muscles and skin of ***head & upper shoulder***
Brachial Plexus	Muscles and skin from base of neck to the whole of the ***upper extremity.***
Thoracic Plexus	Supplies muscles of the ***chest*** and main part of the ***abdomen*** as well as sensation to this area.
Lumbar Plexus	Supplies the lower part of the abdominal wall and part of the leg.
Sacral Plexus	Supplies the buttock and some leg muscles.
Coccygeal Plexus	Supplies the muscles and skin of the pelvic area.

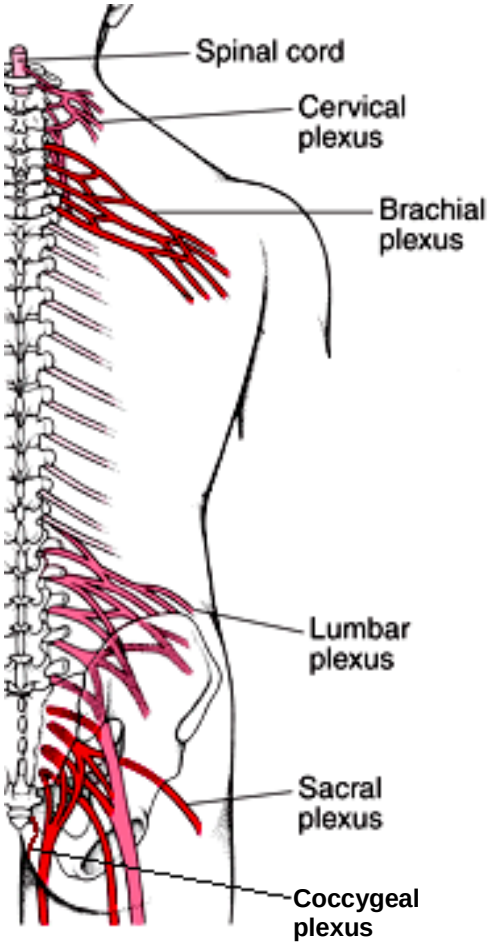


Diagram showing the nerve Plexuses of the Body

The combination of different spinal nerves will give rise to *major named nerves* which supply the different parts of the body. Some of these are as indicated in the diagram below:

3. AUTONOMIC NERVOUS SYSTEM (ANS)

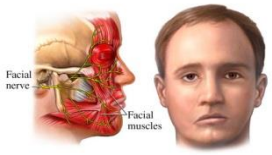
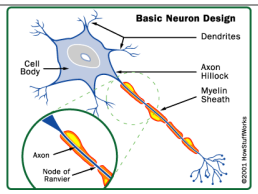
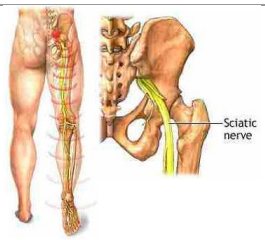
The Autonomic Nervous System is part of the nervous system which controls body functions without the necessity for conscious thought, i.e. we do not have to think about it. Examples of autonomic control include the beating of the heart, digestion and breathing.

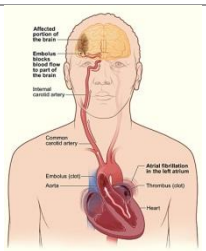
The system is divided into two parts which have opposite effects:

1. ***Sympathetic Nervous System***
2. ***Parasympathetic Nervous System***

Each organ in the body has a Sympathetic and Parasympathetic supply.

DISORDERS & DISEASES OF THE NERVOUS SYSTEM

Disorder	Description	Picture
Bell's Palsy	Injury or infection of the facial nerve which subsequently becomes inflamed Effect: facial paralysis.	
Cerebral Palsy	Damage to the brain, caused during birth or resulting from a pre-natal defect. Effect: affects motor system control.	
Epilepsy	A disorder of the central nervous system characterised by loss of consciousness and convulsions (fits).	
Motor Neurone Disease	A rare progressive disorder, in which the motor neurones in the body gradually deteriorate **Effect**: weakness and wasting of muscles	
Multiple Sclerosis *(also known as disseminated sclerosis)*	Loss of the protective myelin sheath from nerve fibres in the central nervous system. **Effect**: causes muscular weakness, loss of muscular coordination, problems with skin sensation, speech and vision.	
Parkinson Disease	Progressive disease caused by damage to **basal ganglia** of the brain and resulting in loss of dopamine (neuro-transmitter). **Effect**: causes tremor and rigidity in muscles, as well as difficulty and slowness with voluntary movement.	
Sciatica	Pressure on the roots of the sciatic nerve often caused by degeneration of an intervertebral disc **Effect**: pain down the back and outside of the thigh, leg and foot	

Stroke	A sudden loss of consciousness resulting when the rupture or occlusion of a blood vessel leads to lack of oxygen in the brain.	

The Endocrine System

The Endocrine **(ductless)** System is a very important part of the body make up which is involved in co-ordinating physiological activities. It is involved in maintaining homeostasis (BALANCE) within the body.

The Endocrine System consists of a series of **GLANDS** (see below) which secrete hormones directly in to the **BLOOD**.

HORMONES

Hormones are **CHEMICAL MESSENGERS** which are secreted into the blood and carried to a **TARGET ORGAN** where they produce their effect.

The action of the Endocrine System is similar to that of the Nervous System (**communication and maintenance of homeostasis – internal balance**), but it is much more **SLOWER** acting and**LONGER**lasting

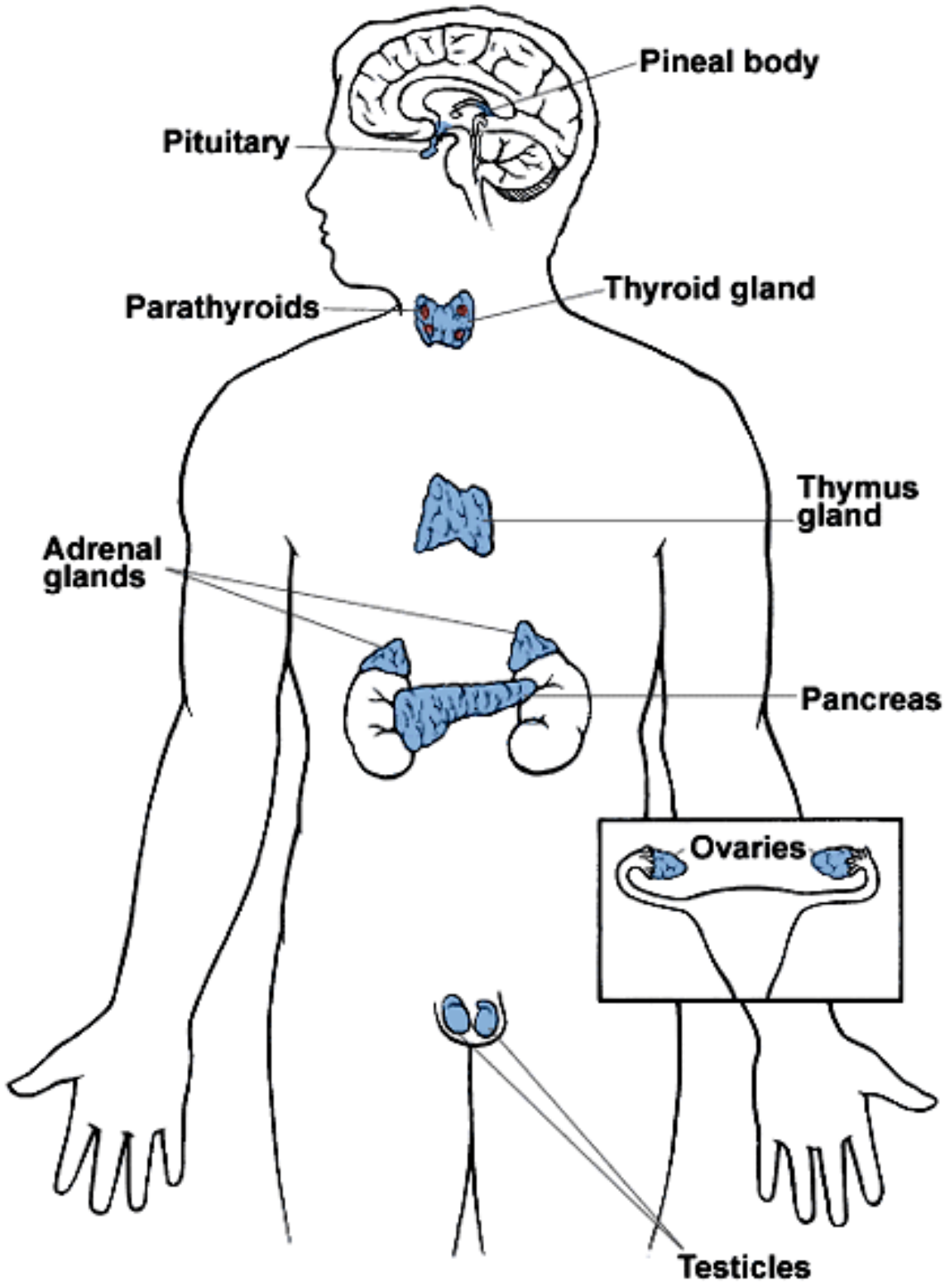
Hormones are eventually inactivated in the **LIVER** and excreted by the **KIDNEYS**

The amount of hormone released by an endocrine gland is determined by the body's need for it. Secretion of a hormone is normally regulated so that there is no under or over-production of a particular hormone.

THE ENDOCRINE GLANDS

The Endocrine glands are found throughout the body. They are:

1. **PINEAL GLAND** (part of the brain)
2. **PITUITARY GLAND** (part of the brain)
3. **THYROID GLAND** (at the front of the neck)
4. **PARATHYROID GLANDS** (at the front of the neck on the thyroid gland)
5. **THYMUS GLAND** (behind sternum)
6. **ADRENAL GLANDS** (on the kidneys)
7. **ISLETS OF LANGERHAN** (part of the Pancreas)
8. **OVARIES** (part of female reproductive system)
9. **TESTES** (part of male reproductive system)

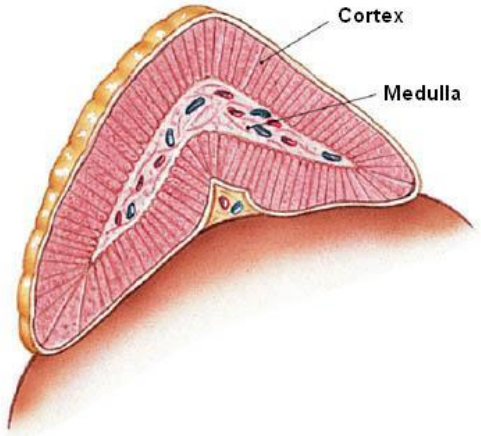


When hormones secretion goes wrong (for whatever reason), two things can happen:

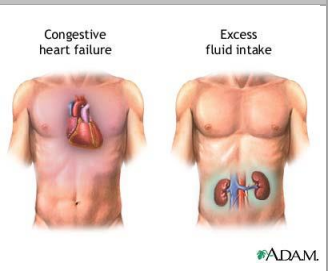
1. **Hypersecretion** – Over production of a hormone
2. **Hyposecretion** – Under production of a hormone

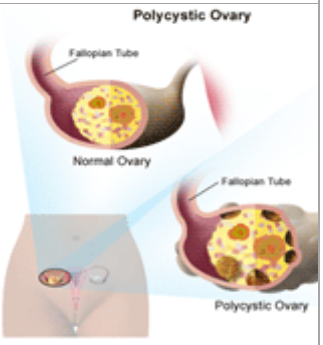
FUNCTIONS OF THE ENDOCRINE GLANDS

Name	Function
Pituitary Has 2 lobes	Is commonly called the ***"Master Gland"*** as it secretes hormones that control the other endocrine organs
Anterior Pituitary	
HumanGrowthHormone (HGH)	Regulates growth and height
MelanocyteStimulatingHormone (MSH)	Stimulates production of melanin in basal layer of skin
Thyrotrophin (Thyroid Stimulating Hormone TSH)	Controls thyroid gland
Adrenocorticotrophin (ACTH)	Controls adrenal cortex
Gonadotrophins *Luteinising Hormone* *Follicle Stimulating Hormone (FSH)*	Controls sexual development and organs
Posterior Pituitary	
AntidiureticHormone *ADH* (*Vasopressin)*	Regulation of water absorption in kidneys
Oxytocin	Contracts mammary glands when suckling begins to release milk secreted into ducts. Contraction of uterine muscle wall to begin childbirth
Thyroid Gland	
Thyroxin&Triiodothyron	Stimulates tissue metabolism, and maintains basal rate metabolic rate (BMR)
Calcitonin	Maintains Calcium and Phosphorus balance
Parathyroids	
Parothormone	Maintains calcium level in plasma, stimulates calcium reabsorption in kidneys, and activates Vitamin D
Pancreas	
Insulin by Islets of Langerhans	Helps blood sugar enter blood cell and converting it to glycogen (stored form of sugar) thus regulating blood sugar levels.
Glucagon	Helps convert glycogen into blood sugar

Adrenal Gland	
Adrenal Gland has two parts Cortex – outer part Medulla – inner part	
Adrenal Cortex	
Mineralocorticoids - Aldosterone	Regulates salts in body especially sodium chloride
Glucocorticosteroids	Produced in response to ACTH from pituitary. Metabolises carbohydrates, fats and proteins
Adrenal Medulla	**Supports the sympathetic nervous system**
Adrenalin & *Noradrenalin*	Prepare body **for "fight or flight"** response by speeding up heart, slowing down digestion and urinary system Increases sugar levels Adrenalin is a powerful vasoconstrictor
Ovaries	
Oestrogen *Progesterone*	Responsible for female sex characteristics e.g. breast growth, widening of hips etc.
Testes	
Testosterone	Responsible for male sexual characteristics – deep voice, facial hair, muscle mass
Pinael Gland	
Melatonin	Controls body rhythms – responds to sunlight
Thymus	
Thymus Factor (TF) *Thymus Humeral Factor (THF)*	Promote development of T lymphocytes in the thymus gland which are a part of the immune system.

DISEASES &DISORDERS OF THE ENDOCRINE SYSTEM

Condition	Description	Picture
Addison's disease	**Cause:** hyposecretion of adrenocortical hormones (sex, growth and salt regulation hormones). **Effects:** muscular atrophy and weakness; hypotension; gastric problems like vomiting, changes in skin pigmentation, irregular menstrual cycle and dehydration.	
Cushing's syndrome	**Cause:** hypersecretion of adrenocortical hormones (sex, growth and salt regulation hormones) i.e. the opposite of Addison's syndrome. **Effects**: muscular atrophy and weakness, hypertension, moon-shaped face, redistribution of body fat, sometimes mental illness, osteoporosis.	
Diabetes Insipidus	**Cause**: pituitary gland does not make enough of the hormone ADH. Antidiuretic Hormone is needed to control the amount of water in the body.	
Diabetes Mellitus	**Type 1:** **Cause:** Auto-immune disease results in pancreas being unable to produce insulin **Effects**: Symptoms include high blood glucose level, excessive thirst, high urine output, tiredness and weight loss. Cannot be cured but can be controlled by regular (2-4/day) insulin injections. **Type 2:** **Cause**: The body cells do not respond properly to insulin and the pancreas may not produce enough. Linked closely to obesity. **Effects**: Symptoms are as Type 1, but may not be as obvious and take longer to develop. Can be controlled by a healthy diet and physical activity. Tablets or insulin injections may also be required.	

Condition	Description	Picture
Grave's disease	Is an autoimmune disease. It most commonly affects the thyroid gland, causing it to grow to twice its size or more, be overactive, with related hyperthyroid symptoms such as increased heartbeat, muscle weakness, disturbed sleep and irritability.	
Polycystic Ovarian Syndrome	*(also known as Stein-Leventhal syndrome)* **Cause**: not known. **Effects**: irregular menstrual cycle, due to excessive stimulation of the ovaries by secretion of lureinising hormone, multiple growth of follicular ovarian cysts and sometimes infertility, enlarged ovaries and often high levels of oestrogen; 50% of patients are obese and become hirsute; age range of sufferers is usually 16-30.	
Myxoedema	Hypothyroidism marked by dry skin and swelling around lips and nose as well as mental deterioration.	

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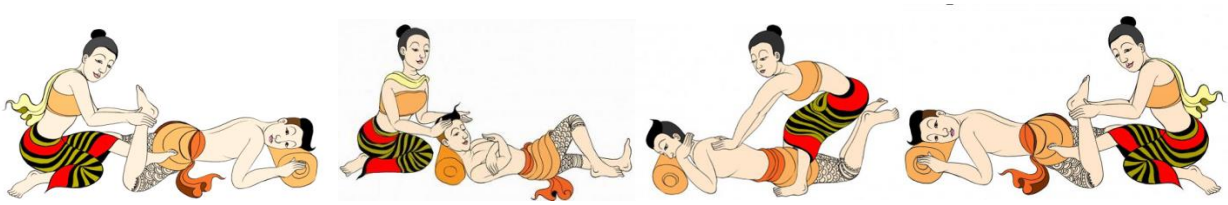
Thai Massage Theory & Practice



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A Mantra to the Father Doctor Shivago

OM NAMO / SHIVAGO / SILASA / AHANG / KARUNIKO
SAPA SATANANG / OSATA / TIPA MANTANG / PAPASO
SURIYA JANTANG / KOMALAPATO / PAKA SESI / WANTAMI
BANTITO / SUME TASO / AROKA / SUMNA HOMI
(Repeat 3 Times)

PIYO TEWA / MANUS SANANG / PIYO PROMA
NAMUT TAMO / PIYO NAKA / SUPAN NANANG
PININ SIYANG / NAMA MIHANG / NAMO PUTTAYA
NAVON NAVIEN / NASATIT NASATIEN / EHI MAMA
NAVIEN NAWAE / NAPAI TANG VIEN / NAVIEN MAHAKU
EHI MAMA / PIYONG MAMA / NAMO PUTTAYA
(Repeat 1 Time)

NA A / NA WA / ROKA / PAYATI / VINAS SANTI
(Repeat 3 Times)

We invite the spirit of our Founder, the Father Doctor Shivago, who comes to us through his saintly life. Please bring to us the knowledge of all nature, that this prayer (mantra) will show us the true medicine of The Universe. In the name of this mantra, we respect your help and Pray that through our bodies you will bring wholeness and health to the body of our client. The Goddess of healing dwells in the heavens high, while mankind stays in the world below. In the

name of the founder, may the heavens be reflected in the earth below so that this healing medicine may encircle the world. We pray for the one whom we touch, that he will be happy and that any illness will be released from him.

