

The effectiveness of traditional Malay massage: A narrative review

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ABSTRACT

The traditional Malay massage (TMM), also known locally as *urut Melayu*, is one of the fields of traditional and complementary medicine. The practices and understanding are originally related to Malay culture in selected hospitals under the Ministry of Health since 2007. This study is to review the available evidence on the effectiveness of TMM as an alternative therapeutic approach to various conditions. An online electronic search in databases (Ovid™, Scopus, EMBASE and PubMed) was performed using keywords such as Malay massage and *urut Melayu*. Documents including case studies, case reports, and research studies were examined and analyzed. Two case studies and one qualitative research study about TMM for chronic diseases were explored. It was reported that the majority of those having chronic diseases sought TMM as an alternative treatment to improve mobility and quality of life. The second case study explored the effectiveness of TMM for a postpartum stroke patient, and there was improvement of physical function, mobility and optimizing the activity of daily living for this patient. The third article provided treatment-seeking behavior of poststroke patients and their TMM practitioners. From their interviews with 17 volunteers, they reported that Malay massage is very helpful for their body conditions after stroke due to high blood pressure and postdelivery complications. The patients revealed that TMM has provided them positive, beneficial effects. The review indicated that TMM could serve as an alternative treatment for those having chronic diseases, postpartum stroke and poststroke conditions. Therefore, the current review highlights the role TMM has in view of positive, beneficial effects to improve and optimize mobility, physical function, activity, daily living and quality of life.


Key words: Chronic disease, Malaysia, physiotherapy, stroke, *urut Melayu*

INTRODUCTION

Malaysia is one of the Asian countries that have a variety of ethnic groups and cultures that provide their own traditional therapeutics for health care. Most of them recommend massage as a traditional treatment and have their own techniques depending on the ethnic group’s beliefs such as Malay massage,

Indian massage or Siam massage. In addition, Thai massage also has been recognized as a traditional therapeutic treatment and widely used even in Malaysia.^[1] However, the majority of Malaysian people prefer Malay massage as an alternative care for therapeutic and psychological requirements.^[2]

The traditional Malay massage (TMM), also known locally as *urut Melayu*, is the practice and understanding are originally related to Malay culture.^[2] In the therapeutic aspect, massage provides pain treatment^[3] as well as involvement of musculoskeletal problems such as muscle spasm.^[4] Other than that, it also helps in psychological aspects such as providing relaxation, improving confidence levels and reducing anxiety.^[5] In Malaysia, TMM is one of the traditional

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and complementary medicine (T and CM) modalities conducted by selected hospitals under the Ministry of Health since 2007. Three government