(Trans. Master ChongkolSetthakorn)

"Pali" is a scriptural and liturgical language of Hinayana (Theravada) Buddhism. "Om Namo Shivago" is a Pali prayer, often sung as a mantra before giving Thai massage to invoke and remember the founder. "Om Namo" is a Pali / Sanskrit word meaning "in the name of, or in remembrance of." Many schools of Thai massage and medicine invoke his memory and blessing by reciting his prayer, every day, twice a day.

Introduction to the Thai Tradition

What is Thai massage?

"It is like a thousand gentle waves washing the body"

Master ChongkolSetthakorn

Traditional Thai Yoga Massage is both preventive and therapeutic. It can help prevent illness, improve the immune system, increase energy and reduce stress. It can also be used to alleviate headaches, back pain and stiffness in the shoulders and neck. It is a holistic treatment that restores vital energy and helps balance our mental and emotional wellbeing.

It utilises acupressure and stretching - the acupressure is applied with fingers, hands, feet, elbows and knees along the 'Sen' energy lines of the body. The passive stretching increases the receiver's flexibility - keeping the body supple and toned. The whole practice works on the mind as much as the body and can be a moving meditation for both the therapist and the receiver. The massage takes place on a mat and lasts between 1 - 2 hours. No oils are used and the receiver always remains fully clothed. There are a wide range of benefits from traditional Thai Yoga Massage which helps maintain optimum health. Regular treatment stimulates and strengthens the nervous, respiratory, circulatory, digestive and immune systems. It can also reduce stress and tension while boosting energy levels and improving flexibility, posture, digestion and self-esteem. Often a deep sense of calm and peace is experienced during and after a treatment.

Nuad Bo Rarn means ancient style Thai Yoga Massage and the version we practice is the Northern Style originating in Chang Mai. Many of the positions are similar to yoga poses and the practice is sometimes called 'passive yoga'. In practice it is like an evolving, flowing dance between practitioner and recipient. When this happens it represents the Buddhist 4 divine states of mind – Loving kindness (tenderness and consideration towards others), compassion (sympathetic pity and concern for the sufferings or misfortunes of others), vicarious joy (experienced in the imagination through the feelings or actions of another person) and equanimity (calmness and composure, especially in a difficult situation). Thai Yoga Massage doesn't represent the Buddhist religion but it does reflect its philosophy.

As a practitioner of Thai Yoga Massage we can not claim to treat, in the sense of diagnose and cure, medical conditions. It is a complementary therapy that can be used alongside conventional medical treatments to help alleviate symptoms.

Origins of Thai Massage

Thai Yoga Massage is an element of traditional Thai medicine that originated in India during the time of the Buddha. The positions and the stretches utilised resemble yoga postures and through the intense concentration required during a massage both giver and receiver can immerse themselves in a deep meditative state. It also incorporates acupressure, an intrinsic part of traditional Chinese medicine. Thai massage was introduced by Buddhist monks who arrived from India between the second and third century BCE. The founder, known as Shivagakomarpaj, was reputedly the Buddha's personal physician. Like the Buddha's religious texts the knowledge of Thai Massage was handed down over the centuries as an oral tradition and very few written documents have survived. In Thailand there were healing traditions based on animism (the attribution of a living soul to plants, inanimate objects, and natural phenomena) which were incorporated into Thai Massage. Thailand was over-run by the Burmese in 1776 and the capital of Ayutthia was destroyed. The ancient texts dealing with Nuad Bo Rarn Thai Massage were largely destroyed and lost. In 1832 King Rama III had the best of the surviving texts collected and inscribed in stone. These stone plagues were set into the walls of Phra Chetaphon Temple, commonly know as Wat Po, and can still be seen today. Thai massage is still received in Buddhist temples and is considered to be a sacred practice. It's part of modern Thai medicine and is used as a complimentary therapy in hospitals along with western treatments.

Methods of Thai Massage (Nuad Bo Rarn)

1 Check whether the receiver has any illnesses or injuries before you start the treatment.

2 Ensure they haven't eaten up to half an hour before the treatment.

3 Work sitting in Japanese sitting with your arms straight and the spine extended. Allow the weight of your body to do the work.

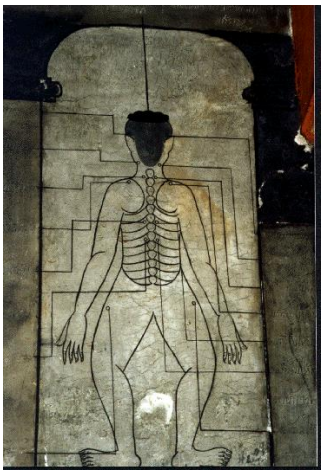
4 Never press directly on to bone or joints.

5 Press with the ball of the thumb not the tip.

6 Always try to keep in touch with a part of the receivers body as you move through the different techniques.

7 The massage is in a logical sequence starting from the feet, working up the body and finishing at the head. Focus on the present as you do it, it's a moving meditation for you and the receiver.

Introduction to Sen Lines



The concept of invisible energy meridians coursing throughout the body is commonly used in the practice of most Asian medical traditions. Of these traditions, the energy meridians most commonly known in the West are those used in Chinese Medicine. Linked throughout an intricate network of 72,000 energy meridians (*Sen)*, acupressure points stimulate and relax the patient's mind and body, promoting the natural healing processes.

These *Sen* are of critical importance to Thai massage theory. In fact, in Thailand, this massage is considered to be energy-work rather than body-work. This is because the traditional therapist is guided not by anatomical structures or physiological principles, but by following the intricate network of energy meridians throughout the body. Even the yogic postures are considered primarily for their energetic effects, and only secondarily for the ability to improve flexibility and strength.

The Thai energy lines, S*en,* are in fact more closely related to the *nadis* of the Indian traditions of Yoga and Ayurveda.

It is said in the Thai tradition that there are 72,000 *Sen* lines. This should not however be taken literally. This number is a traditional Buddhist way of indicating an infinite amount, the point being that every cell in the body is linked to every other cell through this infinite and intricate mesh of energy. This energy is known as *prana* (Sanskrit), *chi* (Chinese), or *palangsak (*Thai).

The pranic networks permeate the body of any living being, and vibrate in response to physiological, psychological, and spiritual experiences. This energy also emanates from the body, creating an electromagnetic field around the organism commonly known as an aura, or a "pranic sheath".

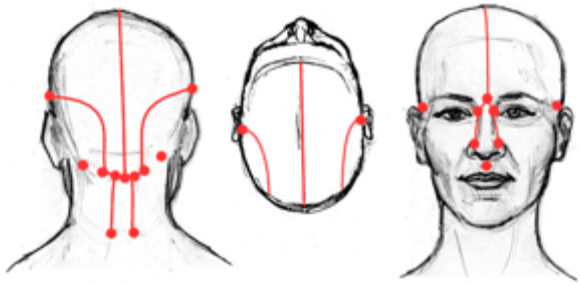
No one can name and diagram all of the body's infinite energy circuits.
However 10 main S*en* are commonly taught and used in Thailand's massage schools to treat the entire body. These 10 *Sen* are the main conduits, the "highways" of energy in the body, off of which the rest of the *Sen* Branch. Although at first glance there seems to be some similarity between the Thai and the Chinese systems, these meridians are quite different. The Sen, like the Ayurvedic nadis, do not correlate, for example, with any organ systems the way that the Chinese meridians do.

The Thai meridians all begin at the navel and end at the extremities of the body. Rather than correspond to a single organ, they may be used to treat any and all organ systems through

which they pass along their course.

The Thai sen share many similarities with their Indian counterparts, the nadis, and some even share the same names. For example, the Sen Sumana, Sen Itha, and Sen Pingala of the Thai tradition relate to the SushumnaNadi, Ida Nadi, and PingalaNadi of the yoga tradition. The acupressure points used in Thai massage also are often parallel to the Indian marma points. Even so, these two traditions are not interchangeable.

The Thai texts mention red, black, and white sen, which correlate roughly with arteries, veins, and nerves. However, traditional Thailand does not have a developed science of anatomy, and these distinctions are not generally very clear. Anatomy seems to play a minimal role in mapping the sen. Sen lines for the most part follow the grooves in between muscles, running along the insertion points. However, the same lines also take sudden turns into the body and are often difficult to trace exactly. Since the sen lines are not anatomically verifiable, and because of differences between Northern and Southern Lineages, there are inconsistencies between schools across Thailand. Although these differences are usually relatively minor, sometimes they directly contradict one another. Looking at three different books will often lead to three different maps of these meridians. This is simply because many of these writers have studied at different schools. A further confusion has been the effort on the part of some writers to combine different Asian traditions.



Some sen meridians in the head and face.

Because there are some similarities, many Western writers and teachers of Thai massage have mixed Thai with Indian or Chinese traditions when explaining massage traditions. While this exercise is useful to show the common origins of these medical traditions, it is technically incorrect. In this book, correlations with yoga and/or Chinese medicine will be pointed out when this is helpful to the practitioner, but the Thai system is introduced on its merits, as it is taught today in Chiang Mai. The descriptions of the 10 basic Sen used in this book are based on the Northern Lineage model, as taught by the Traditional Medicine Hospital of Chiang Mai.

Even if they do not agree exactly where the Sen run, most Thai sources agree on names and symptoms associated with each Sen. However, you may notice differences in spelling between the Sen from one book to the next. This is due to the fact that the academic community has remained undecided about a definitive method of transliteration for the Thai language. This means that as common a word as "hello" has been written in many different ways, including for example, sawadi, sawatdee, and sawasdii. In transliterating Thai, the Thais themselves are the most lax of all, interchanging g with k, l with r, and d with t. So, don't be surprised if you see Kalatharee spelled as Galadhari, or if you see Itha as Eeda.

Under normal healthy circumstances, the body's energy flows uninhibited throughout the 72,000 Sen and is distributed according to the body's needs and activities. Problems arise in the body when these Sen lines are either blocked or broken, causing an energy imbalance. Blockages and breaks are caused by a variety of reasons including sprains, muscle strains, injuries and stress. Parts of the body which are serviced by the Sen lines can become affected by these energy imbalances and cease to function optimally.

The goal of Nuad Boran is to correct these energy imbalances by working directly with the Sen lines to restore their vigor and vitality. Massage on a regular basis promotes healthy and strong Sen, which fosters improved health and mental well-being. When a blockage or break occurs,

therapeutic massage concentrates on restoring the body's normal function through stimulation of the affected Sen lines.

Acupressure Techniques

Thai Acupressure, or "jap sen" is an integral part of the practice. The English word "acupressure" is used in modern parlance both as a name for a specific Chinese technique and as a more general term meaning simply pressure applied to particular points on the body. In this book, I always use the term acupressure in this more general sense. Thai acupressure, simply put, is the application of pressure (usually with the thumbs) to points that lie on a meridian in order to stimulate energy. Pressure on these points is used to energize the meridian as a whole, and is an indispensable part of the therapeutic Thai massage routine.

Acupressure and Meridians being taught at the Traditional Medicine Hospital, Chiang Mai.

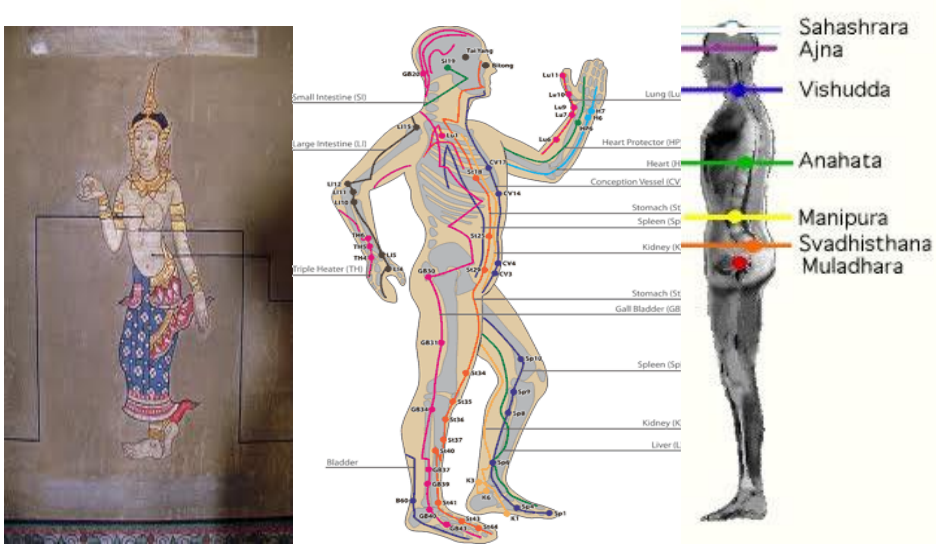
Sen Line Diagnosis

In Thailand, massage is a medical field and Thai massage therapists are trained in diagnostic arts. In the West, however, diagnosis is generally the realm of the professional physician, and massage therapists should tread lightly into this territory. In many areas, the word "diagnosis" itself is not permitted in the massage therapy setting.

Sen line diagnosis is a combination of experience, observation and intuition. It is a true art, and is often very difficult for a beginning therapist. Your powers of observation can guide you in delivery of an effective massage, but never attempt to diagnose serious conditions without sufficient training. Always interview your client concerning specific symptoms, and ask if a professional diagnosis has already been made.

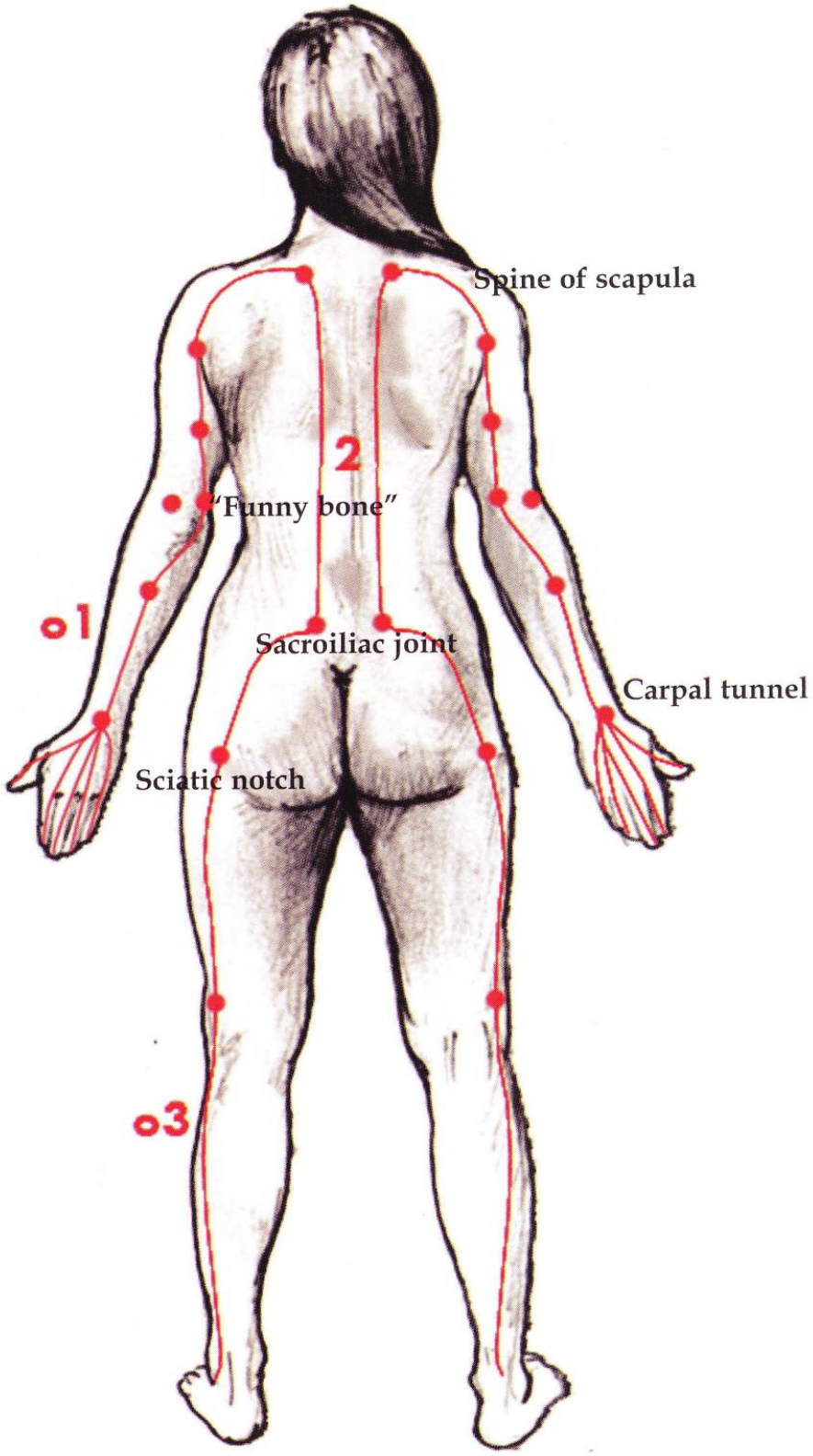
Thai healers use a variety of tools for diagnosis, ranging from Chinese techniques such as tongue, iris, and pulse diagnosis to Ayurvedic methods such as the Four Elements. More often than not, however, the traditional Thai healer is guided not by a specific system of diagnosis, but by intuition and the ability to "read" energy in their clients. Many masters of Nuad Boran are able to sense where the client's body is imbalanced merely by scanning or palpating the body, by working the meridians, or simply by observation.

Most Thai therapists use some combination of different techniques, but their diagnosis inevitably leads them toward an understanding of the imbalances in the individual client, and they design massage routines to assist in bringing back balance.



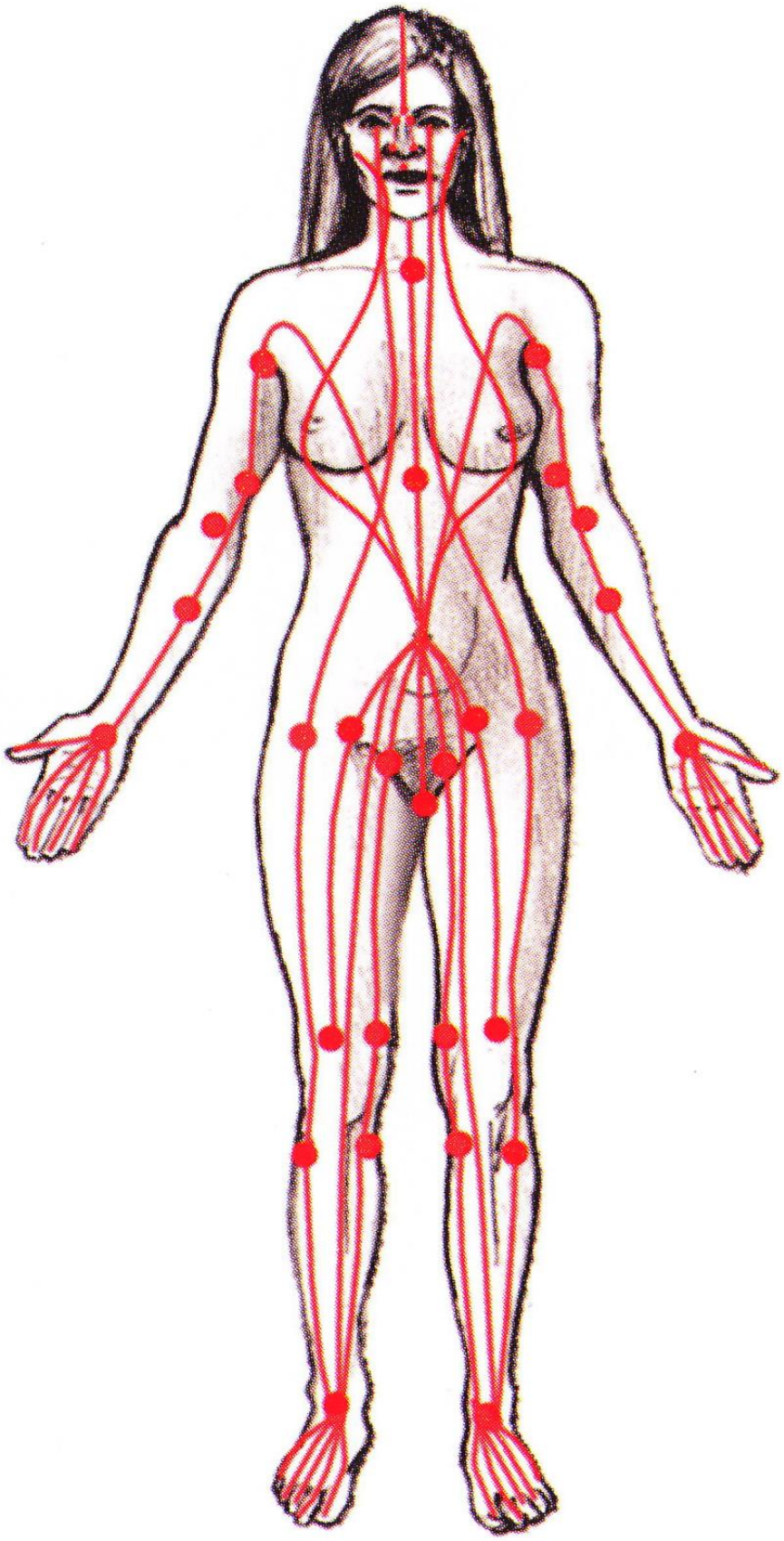
Thai Sen Lines ***Chinese Meridians Ayurveda-Chakras***

Sen Lines (Back)



This shows the Sen Lines **ITHA** and **PINGALA** running up either side of the spine in what is called the laminar groove. It is important to work in the groove and not on the spine itself, as this would be both painful and dangerous to the receiver.

Sen Lines (Front)



Sen Lines (Front)

1 - ITHA

Starts at the navel, runs down the front of the left thigh, turns left at the knee, ascends the back of the left thigh, ascends the left side of the spine (in laminar groove) and over the top of the head, finishing at the nostril .

2 - PINGALA

Takes the same course as ITHA, but on the right side.

3 - SUMANA

Starts at the navel, runs straight up and inside the throat, finishing at the base of the tongue .

4 - KALATHAREE

Starts at the navel and divides into four branches:
Two branches descend through the groin and down the legs, ending at the toes.
The other two branches ascend to the armpits, and run down the arms, stopping at the fingers.

5 - SAHATSARANGSI

Starts at the navel, descends the inner left leg, turns at the ankle and runs back up the body, through the throat and finishes at the left eye.

6 - TAWAREE

Takes the same course as SAHATSARANGSI, but on the right side.

7 – LAWUSANG

Starts at the navel, runs up through the throat and stops at the left ear.

8 – ULANGA

Takes the same course as LAWUSANG, but on the right side of the body.

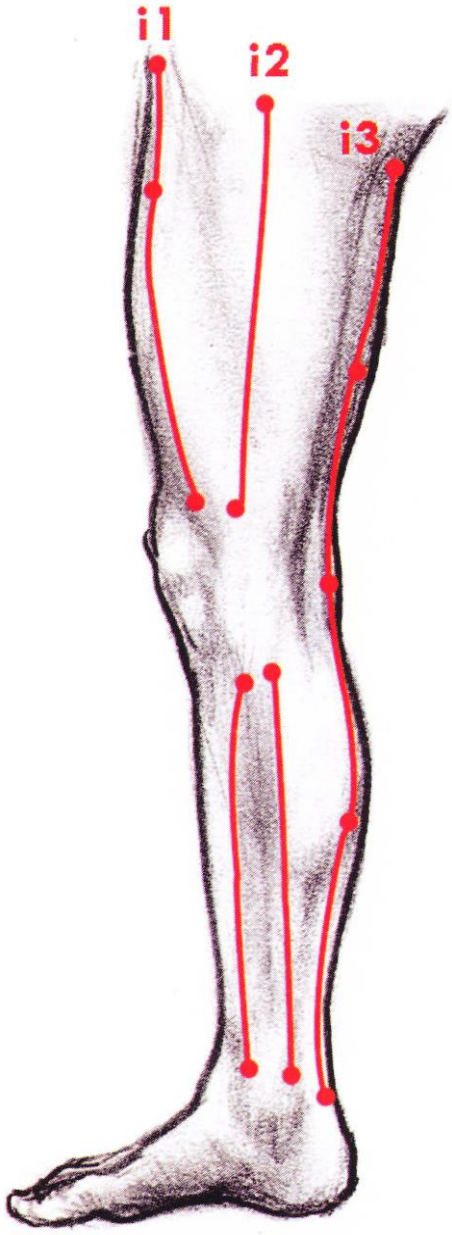
9 – NANTAKAWAT

Starts at the navel and divides into two branches:
SUKUMANG – stop at the anus.
SIKINEE – stops at the urethra.

10 KITCHA

Starts at the navel and descends to the sex organs:
KITCHANA – clitoris
PITTAKUN – penis.

Sen Lines (Medial Leg)

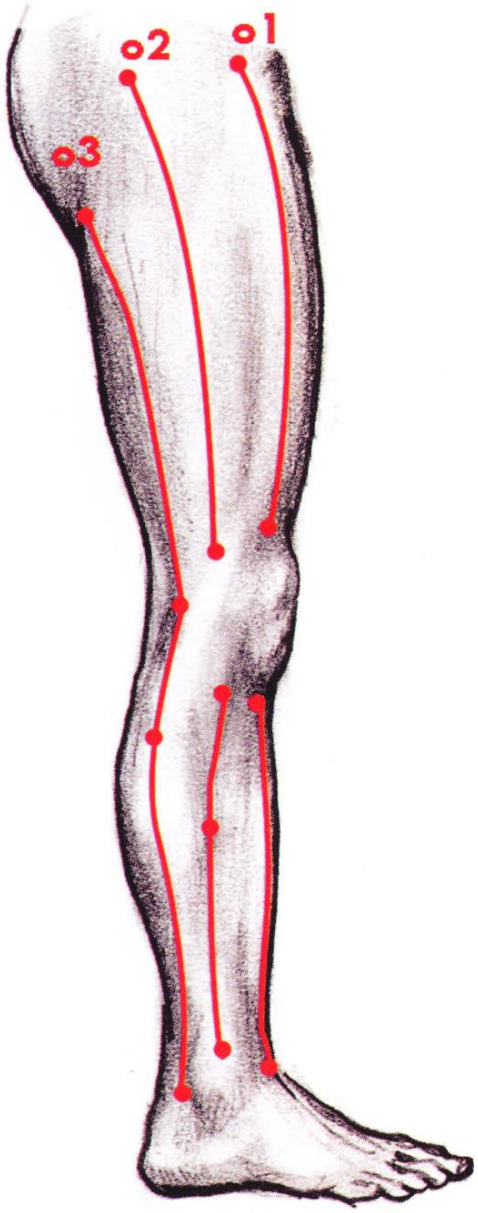


Sen Line 1: starts above the ankle bone, travel along the underside of the shin bone, jumps across the knee to resurface one thumb length down from the centre of the patella and continues straight up to the crease line at groin.

Sen Line 2: starts under the ankle bone, half-way between Sen 1 and 3, travels up the middle of the calf muscle, jumps across the knee, resurfacing two thumb lengths down from the centre of the patella and continues straight up the middle of the inner thigh to the crease line at the groin, half-way between Sen lines 1 and 3.

Sen Line 3: starts on the inner edge of the Achilles tendon behind the ankle, travels straight up the underside of the calf muscle and jumps over the knee to resurface three thumb lengths down from the centre of the patella , ending at the start of the near – side buttock .

Sen Lines (Lateral Leg)



Sen Line 1: starts on the front side of the ankle, runs up in the groove alongside the shin bone, jumps across the knee and resurfaces one thumb length down from the centre of the patella and continues straight up to the crease line of leg/hip.

Sen Line 2: starts above the ankle bone , runs up the centre of the calf half-way between Sen 1 and 3 , jumps across the knee , resurfaces two thumb lengths down from the centre of the patella and continues up the centre of the outer thigh between Sen 1 and 3 to crease line at the hip .

Sen Line 3: starts under the backside of the ankle bone, sitting on the Achilles tendon, runs up along the outside edge of the calf, jumps across theknee, resurfaces three thumb lengths down from the centre of the patella and continues up the outside edge of the thigh to the crease line at the hip.

The Spirit of NUAD BO RARN Thai Massage

Thai massage can be split into two subheadings:

1. **Manipulation**
2. **Peripheral Stimulation**

It does not include basic soft tissue massage. Despite the fact that this form of Thai massage is definitely considered a source of relaxation, the long continuous strokes of western soft tissue massage does exist.

Instead, general and point pressure are utilised along with joint movements and muscle stretching. For this reason, Thai massage can be grouped more precisely with general manipulation therapy than with the western stereotype of a soft tissue massage.

The original traditional Thai manipulative medicine is a form of therapeutic massage. It is based on the theory that the body is made up of 72,000 SEN, of which 10 hold top priority.

The SEN have been characterised closely with the NADIS of Ayurvedic Medicine and the Meridians of Chinese Acupuncture, as each of these systems are concerned with the non-anatomical “points” of the body from which external manipulation can produce internal effects.

The historical origins of Thai Massage and of Thai Traditional Medicine in general are vague. Although there are many theories covering almost the entire scope of possibilities, its place among other Asian ancient medical systems is not fully known. The folk tradition claims the ancient medical knowledge appeared miraculously with the “Father of Medicine” many centuries back.

The Father is usually considered to be personified by Doctor Shivagakomarpaj, a well-known figure in the Pali canons, as well as a physician friend, and contemporary of the Buddha.

This knowledge was handed down orally from teacher to student until it was then written down on palm leaves in the Pali language with the Khmer script. These original texts were regarded as being sacred, and held the same importance as the Buddhist religious scriptures. Medical knowledge was venerated, and homage was paid regularly to the original teachers in the folk tradition through a ceremony called WAI KHRU. (Wai Khru is still performed before and after each day of lesson at the Foundation of ShivagaKomarpaj; OM NAMO – included in this manual). Because of their veneration, the original texts were studied and passed down completely and faithfully.

This careful following of the medical methods was also a result of the almost total ignorance of anatomy; as it is generally believed that dissection was prohibited in the early Thai societies. Yet despite earnest attempts to hand down these texts and the medical methods unaltered, slight changes were inevitable resulting in tampered versions of this knowledge over the centuries.

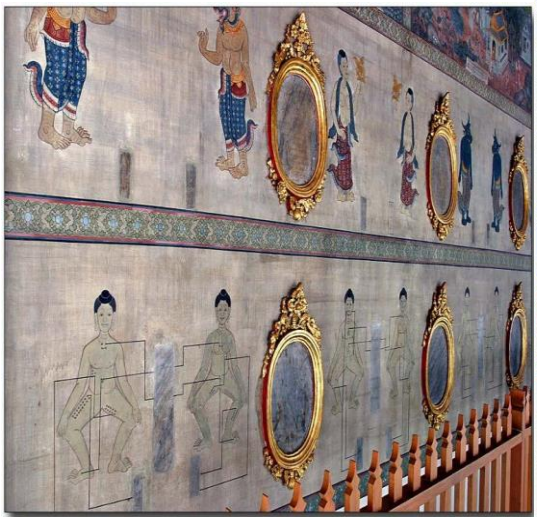
Yet some texts were stored, and their methods practiced in the Buddhist temples, or WATS, across Thailand. Throughout Thai history, the Buddhist WATS have been centres for community life. Along with its religious aspects, the WAT was the principal source of knowledge and all education took place on its compounds. This included the traditional medical knowledge, and therefore included massage. Thus it is logical that in 1832, King Rama III had all the best of the surviving texts collected, verified and inscribed on stone plaques which were then set into the walls of PHRACHETUPHONTEMPLE (WAT PHO). WAT PHO continues today to be a centre for the education of Traditional Thai Medicine and Massage.

To fully understand Thai manipulative medicine, one would have to trace it back to its origins. The medical systems of many of the great civilisations of antiquity are intertwined. Are the Thai texts, which are studded with borrowed Sanskrit and Pali medical terms, inherited directly from the Ayurveda of India, or did they come via the great sea trade-route or via India, as translations of Galen and Hippocrates, or from the Chinese Empire to which much of South East Asia paid tribute? Was it all borrowed, or what proportion was already indigenous to Thailand‘s ancient populations; the Tai, Mon, and Khmer?

Thailand, as well as much of South East Asia, was heavily influenced for many centuries by Indian civilisation. Its impact is evident in Thai literature, religion, royal administration and is generally accepted to be the origin of Thai medical knowledge. On the other hand, China also greatly influenced Thailand.

If correspondences between the various systems of medicine exists, the study of and the comparison between the systems may lead to a more complete understanding.

Thai medicine has just begun to be studied in such manner, and hopefully the conclusions will soon be able to paint a better picture of the science behind Thai manipulative medicine.



The Fundamentals of Thai Yoga Massage

Thai massage is an ancient therapeutic procedure which provides relaxation, balanced in the body's various centres, healthy blood circulation, and an overall manipulation of the physical form and structure of the body. It is rather a working of the pressure points, energy lines and basic body forces which together produce a highly therapeutic effect.

The influence of **YOGA** is present in the body positions and the stretching movements that are part of the Thai Massage, as it has its roots in the ancient medicine of Indian Ayurvedic practice.

Traditional Ancient Thai massage is a unique form of bodywork that incorporates Hatha Yoga, Acupressure and Reflexology with origins dating back about 2500 years.

Certain features are characteristic of Thai Massage. It is performed on a mat, on a floor, rather than on a raised table. This allows for many movements and procedures that are not practical or effective in table work, and sometimes impossible. Specifically, mat work allows for maximum effective use of the practitioner's balanced body weight, rather than mere muscular force used in other types of massage. Through balanced body weight applied with control pressure, force and energy are applied and transmitted by the practitioner to the client.

The work of Thai massage consists primarily of pressure on the body's energy lines and pressure points or though one must not make the error of assuming it is similar to Chinese acupressure. The body charts of both are quite similar but the practises are respectively quite different.

In Thai massage the energy lines and pressure points are worked within a comprehensive whole body massage that may be performed in a period ranging from one to three hours.

Yoga & Breathing

Yoga has been a part of Thai massage since the very earliest times. Although in India, the art of Yoga developed into an individual spiritual practice, in Thailand, it is largely seen as a collective medical practice.

Modern Thailand does not have a tradition of individually practiced yoga. Most Thais however are familiar with some basic yogic principles. They are also acquainted with the techniques of Thai massage, having grown up with these methods in their cities or villages. However many western clients will not be so familiar with either and some explanation may be necessary before embarking on a Thai massage. Communication is your most important tool. Be sure that your clients are aware of what will transpire before you place them into some of the more advanced positions.

How intensive of a Yoga workout is given will always depend on the ability level of the client as well as the goals of the massage. It is the therapist duty to recognise the first hint of pain or uncomfortable pressure in a client and to adjust their technique immediately. Howeverthe experienced therapist will be able to determine the difference between true pain, which indicates danger, and the healthy feeling which comes from stretching and challenging the muscles.

The practitioner of Thai massage will have to work hard to develop the ability to "Hear with the hands". A Thai massage is like a dialogue with the client's body, and the experienced therapist will know the appropriate amount of pressure to use with each client. You should encourage the muscles to stretch, but not over do it.

Improperly administered Thai massage can cause muscle strain, pulled muscles, and other dangerous side effects.

It's recommended that practitioners and students take classes in Yoga so that they may experience first hand the feeling of stretching and can become more empathetic therapists. A Yoga practice of your own can help you to better understand the physiology of stretching.

Once you become adept at finding the proper level of stretch, you can assist your clients to gain flexibility and joint mobility by helping them to achieve deeper stretches. The main mechanism for this progress is proper breathing. As with any Yoga session, breathing is critical in Thai Massage.

The breath is a very useful aid in relaxing muscles. When putting clients into a stretch, it is always more beneficial for them if they can breathe deeply into the abdomen rather than hold their breath. Deep breathing relaxes the lower abdomen, the ilio-psoas muscle, the lower back, and the diaphragm, and greatly reduces tension throughout the entire body.

It is not always easy for clients to remember to breath, especially in deeper stretches. Work together with your clients by explaining the benefits of deep breathing.

Ethics in Thai Massage

The most basic ethical code observed traditionally in Thailand is the Five Precepts of Buddhism, which are said to be rules laid down by the Buddha to encourage harmony among men.

These principles are followed by Buddhists worldwide, and are translated roughly as:

- Refrain from killing
- Refrain from stealing
- Refrain from dishonesty
- Refrain from drugs and alcohol
- Refrain from sexual misconduct

Buddhist culture traditionally emphasizes humility, honesty and compassion and encourages the devout to practice these virtues in everyday life and livelihood. The practitioner of Nuad Boran is no exception to this rule.

In addition to classic Buddhist guidelines, the traditional Thai massage therapist abides by a separate code of ethics for the healer, taught in most of Thailand's massage schools on the very first day.

This moral code is designed to protect the integrity of the tradition and to protect the client from unscrupulous therapists.

These rules of conduct as taught by the Traditional Medicine Hospital are as follow:

1. Study diligently the techniques and the practise of massage.

2. Do not practise in a public place or in a place otherwise unsuitable for massage.

3. Charge a fair price.

4. Do not take clients from any other practitioner.

5. Do not boast about your knowledge.

6. Ask advice and listen to people who are more knowledgeable than you.

7. Bring a good reputation to the tradition of Nuad Boran.

8. As a Teacher, do not give certification in Thai massage to a person who is not qualified.

9. Give thanks to the Father Doctor before and after massage, or wish for your client well-being.

The 6 Key Points of Nuad Bo Rarn

1 Yoga
This is a spiritual and ascetic discipline which includes breath control, meditation, mantra and bodily postures (or asana) which are practiced for good mental and physical health and relaxation. Many of the asana are similar to the techniques used in Thai Yoga Massage.

2 Acupressure
We work on the Sen energy lines to help maintain a healthy flow of energy and to clear any blockages. This is done by using acupressure, the points of which are similar to acupuncture points. But instead of using needles we utilise our fingers, hands, elbows, knees and feet.

3 Meditation
At its most accomplished Thai Yoga Massage is a moving meditation for both the receiver and the practitioner.

4 Exercise
The deep stretches help maintain the receivers suppleness and flexibility whilst being physical exercise for the practitioner as well.

5 Reflexology
This is an alternative medicine involving the application of pressure to points on the feet and hands. It is based on a system of zones and reflex areas that reflect an image of the body on the feet and hands which, when pressed, stimulate the organs of the body.

6 Healing Art
The combination of yoga, reflexology and acupressure make Thai Yoga Massage a unique healing art that is considered a sacred practice in Thailand.

Holistic Benefits of Thai Massage

♦ Facilitates relaxation

♦ Heightens awareness

♦ Frees blockages in energy flow

♦ Invigorates the nervous system

♦ Relieves pain and muscle tension

♦ Increases ability to absorb nutrition

♦ Strengthens and rejuvenates the body

♦ Improves circulation of blood and lymph

♦ Increases flexibility (passive **yoga** postures)

♦ Gives a general feeling of well-being assisting in balancing Mind, Body and Spirit

♦ Enhances elimination of wastes and toxic debris from physical, emotional and mental strain

Thai Massage can be particularly helpful in relieving:

Headaches, migraines, arthritis, whiplash pain, paralysis, numbness, sciatica, back pain and other conditions.

Contraindications to Massage

Condition	Reason / Action
Arthritis	This client will obviously need special care. However, yogic stretching is extremely effective in loosening joints and muscles, and can be beneficial for this type of disorder
Pregnancy	Avoid Thai massage during pregnancy.
Menstruation, Post-partum, Obesity	Perform back massage from the side position in order not to press on the Abdomen. Menstruation: Avoid heavy pressure on client Sen lines because that increases blood flow and avoid movements which raise client legs over the head.
Inflammation & Swelling	Be sure that there are no aggravating conditions.
Muscle Injuries and Bone Fractures	Make sure that you take a history of muscle injuries. Proceed with Thai massage only if you have training and / or experience to deal with this situation.
Joint Dislocations and Skin Diseases	Ask the client to seek medical care for these conditions. If the body is covered and nothing is oozing, then proceed gently.
Cuts, Wounds & Fungus	The hygiene and comfort of the client comes first. Any open cuts of the Giver need to be covered. If the client has open cuts, advise client to seek medical care. For foot fungus, practitioner and client wear socks, and therapist washes hands thoroughly before face massage.
Venous Problems (varicose veins, thrombosis, etc.)	After taking a careful history, look at the legs and arms carefully to determinate whether compression is appropriate and at what pressure.
Heart Conditions (Hypertension, murmurs, pacemaker)	Always take a thorough history. ***DO NOT "stop the blood" at either the Brachial or Femoral Arteries.*** ***DO NOT move legs above head.***
Diabetes (insulin & neuropathies)	The diabetic patient may not be aware of your pressure. ***DO NOT "stop the blood'' for these clients.***
Kidney Disease	Beware of stressing the lower back with intense stretches and DO NOT press directly on the Kidneys.
Chronic Pain or Fibromyalgia	Only stretch the client within his or her limitations.
Back, Hip or Sacroiliac Pain	Concentrate on steps which involve loosening the hamstrings and psoas. Do not over-exert the client, and be sure to skip the advanced yoga stretches.

Basics Techniques

HELLO
It is important to move into a new area gently so as not to shock.

LISTENING HAND
A hand laid gently on the Receiver.

MOTHER HAND
A support hand used to give comfort or reassurance to the Receiver .Light and gentle pressure.

HARA
The area which lies between the ribs and diaphragm down the hip bones and pubic bone, the centre being the navel. This is a very powerful part of the body and is often neglected and abused. It is the seat of emotions which often holds experiences going back to childhood.

Also known as the power centre of the body – the TAN TIEN.
It is the place where we direct our focus on deep breathing to relax and energize.
It is also the area containing most of internal organs.
It should be treated with respect and compassion.

CLOSE
To relax an area after you have applied deep pressure.

POINTS
These are similar to acupressure points, strategically placed entry points direct to the energy paths or Sen Lines.

BREATHING
Essential throughout treatment for both the practitioner and receiver.
Used to help relax, energise, and to connect the physical body to the subtle body.

ROCK ON/ROCK OFF
A flowing motion of rocking bodyweight forward on to receiver and straight back off – no holding or waiting.

HOOK AND PULL
When fingers bend in a curl-like position to facilitate a good hold.
Used for working the Sen Lines.

PALM PRESS
Used throughout and MUST be used before and after you work the Sen lines to relax the limb you are working on .They prepare an area for deeper pressure work and relax the body between different procedures . Keep fingers relaxed and try not to apply pressure from the heel of your hands.
Alternate PP: Place the palm where instructed and lean your bodyweight on to one hand, then on to the other and back again , keeping up a steady rocking motion.

Double Palm: Rather than using alternate hands, pressure is applied with both hands at the same time .

THUMB PRESS
At the heart of working the Sen lines. Essentially TP is a similar technique to PP.
Pressure is applied by sinking the thumb pad, never from the point or tip.
Do not use directly on bones or on tendons.

SLIDE STRETCH
A slight pulling movement used on fingers and toes.
Support the hand or foot you are working on with one hand. Grasp the finger or toe between the thumb and forefinger of the other hand, squeeze firmly and simultaneously slide the fingers along the digit. A cracking or popping sound may occur.

THUMB AND FINGER CIRCLE
Generally applied to fingers and toes .Alternate thumb and index finger actions, applying pressure away towards the toe or fingertip in a caterpillar-like movement.

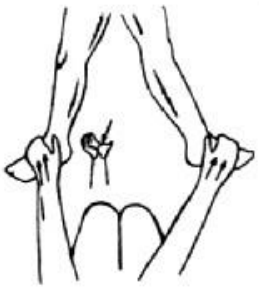
THUMB CIRCLE
Can be used all over the body. Apply pressure through the thumb pad and circle in a clockwise direction using soft to firm pressure. Always circle away from the centre of the body area. Keep fingers relaxed.

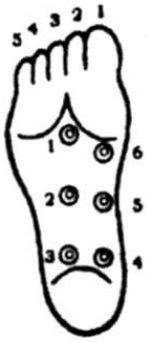
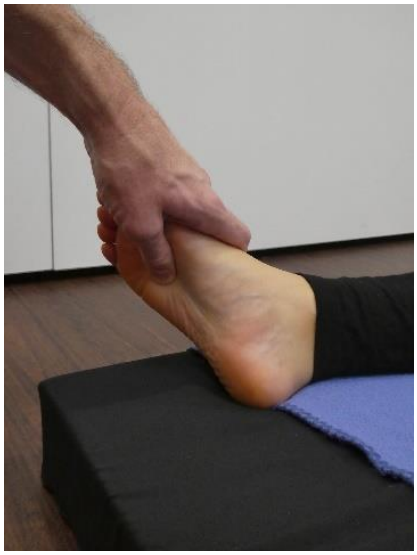
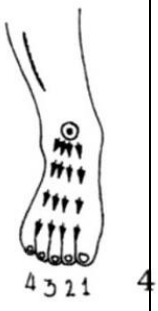
LOOSE FIST
Used on the back, shoulders and head to relax and revitalize.
Your wrists need to be relaxed as any tension in them will travel through them and be too sharp on the receiver.

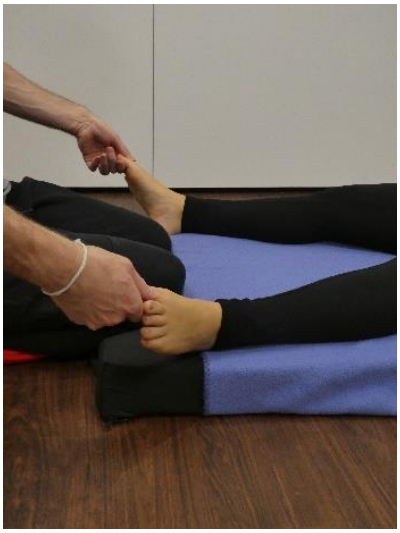
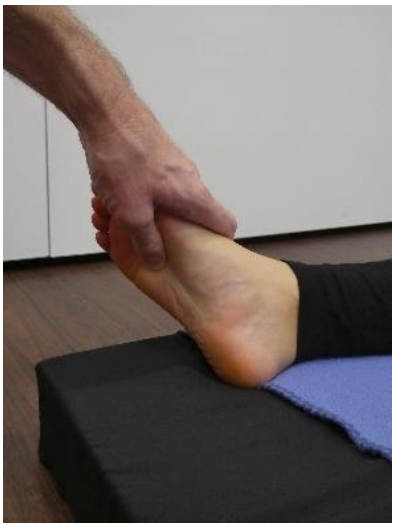
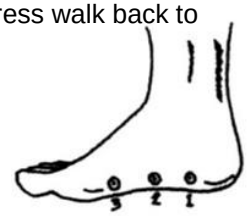
PRAYER CHOP
Place hands in prayer position. Working from loose wrists tap body area keeping hands together.
Pressure may be gentle to very firm.
Used on the shoulders, back (not over kidneys), back of legs and head.

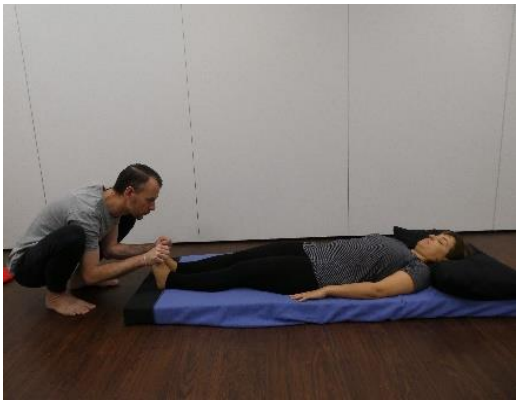
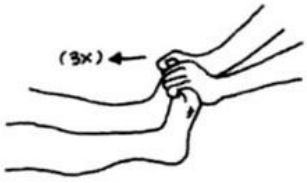
FOREARM ROLL
Mostly used on the legs and feet.
Start with the soft underside of the arm, with your palm facing down. Roll the arm away over the area you are working on so that the palm is now turned upwards. Take your arm off the body; smoothly turn it back over so that the palm is facing down again, move it farther along the limb, and repeat

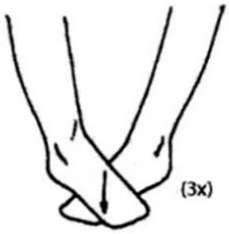
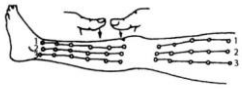
Thai Yoga Massage Routine

No.	Image	Description
		SUPINE POSITION **Instruction: 'Please lie on your back facing upwards'** **Feet and legs**
1		**Whai Khru** Respect to the teacher. 
2	 	**Palm press walk the feet and legs** *Position: Japanese sitting between the receivers ankles.* Palm press feet, 1-2-3-2-1 Palm press walk feet, 1-2-3-2-1. Palm press walk calves. Palm circle knees. Palm press walk thighs. Now do everything in reverse 

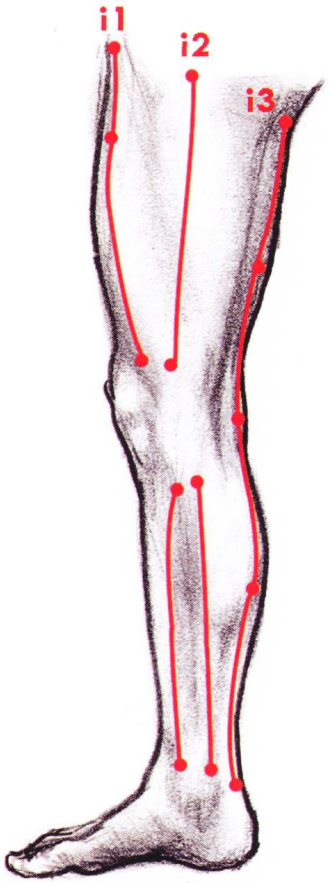
3		**Thumb press the 6 points of the feet** Thumb press starting on point 1 of the sole of the foot. 1 Press 5 seconds each point with soft pressure. 2 Press 10 seconds each point with hard pressure. 3 Press 5 seconds each point with soft pressure. 
4		**Thumb press the 5 lines of the sole of the feet** Thumb press starting on point 3 of the sole of the foot. Thumb press the foot along the line to the big toe. Thumb circle the toe and pinch the tip. Repeat for each toe. Palm press walk the feet. 
5		**4 lines of the top of the foot** Palm press the top of the foot, 1-2-3-2-1. Thumb press ST41. Thumb circle the line to the big toe. Thumb circle the toe and pinch the tip. 

		Repeat for each toe **Little toe instruction** Thumb press ST41. Finger circle the side of the foot. Thumb circle the toe and pinch the tip. Palm press the top of the foot, 1-2-3-2-1. 
6		**Thumb press the 3 points of the medial arch** Palm press the foot, 1-2-3-2-1. Thumb press starting on point 1 of the arch of the foot, 1-2-3. After reaching point 3, thumb press walk back to point 1. Palm press the foot, 1-2-3-2-1. 
7		**Rotate ankle** *Position: Place your inside foot next to the receivers outside hip. Drape their leg over yours.* Rotate the foot outwards and then inwards 5 times each. 

8		**Twist foot** *Position: Place your inside foot next to the receivers outside hip. Drape their leg over yours.* Twist the foot outwards and then inwards 5 times, 1-2-3-2-1. **Now repeat 7-8 on the other side.** 
9		**Stretch top of feet** Press down on the tops of the feet, 1-2-3-2-1. 
10		**Push toes forwards** Push the toes forwards towards the head, 1-2-3. 

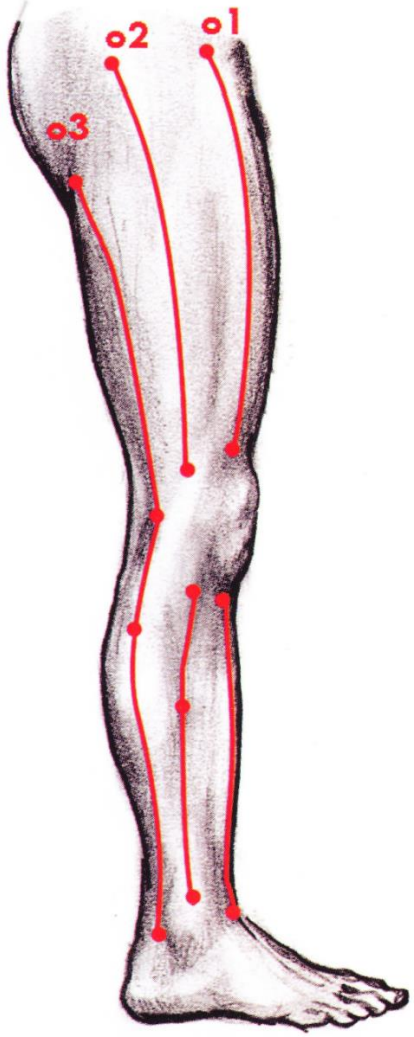
11		**Cross feet** Cross feet Double palm press down 3 times. 5-10-5, S-H-S. Swap feet over and repeat. 
12		**Energy lines of the legs**  *Position: Kneel at the side of the receiver facing their legs lengthways.* *Women: Begin on the inside of the left leg and then work on the outside of the right leg. Then repeat on the other side.* *Men: Begin on the inside of the right leg and then work on the outside of the left leg. Then repeat on the other side.* **CONTRAINDICATION LOCAL: Varicose veins**

The 3 inside lines of the leg

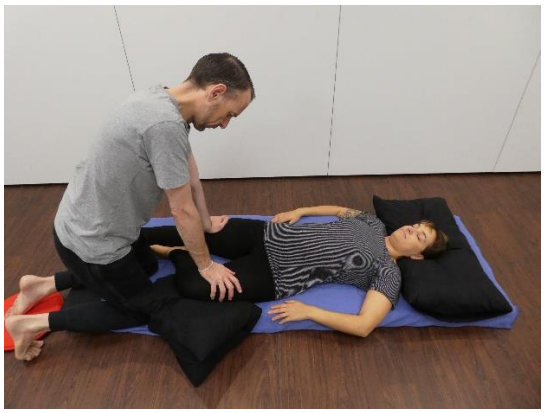


Calf	Thigh
Line 1: Runs from the ankle under the edge of the tibia bone to the top corner of the kneecap.	Line 1: Runs from the top corner of the kneecap to the groin.
Line 2: Runs between line 1 and 3.	Line 2: Runs between line 1 and 3.
Line 3: Runs above the Achilles tendon along the bottom edge of the calf to the bottom corner of the kneecap.	Line 3: Runs from the bottom corner of the kneecap to the groin.

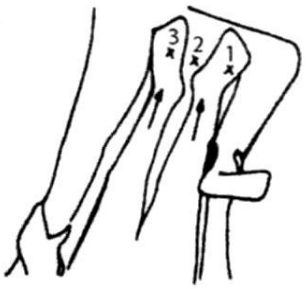
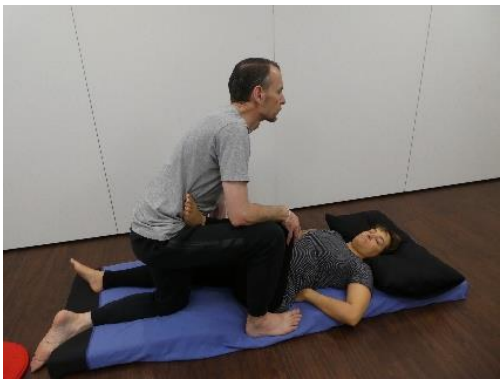
The 3 outside lines of the leg



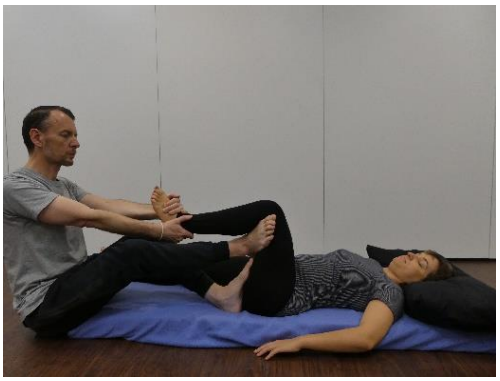
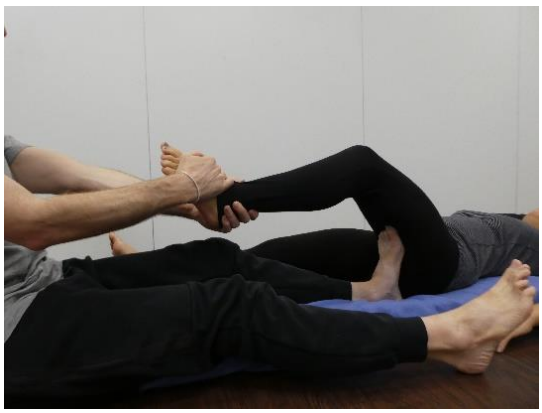
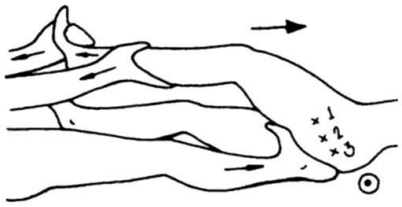
Calf	Thigh
Line 1: Runs from ST41 under the edge of the tibia bone to the top corner of the kneecap.	Line 1: Runs from the top corner of the kneecap to the groin.
Line 2: Runs between line 1 and 3.	Line 2: Runs between line 1 and 3.
Line 3: Runs above the Achilles tendon in a straight line to the bottom corner of the kneecap.	Line 3: Runs from the bottom corner of the kneecap to the groin.

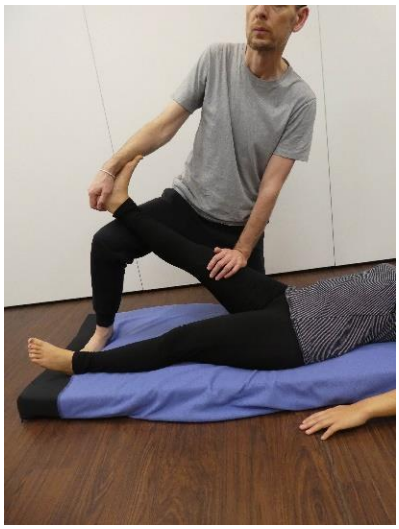
		**How to work the inside and outside lines of the leg** Place one hand on the ankle and one on the hip. Stretch between ankle and hip. Palm press walk with both hands to the knee and back, 1-2-3-2-1. Palm press walk with both hands to the knee and then palm press walk with both hands to the ankle. Stretch ankle. Thumb press walk the 3 lines of the leg. Palm press walk with both hands from the ankle to the groin and back. Stretch ankle.
13		**Half lotus** Place leg in half lotus. Stretch above the knees and palm press walk to the groin and back, 1-2-3-2-1. Move foot out slightly. Palm press walk foot and thigh, 1-2-3-2-1. Palm press walk calf and thigh, 1-2-3-2-1. Butterfly thigh, 1-2-3-2-1. Palm press walk calf and thigh, 1-2-3-2-1. Palm press walk foot and thigh, 1-2-3-2-1

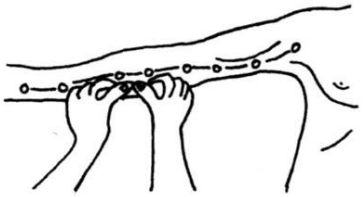
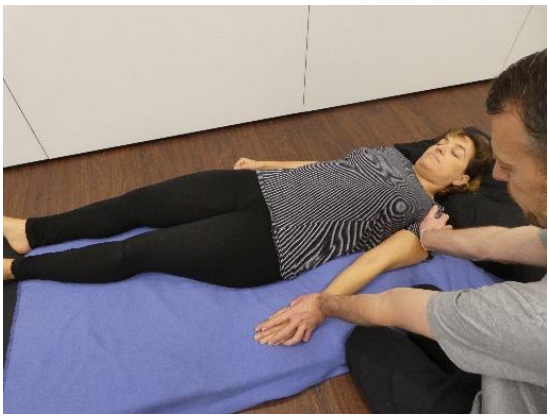
14		**Open groin** Move the receivers leg out to 90 degrees and sit between their legs. Press on the back of the thigh with your outside foot, 5 seconds each press, 1-2-3-2-1. 
15		**Lock leg** Move the outside foot over the top of your leg and cup the heel. Press on the back of the thigh with your inside foot, 10 seconds each press, 1-2-3-2-1. 

16		**Feet walk** Unlock leg and walk on the back of the thigh many times. 
17	 	**Knee to chest** Half kneel with the receivers foot in your groin. Place your standing foot next to their hip. Cup the bent leg knee with your outside hand. Place your inside hand on the inside thigh. Move forward pressing the knee, 1-2-3-2-1. 

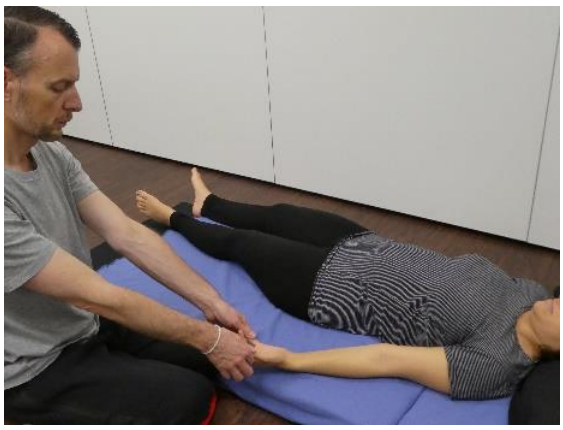
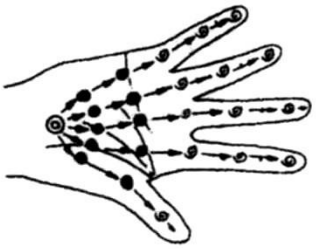
18		**Twist hip** Lock the straight inside leg with your inside foot. Raise the other leg up cupping the heel with your inside hand and placing your outside hand on the back of the thigh. Press the knee towards the centre of the sternum and the foot towards the opposite shoulder, 1-2-3-2-1
19		**Open leg** Move your standing foot out slightly further. Lock the straight inside leg with your inside foot. Support the knee with your outside hand and place your inside hand on the back of the thigh. Press the thigh laterally a short way and then forwards, 1-2-3-2-1. 

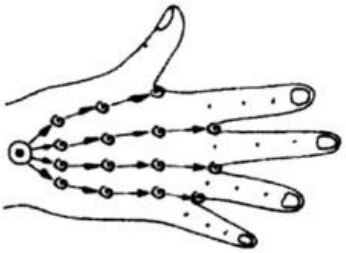
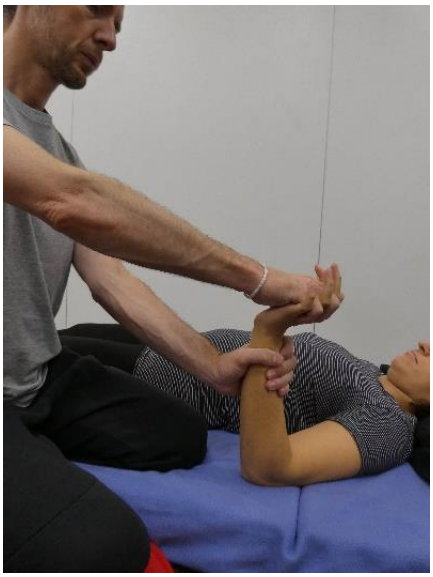
20		**90 degrees** Move the leg to a 90 degree angle and sit down. Place your inside foot on the back of the buttock, the outside foot on the back of the thigh and hold the receivers foot. Push the back of the thigh first and then pull on the leg, 1-2-3-2-1.  28
21		**1-2-3 Automatic** Place your inside foot on the outside buttock with your heel on the mat. Hold the receivers foot firmly. 1 - Lean back pressing your toes in to the buttock. 2 - Push the leg further forward and then lean back again. 3 - Push the leg forward as far as possible and then lean back again. 

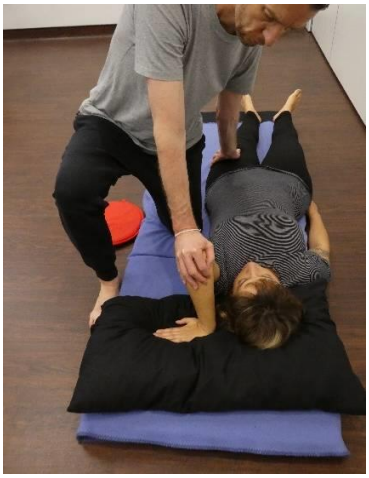
22		**Lift leg (cup hand)** Cup the heel and press the sole against your inner forearm. Place your other hand on the thigh. Stretch the foot while moving your hand down the thigh, 1-2-3-2-1. 
23		**Knee on pectoral and forearm** Open out the appropriate arm at right angles with the palm facing upwards. Gently press inside knee on the outside pectoral for 5 seconds. Place one hand on the shoulder and one on the wrist. Press outside knee on the forearm from the elbow to the wrist, 1-2-3.
24		**Inside line of the arm** Open out the appropriate arm at right angles with the palm facing upwards. Place one hand on the shoulder and one on the wrist. Stretch between the shoulder and the wrist. Palm press walk with both hands to the elbow and back, 1-2-3-2-1.

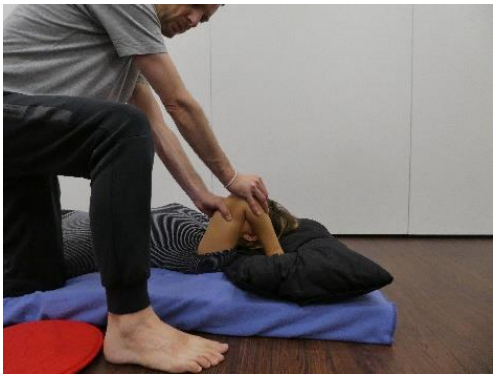
		Palm press walk with both hands to the elbow and then palm press walk with both hands to the wrist. Stretch wrist. Thumb press walk the centre line of the arm. Palm press walk with both hands from the wrist to the shoulder and back. INSIDE Stretch wrist. 
25	 	**Outside line of the arm** Place the arm next to the torso with the palm facing downwards. Place one hand on the shoulder and one on the wrist. Stretch between the shoulder and the wrist. Palm press walk with both hands to the elbow and back, 1-2-3-2-1. Palm press walk with both hands to the elbow and then palm press walk with both hands to the wrist. Stretch wrist. Thumb press walk the centre line of the arm. OUTSIDE Palm press walk with both hands from the wrist to the shoulder and back. Stretch wrist. 

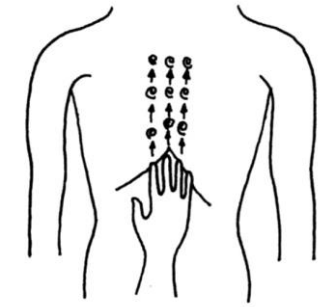
26		**6 points of the hand** **Contraindication: Don't perform during pregnancy.** Knead hand everywhere. 1 - Thumb press points 1 and 2 in parallel together. 2 - Thumb press points 3 and 4 in parallel together. 3 - Thumb press points 5 and 6 in parallel together. 5 - Thumb press points 3 and 4 in parallel together. 6 - Thumb press points 1 and 2 in parallel together. 7 - Thumb press points 3 and 4 in parallel together. 8 - Thumb press points 5 and 6 in parallel together. Thumb press walk everywhere. Knead hand. 

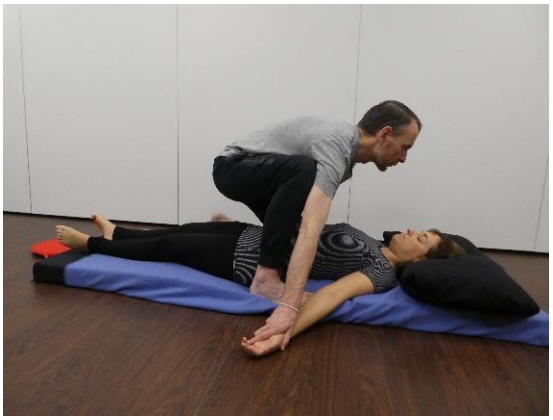
27		**Thumb stroke** With parallel thumbs stroke the palm of the hand from the heel to the fingers. Thumb stroke the palm of the hand alternately. 
28		**5 lines of the palm** Double thumb press the heel of the hand. Thumb press each line to the finger. Thumb circle the finger to the end and then pinch the tip. Knead hand. 

29		**4 lines of the back of the hand** Double thumb press the wrist joint. Thumb circle between the bones, two fingers at a time working inwards. Thumb and little finger, index and ring fingers. Thumb circle the finger to the end and then pinch the tip. **Middle finger only** Double thumb press the wrist joint. Thumb circle the centre line of the hand on the bone, thumb circle the finger to the end and then pinch the tip. Knead the hand 
30		**Rotate wrist** Rotate wrist out 5 times. Rotate wrist in 5 times. Stretch the hand 3 times and slide the fingers off. 

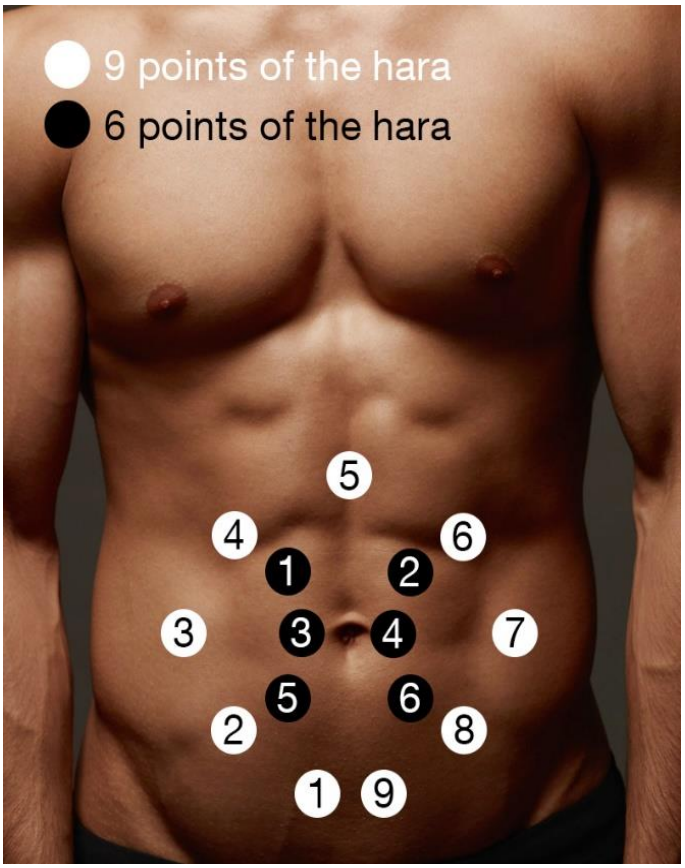
31	 	**Stretch fingers** From the heel of the hand thumb slide up the palm. Then thumb slide up the fingers whilst maintaining support behind each one. Stretch the hand and thumb together. 
32		**Stretch torso** Place the receivers hand next to their head with their fingers pointing outwards. Cup the elbow with one hand and place your other hand on the thigh. Stretch lengthways, 1-2-3-2-1.

33		**Stretch triceps** Move your hand from the hip to the upper arm. Palm press pull the  60
34		**Shake hand** Gently shake hand and then place back on the ground.
		Now go back to 13 'Half lotus' and repeat on the other side.

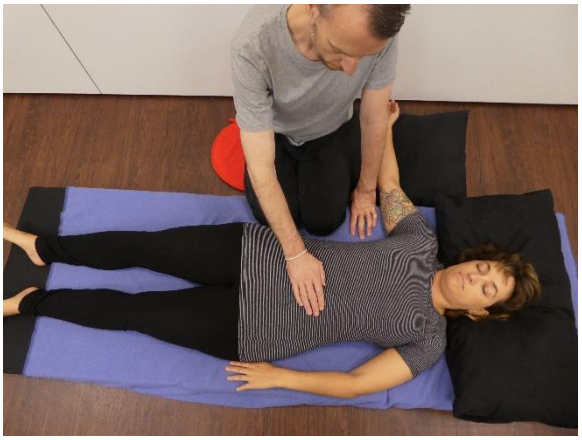
35	 	**Chest** Finger circle the sternum (from the xiphoid process) up to the clavicle, back down and then up again. Finger circle below the clavicle, out-in-out. Finger circle between the ribs from the inside out, down the ribcage and then back up. Palm circle the sides of the rib cage, down-up-down Lift the waist, 1-2-1. Palm circle the sides of the rib cage, up-down-up. 
36		**Shoulders** *Turn the receivers hands upwards.* Palm press the pectorals, 1-2-1, V-A-V. Finger knead the traps out-in. Finger hook the traps out-in, 1-2-3-2-1. Finger knead the traps out-in. Palm circle the shoulders. Palm press walk the arms down-up-down.



Place your palms on your receivers palms and stretch.



37



Hara (abdominal) massage

Contraindications: Don't perform during pregnancy, menstruation, after a stomach operation or if the receiver has a stomach ulcer.

The location of the 9 points of the hara.

1 - 1 Thumbs width above the pubic bone.

2 - 1 Thumbs width above the hip.

3 - Side of the stomach, level with the navel.

4 - 1 Thumbs width below the rib.

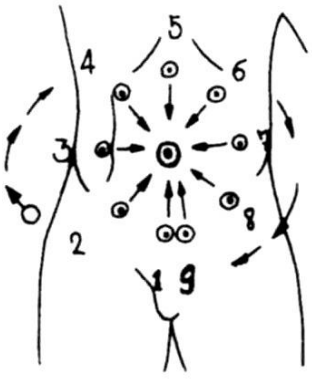
5 - 1 Thumbs width below the sternum.

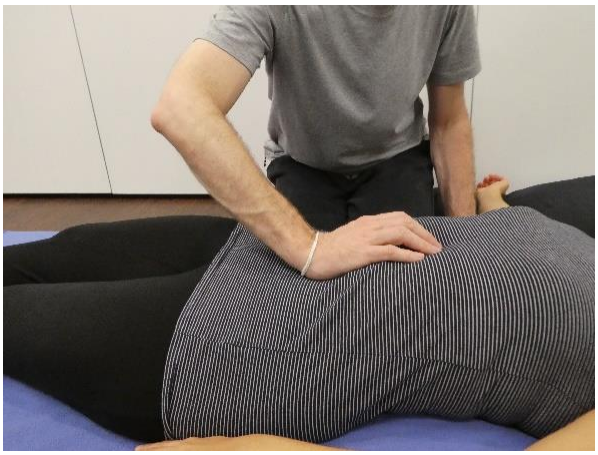
6 - 1 Thumbs width below the rib.

7 - Side of the stomach, level with the navel.

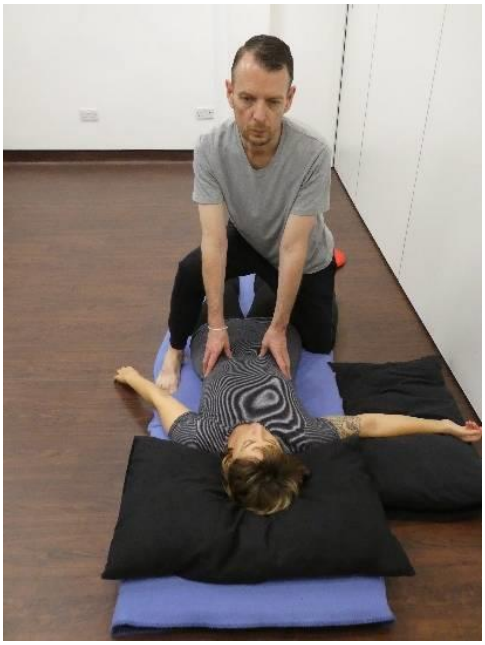
8 - 1 Thumbs width above the hip.

9 - 1 Thumbs width above the pubic bone.



38		**Open hara** Warm your hands and palm circle the abdomen in a clockwise motion (counter clockwise for diarrhoea). Cup your hand over the navel and when your receiver exhales press down. When they inhale release.  45
39		**Working the 9 points of the hara.** Press down 10% Push towards the navel 90% Do each point individually, 1-9, in a clockwise direction (counter clockwise for diarrhoea). When the receiver exhales press down, when they inhale release.

40



The 6 points of the hara.

The location of the 6 points of the hara.

1 - 1 Thumbs length diagonally upwards from the navel to the left.

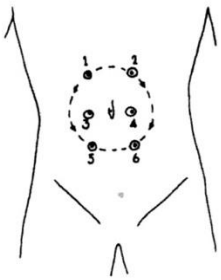
2 - 1 Thumbs length diagonally upwards from the navel to the right.

3 - Half a thumbs length horizontally from the navel to the left.

4 - Half a thumbs length horizontally from the navel to the right.

5 - 1 Thumbs length diagonally downwards from the navel to the left.

6 - 1 Thumbs length diagonally downwards from the navel to the right.



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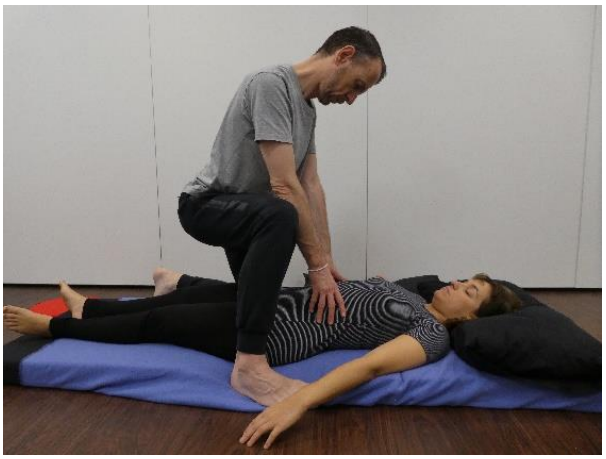
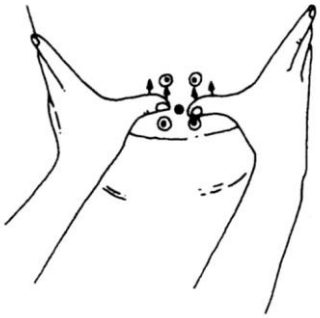
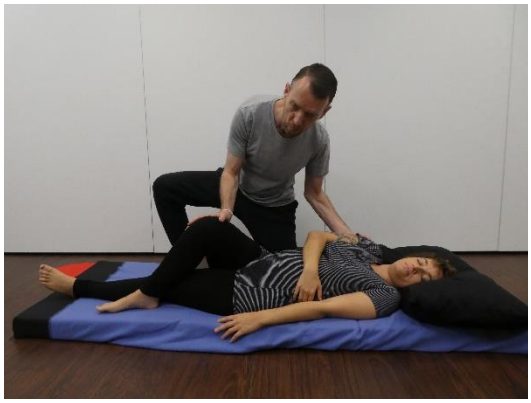
41		**Working the 6 points of the hara.** *When the receiver exhales press down, when they inhale release. Allow a breath between each step* 1 - Thumb press points 1 and 2 in parallel together. 2 - Thumb press points 3 and 4 in parallel together. 3 - Thumb press points 5 and 6 in parallel together. 5 - Thumb press points 3 and 4 in parallel together. 6 - Thumb press points 1 and 2 in parallel together. 7 - Thumb press points 3 and 4 in parallel together. 8 - Thumb press points 5 and 6 in parallel together. 
		**SIDE POSITION** **Turn the receiver on to their side** **Women** turn to lie on their left hand side **Men** turn to lie on their right hand side The bottom leg is straight, the top leg is bent at right angles.

42

Fixing a broken heart

Contraindication: Dislocated shoulder

Position: Kneel behind the receivers back supporting their waist with your thigh.

Shake arm.

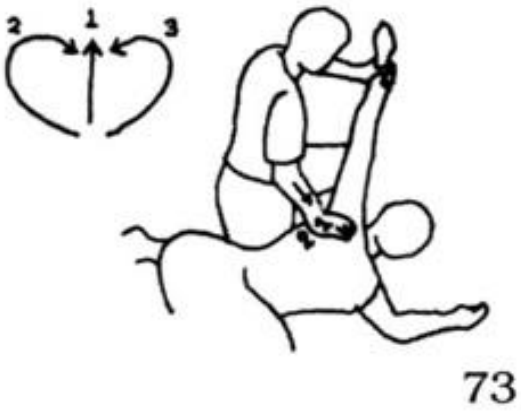
Outside hand holds the wrist of the top arm. Place inside hand on the armpit.

1 Lift arm and move arm over the head along the sagittal plane.

2 Move inside hand down the armpit. Lift arm and rotate in a half circle on the anterior side of the body.

3 Move inside hand back under the armpit. Lift arm and rotate in a half circle on the posterior side of the body.

Shake arm.



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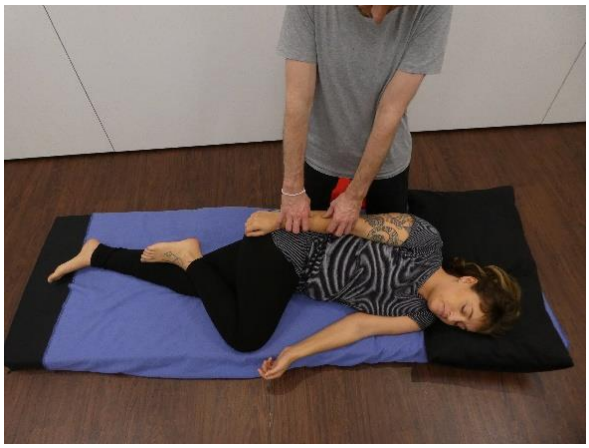
43		**Side inside line of the arm** Place one hand on the shoulder and one on the wrist. Stretch between the shoulder and the wrist. Palm press walk with both hands to the elbow and back, 1-2-3-2-1. Palm press walk with both hands to the elbow and then palm press walk with both hands to the wrist. Stretch wrist. Thumb press walk the centre line of the arm. Support the arm with your fingers as well. Palm press walk with both hands from the wrist to the shoulder and back. Stretch wrist. 

44



Side outside line of the arm

Position: Drape arm along the length of the torso. Kneel behind.

Place one hand on the shoulder and one on the wrist.

Stretch between the shoulder and the wrist.

Palm press walk with both hands to the elbow and back, 1-2-3-2-1.

Palm press walk with both hands to the elbow and then palm press walk with both hands to the wrist.

Stretch wrist.

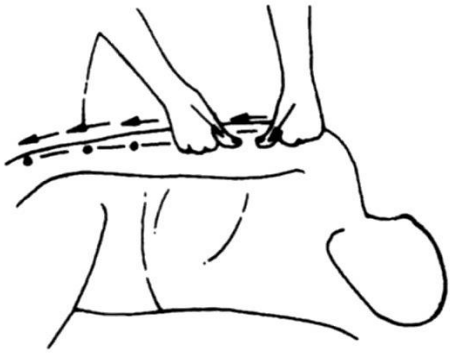
Thumb press walk the centre line of the forearm.

Thumb press walk lines 1 and 3 of the upper arm to the shoulder.

Thumb press walk the centre line all the way back to the wrist.

Palm press walk with both hands from the wrist to the shoulder and back.

Stretch wrist.



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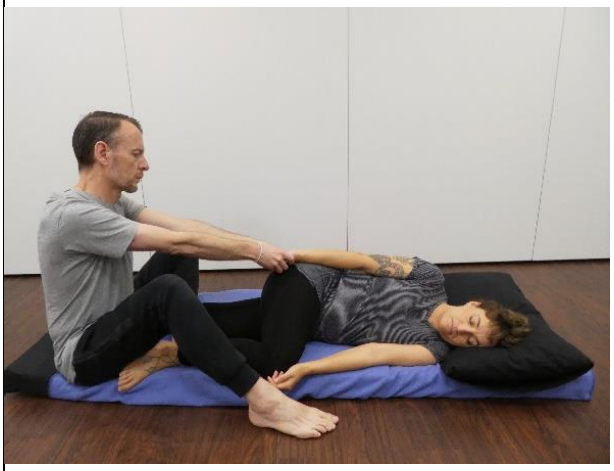


Side 6 points of the hand

Contraindication: Don't perform during pregnancy.

Position: Sit between receivers legs.

Turn palm to face upwards.

Knead hand everywhere.

1 - Thumb press points 1 and 2 in parallel together.

2 - Thumb press points 3 and 4 in parallel together.

3 - Thumb press points 5 and 6 in parallel together.

5 - Thumb press points 3 and 4 in parallel together.

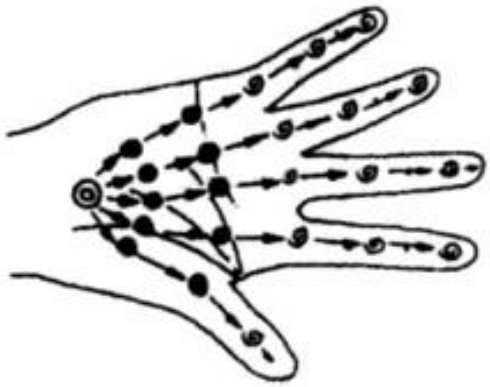
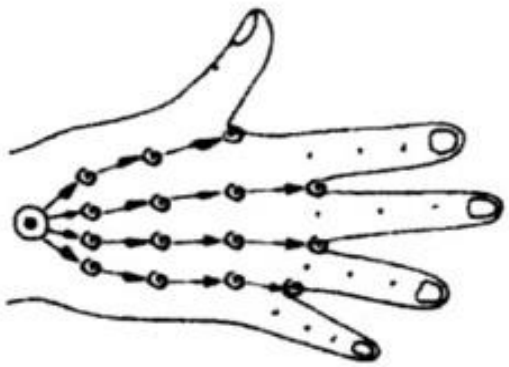
6 - Thumb press points 1 and 2 in parallel together.

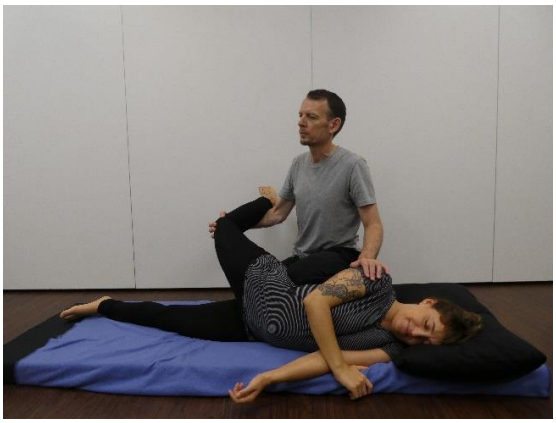
7 - Thumb press points 3 and 4 in parallel together.

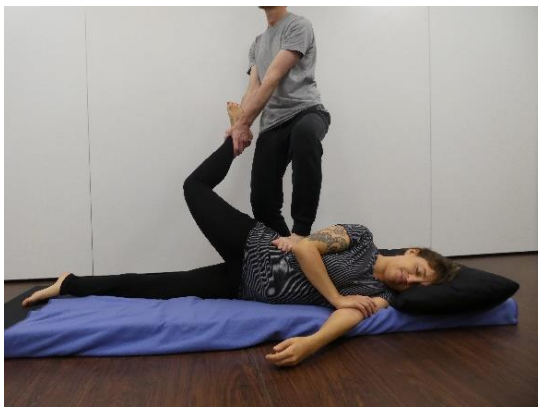
8 - Thumb press points 5 and 6 in parallel together.

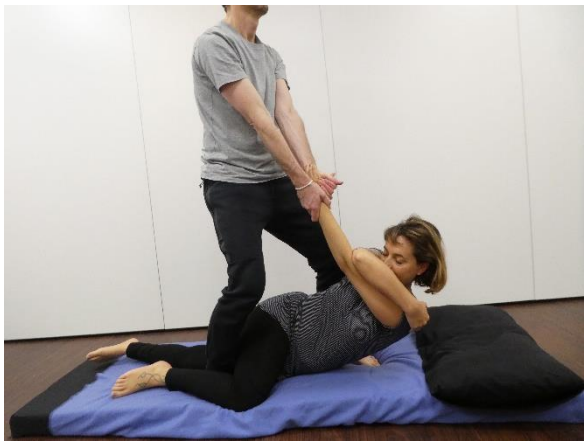
Thumb press walk everywhere.

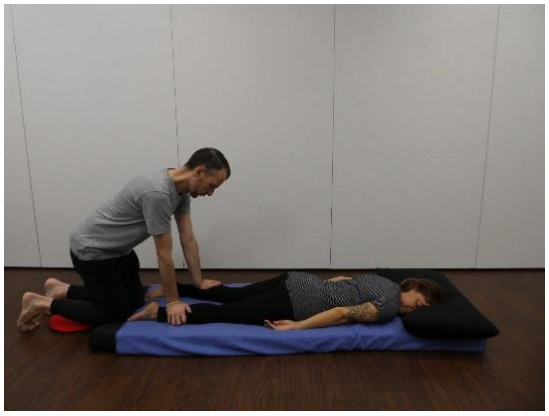
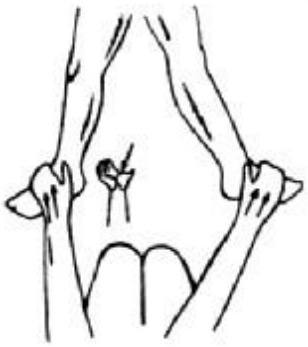
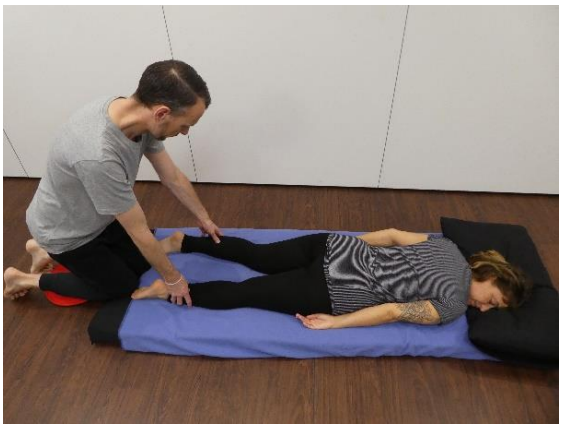
Knead hand.

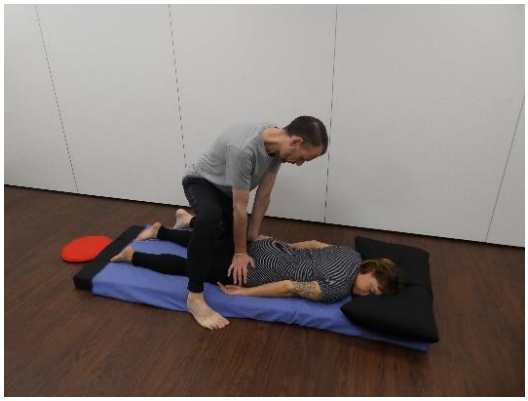
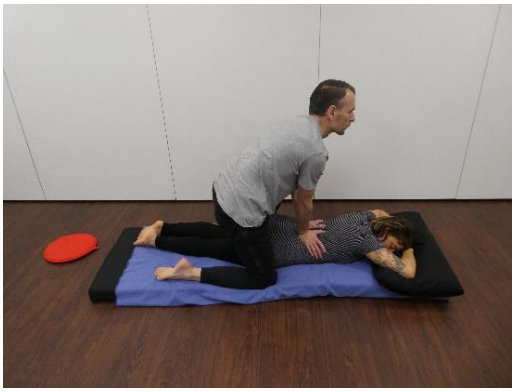
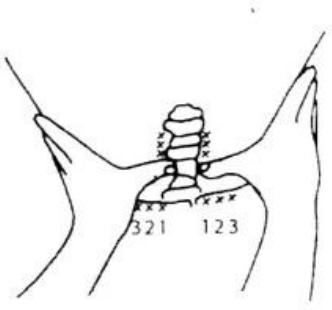
46		**Thumb stroke** With parallel thumbs stroke the palm of the hand from the heel to the fingers. Thumb stroke the palm of the hand alternately. 
47		**5 lines of the palm** Double thumb press the heel of the hand. Thumb press each line to the finger. Thumb circle the finger to the end and then pinch the tip. Knead hand.
48		**Side 4 lines of the back of the hand** Double thumb press the wrist joint. Thumb circle between the bones, two fingers at a time working inwards. Thumb and little finger, index and ring fingers. Thumb circle the finger to the end and then pinch the tip. **Middle finger only** Double thumb press the wrist joint. Thumb circle the centre line of the hand on the bone, thumb circle the finger to the end and then pinch the tip. Knead the hand

49		**Side rotate wrist** Rotate wrist out 5 times. Rotate wrist in 5 times. Stretch the hand 3 times and slide the fingers off. 
50		**Side stretch fingers** From the heel of the hand thumb slide up the palm. Then thumb slide up the fingers whilst maintaining support behind each one. Stretch the hand and thumb together.
51		**Kneeling side half locust**  **Stage 1** Point 1 - Above the hip bone Point 2 - Below the ribs Half kneel and place your knee against the receivers waist. Take the top leg and cup the knee while resting the calf on your arm. Lean back pressing your knee against point 1 and 2, 1-2-1.

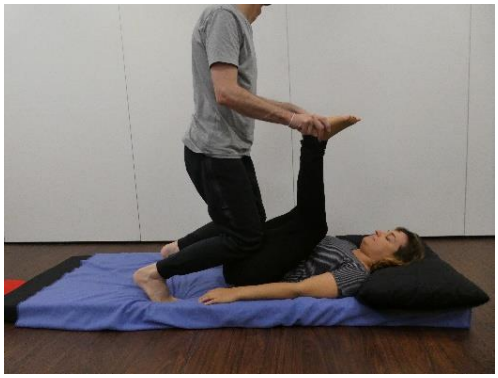
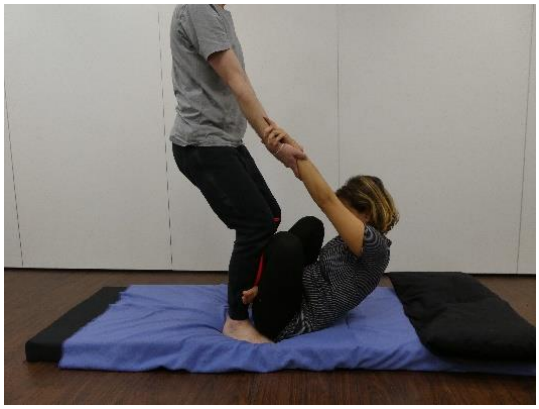
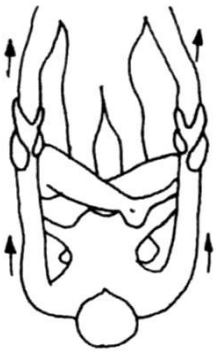
		**Stage 2** Point 3 - Centre of buttock Point 4 - Crease of buttock Point 5 - Middle of thigh Lean back as you press your knee against point 3, 4, 5. Move your knee back to point 4. Finger hook line 1 on the inside of the leg, 1-2-3-2-1. Knock leg.
52		**Standing side half locust** **Stage 1** Point 1 - Above the hip bone Point 2 - Below the ribs  Take hold of the ankle of the receivers straight leg and stand up. Standing behind their buttocks place your inside foot on their waist. Thai Chi turn to stretch the leg, pressing your foot against point 1 and 2, 1-2-1. **Stage 2** Take hold of the ankle of the receivers bent leg and stand up. Stand behind their waist or higher. Stretch the leg, pressing your foot against point 1 and 2, 1-2-1. Note: No Thai Chi turn.

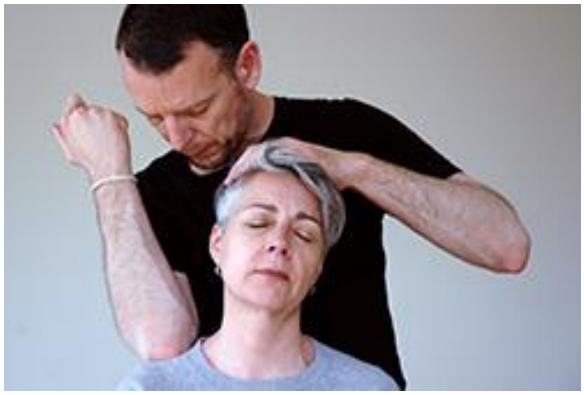
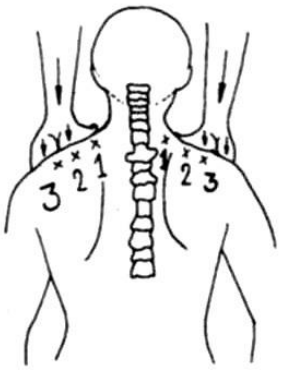
53		**Twist lift body** Stand across the receivers hips with one foot behind their bent leg thigh and the other behind their back. Ask the receiver to hug themselves. One hand holds their hand and the other the forearm. Keep your back straight and lift up 3 times. Palm circle the back.
		Now go back to 42 ' Fixing a broken heart' and do on the other side.
		PRONE POSITION **Instruction: 'Please turn over on to your chest, facing downwards'**

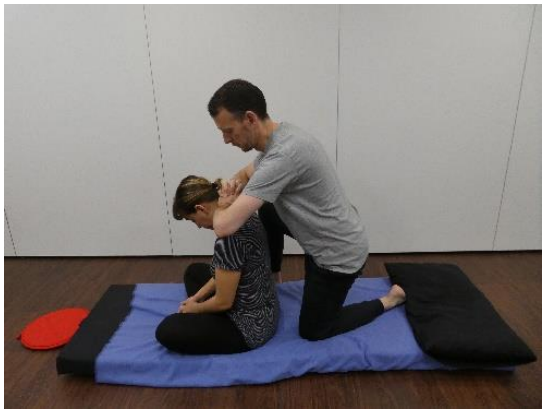
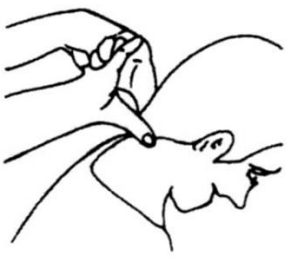
54		**Palm press the back of the legs** Palm press walk feet. 1-2-3-2-1 Palm press walk the back of the calves. Palm press walk the back of the thighs. Now do everything in reverse. 
55		**Energy lines of the back of the legs** Thumb press walk the centre line of the back of the legs. Palm press walk feet. 1-2-3-2-1 Palm press walk the back of the calves. Palm press walk the back of the thighs. Now do everything in reverse.

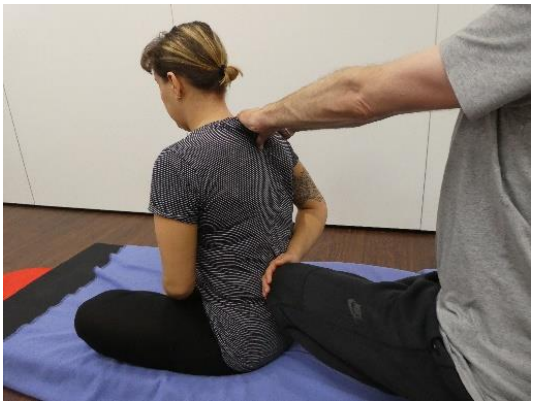
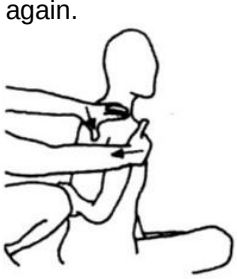
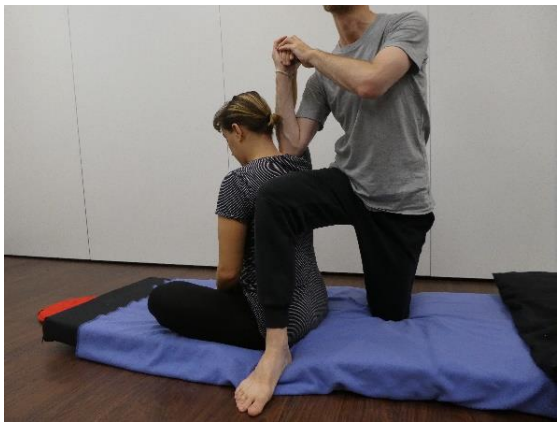
56		**Stool sitting** Press the centre of the buttocks with the heel of your hand - 1 Fingertips pointing downwards towards the feet. 2 Fingertips pointing outwards. 3 Fingertips pointing upwards.
57		**Energy lines of the back** Palm press the back, 1-2-3-2-1. Thumb press with parallel thumbs either side of the spine. Take short steps up the spinal column pressing each time until you reach the top of the scapulas. Thumb press walk all the way back down. Thumb press 3 points of the waist, 1-2-3-2-1. Palm press the back, 1-2-3-2-1. 
58		**3 points of the waist** Thumb press 3 points of the waist, 1-2-3-2-1.  100

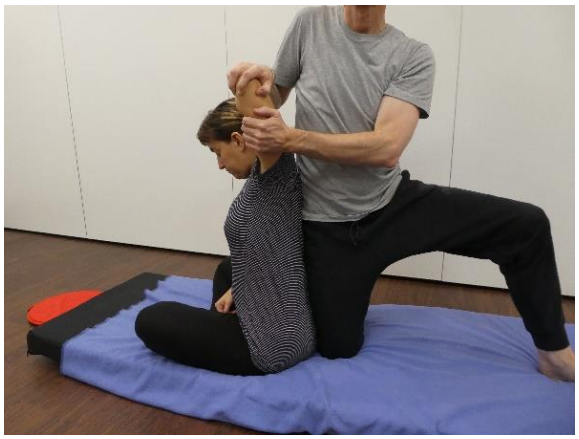
59		**Cobra** Palm press the back, 1-2-3-2-1. Palm press down the arms. Kneel on the receivers buttocks and take hold of their wrists and ask them to hold yours as well. 1 Keep your back straight and lean back lifting them up, hold for a few seconds and release gently back down. Repeat again. 2 Repeat a third time and also turn the receiver gently to one side and then the other. 
		Instruction 'turn over on to your back'.
60		**Rocking** Scoop hands under the receivers ankles. Gently rock the legs from side to side and backwards and forwards

61		**Cowboy rides the horse** Place your knees on the back of the thigh above the sitting bones. Cup the receivers heels with your hands. Press forward to stretch the legs, 1-2-3-2-1. 
62		**Head to knees with crossed legs** Cross the receivers legs and place them against your shins. Hold their wrists and lift up, 3 times. On the third round hold for 5 seconds and then slowly walk backwards bringing them to a seated position. 

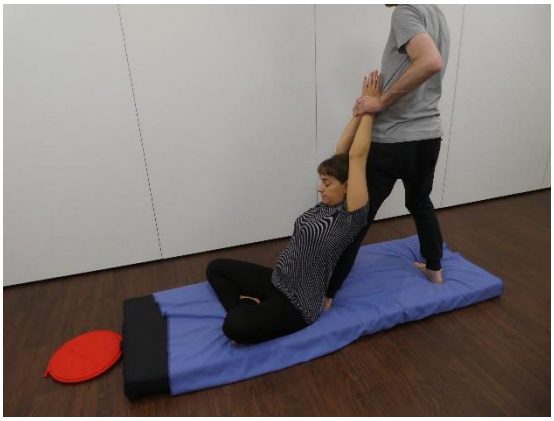
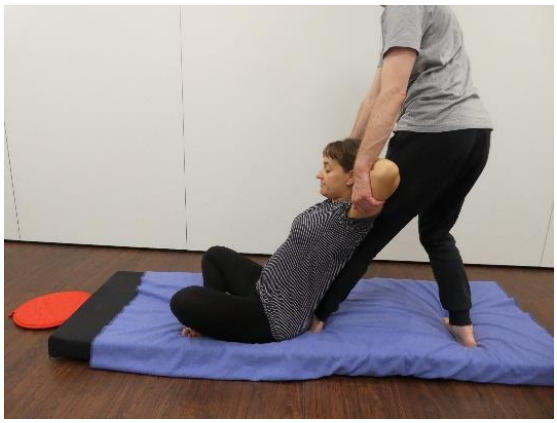
63		**Elbow press the 6 points of the shoulders** Palm press on the shoulders, 1-2-3 (fingers behind). Palm press on the shoulders, 3-2-1 (fingers forward). Elbow press - Point 1 on crease of the neck Point 2 on the middle of the shoulder Point 3 on the edge of the shoulder Move elbow back towards you a short distance - Point 4 on the edge of the shoulder Point 5 on the middle of the shoulder Point 6 on crease of the neck Knead shoulders. 

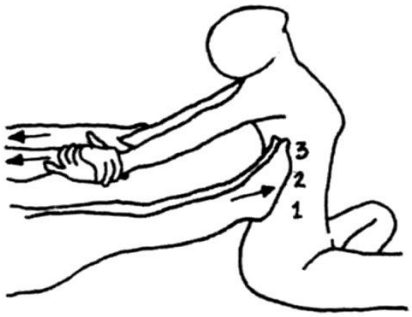
64		**Nutcracker neck** Place one hand on the forehead and finger circle either side of the cervical spine. Interlace your fingers and nutcracker the neck. 1-2-3-2-1 Finger circle either side of the cervical spine again. 
65		**Ice pick neck** Place one hand on the forehead and finger circle either side of the cervical spine. Interlace your fingers turn your thumbs downwards and ice pick the neck, 1-2-3-2-1. Finger circle either side of the cervical spine again. 

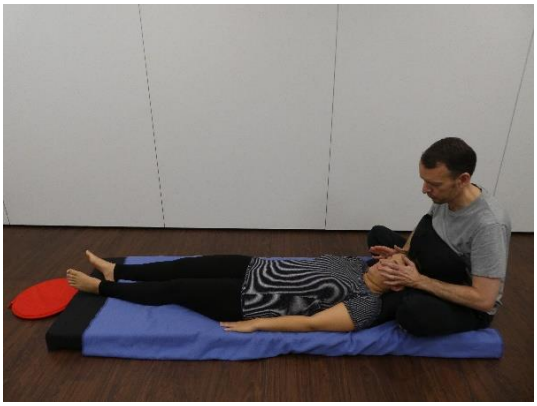
66		**Scapula** Take the receivers arm behind their back. Cup the shoulder with your outside hand. With your inside arms hand karate hand press the edge of the scapula, next to the bone. Thumb press the 3 points of the scapula. Palm press the edge of the scapula again. 
67		**3 points with elbow press** **Contraindication: Dislocated shoulder** Point 1 - Half way between shoulder and neck. Point 2 - On the top corner of the scapula. Point 3 - Half way down the scapula. *Note: This example is for working on a woman.* **Remember: Left-left-left** Half kneel with your raised **left** thigh against the receivers back. Lift the receivers **left** arm taking it over their shoulder. Hold their wrist with your **left** hand and place your elbow on point 1. Hold their fingers with your other hand.

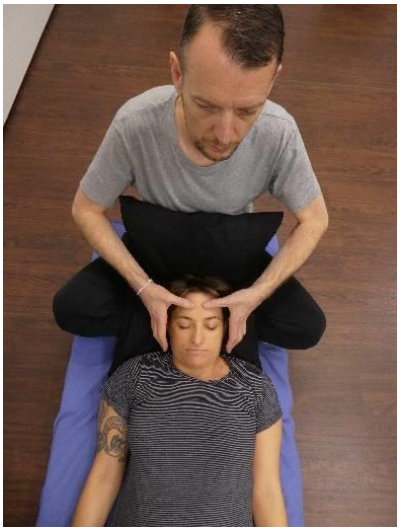
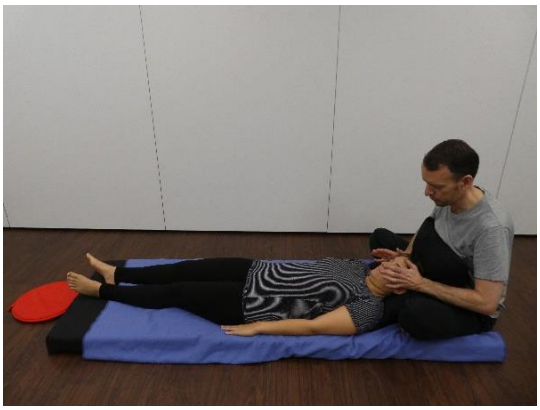
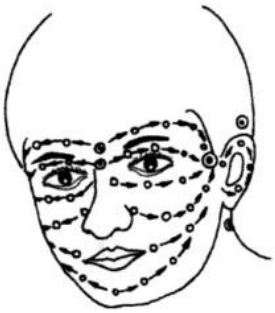
		Elbow press the shoulder as you GENTLY pull the hand backwards. Repeat on all 3 points, 1-2-3-2-1.  116
68		**Hook hit triceps** Place the receivers hand on the back of their neck. Tai chi turn and extend your outside leg, knee up, backwards and place your kneeling legs thigh against the back. Cup the elbow with your inside hand and place your elbow on their hand on the back of their head. Finger hook the triceps as you pull the arm back, 1-2-3-2-1. Knock the upper arm.

69		**Forearm role shoulders** Half kneel behind the receiver. Forearm role their shoulders both sides, out and then in, 1-2-3-2-1.
70		**Side neck stretch** Place forearm on side of head and the other forearm on the shoulder. Gently push apart.

71		**Hand prayer lift** Hold the receivers wrists standing side on behind them. Lift up and lean back one time.
72		**Chicken wing** Place the receivers hands behind their head with fingers interlaced. Hold under triceps, lift up and lean back 3 times

73		**Spinal twist** Interlace the receivers fingers and place them on the back of the receivers head. Place your near hand on their scapula and the other hand on their far elbow. Twist drawing the elbow towards you. Repeat 2 more times.
74	  	**Row the boat** Sit behind the receiver with their arms extended behind their back and their palms facing upwards. Point 1 - Above the hips. Point 2 - Below the scapulas. Point 3 - The scapulas. Press your feet in to points 1, 2 and 3, 1-2-3-2-1. *Note: Do not pull back on the arms, only press with the feet.* 

75		**Chop** Chop with your hands (fingers and hands together, elbows at right angles) from the centre of the back along the shoulder and then down the side of the spine. Repeat on the other side. Now pound with relaxed fists (Thai fists) from the centre of the back along to the shoulders and then down the sides of the spine half way. Palm circle the back, shampoo and brush. **Say the mantra - 'Na a, na waf, roka, payati, vinas santi'** 'We pray for the one whom we touch. That they will be happy and that any illness will be released from them.'
		Instruction to lie down
76	 	**Neck, skull and head** **Neck** Finger circle the neck, up-down. Finger lift, 1-2-3-2-1. Finger circle the neck, up-down-up. **Skull** Finger circle the occipital ridge, out-in. Finger press the 3 points of the skull. Finger circle the occipital ridge, out-in. Finger walk along the centre of the back of the skull, up-down-up.

77		**Crown to hairline** Double thumb press from the crown to the hairline. Thumb press walk back to the crown and then repeat the sequence. 
78	 	**Face** *Always work from the centre outwards* **Free style face massage** 4 lines from the centre of the forehead. 2 lines from the nose. 1 line from the mouth. 1 line from the chin.  Finger hook from the chin to the ears. Finger hook under the cheeks. Finger squeeze the eyebrows. Massage ears. Cup eyes 3 times and then ears 3 times for 20 seconds.

		Tap fingers on the head. Shampoo and brush. **Say the mantra - 'Na a, na waf, roka, payati, vinas santi'** 'We pray for the one whom we touch. That they will be happy and that any illness will be released from them.'

After the treatment

Offer the receiver tea or water.

Allow them to take a few moments to collect their thoughts and then ask them how they are feeling and what their experience of the massage was like.

Detail any findings you made during the session.

Mention that they might have a some aches and pains over the next few days but usually these will rapidly go.

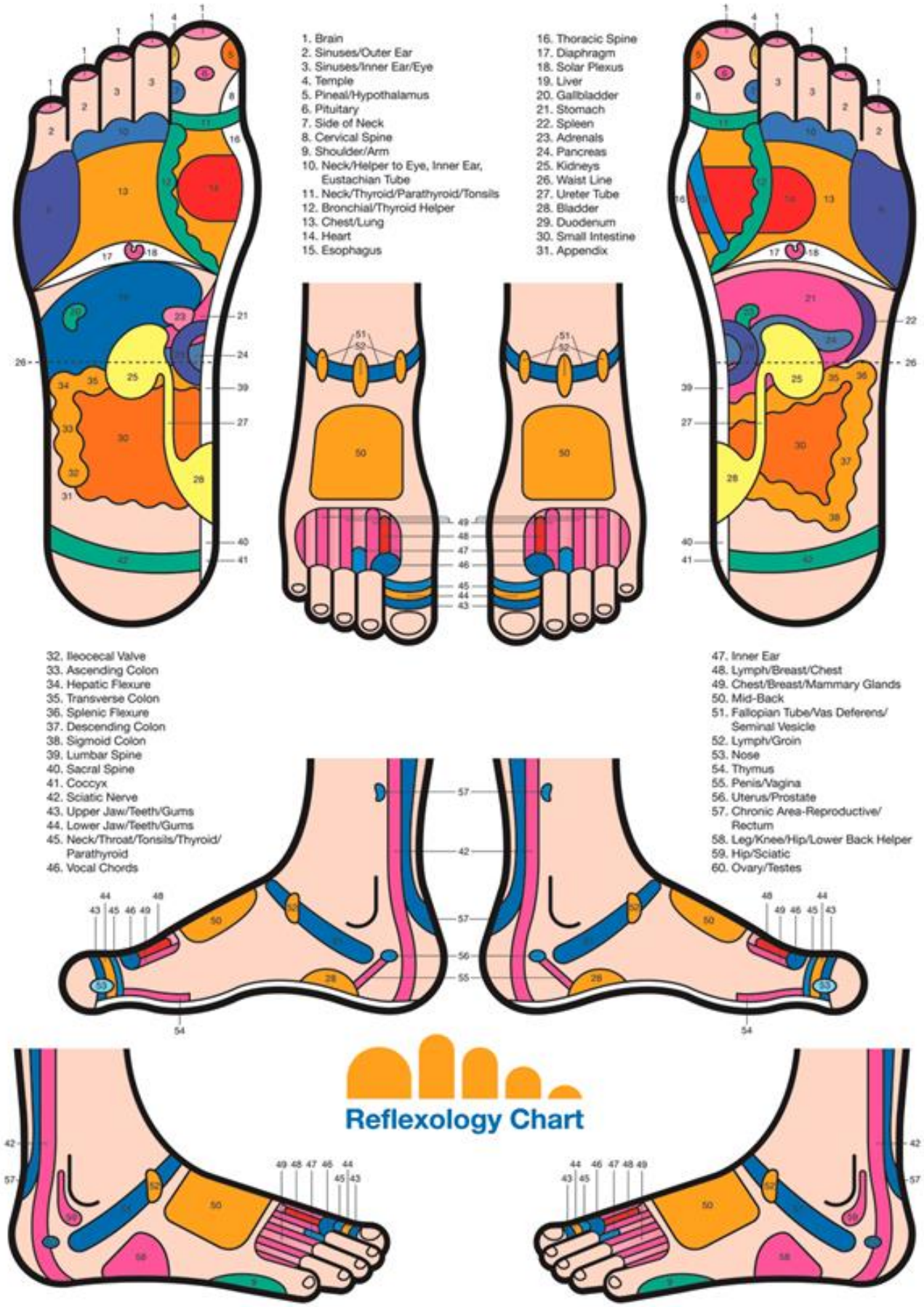
Ask them to contact you in a few days time to let you know how they are feeling and any comments they might have. This makes the receiver feel cared for and maintains contact with them.

Some useful Thai phrases

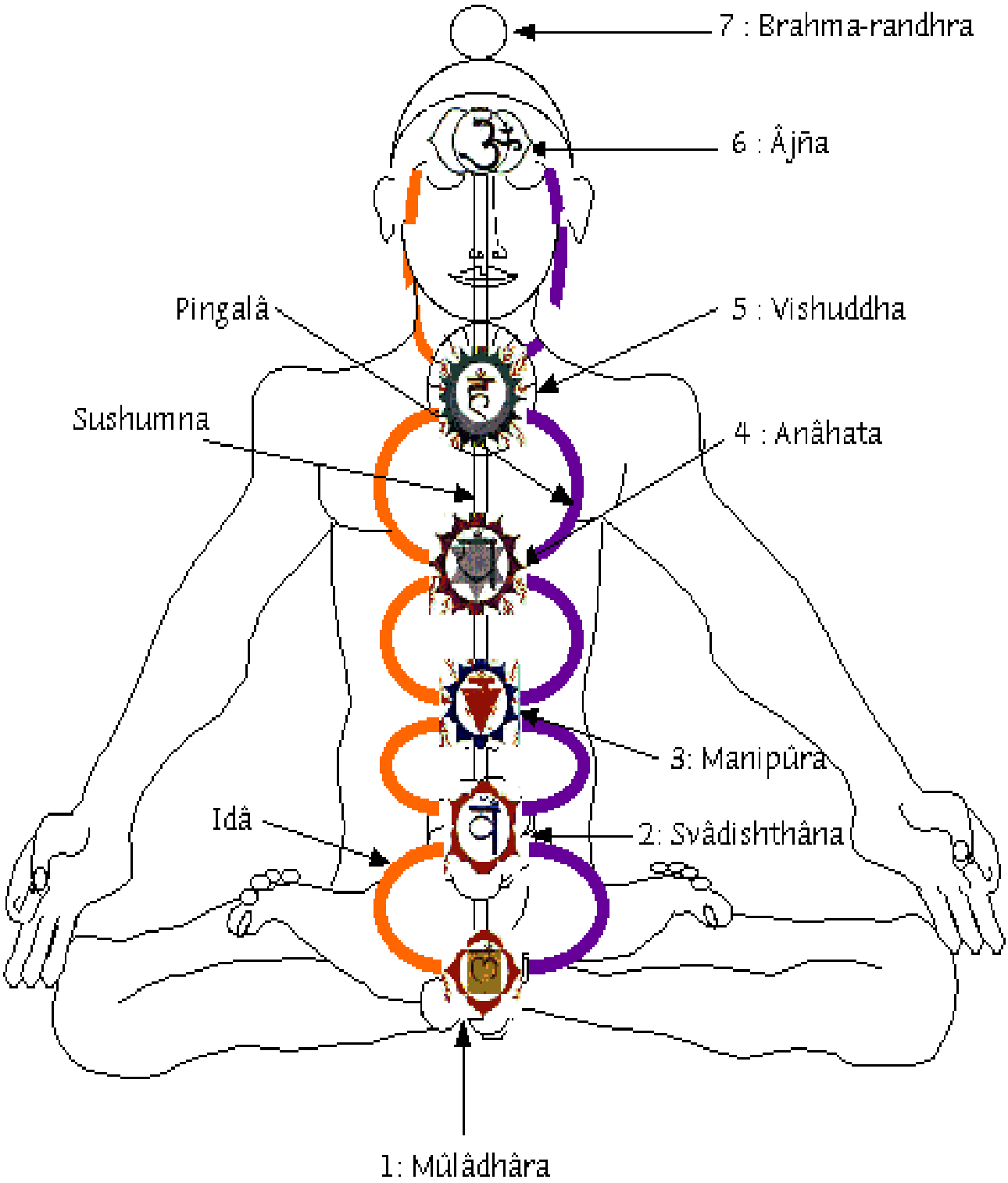
Hello -
Sàwàdee kâ - Female
Sàwàdee kráp - Male

Thank you -
Kòp kun kâ - Female
Kòp kun kráp - Male

Reflexology Foot Points



Chakras of the Body



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Thai Massage Case History Forms

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Thai Yoga Massage: Case Studies

It is important to show that you meet the criteria which are demanded by VTCT. Your case history consultation form which has been included below meets many of these requirements. Students are therefore requested to use this form and modify this to suit upon qualification.

Total Number of Case Studies

5 clients to be treated 2 times each for a total of 10 treatments.

Range

You must make sure that you complete **all the range of requirements** as indicated on the case history form.

For example, you must demonstrate that you have done treatments which have the following effects:

- Relaxing
- Stimulating
- Stress relief
- Reduction of muscle fatigue

Note: some treatments can have more than one effect.

VTCT Treatment Plan *Thai Massage* *First treatment*

Therapists Name: _____ **DATE:** _____

Client Name		**Gender**	**Male**		**Female**		**Treatment No.**	

Contact Details	**Address**	**Tel**	**Email**	**GP Details**
		Mobile: **Home:** **Office:**		

CLIENT

New Client		**Repeat Client**	

CONSULTATION

Questioning		**Manual**		**Visual**		**Reference to Client Records**	

CHECK ENVIRONMENT

Lighting		**Heating**		**Ventilation**		**General Comfort**		**Hygiene**	
								Noise / Music	

TREATMENT OBJECTIVES & CLIENT EXPECTATIONS

Relaxing		**Stimulating**		**Stress relief**		**Reduction of muscle fatigue**	

LIFESTYLE

Occupation	
General Health	
Medication	
Operations Accidents	
Illnesses	
Diet	
Active Hobbies	

Anything known preventing Thai massage	

THAI MASSAGE TECHNIQUES USED (minimum of 8 techniques per treatment)

Palm Press		**Elbow Press**		**Knee press**		**Inverted Position**	
Thumb Press		**Thai Fist**		**Foot Press**		**Sitting Position**	
Finger Press/ Circles		**Thai Prayer Chop**		**Gentle Rocking**		**Deep Breathing**	
Forearm Roll		**Heel Press**		**Yoga Stretches**			

AREAS TREATED

Full body		**Abdomen**	
Head / Scalp		**Legs/feet/toes**	
Neck		**Back**	
Shoulders		**Marma points**	
Arms/hand/fingers		**Sen lines**	

OUTCOMES

Uplifting		**Relaxation**		**Stress Relief**		**Effective Treatment**		**Non- Effective Treatment**	

AFTERCARE ADVICE

Relaxation	
Posture	
Healthy eating	
Meditation	
Healing Crisis	

Treatment continuation form *Thai Massage* *Second Treatment*

Client Name		Treatment No	

How were you are last treatment?	
Any changes to medical history?	

THAI MASSAGE TECHNIQUES USED (minimum of 8 techniques per treatment)

Palm Press		Elbow Press		Knee press		Inverted Position	
Thumb Press		Thai Fist		Foot Press		Sitting Position	
Finger Press/ Circles		Thai Prayer Chop		Gentle Rocking		Deep Breathing	
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OUTCOMES

Uplifting		Relaxation		Stress Relief		Effective Treatment		Non- Effective Treatment	

AFTERCARE ADVICE

Relaxation	
Posture	
Healthy eating	
Meditation	
Healing Crisis	

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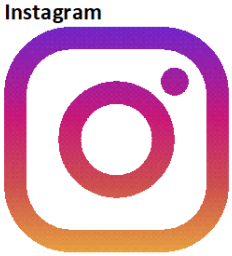

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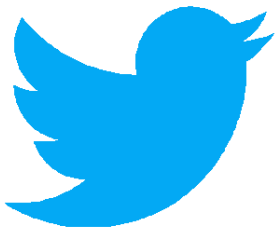

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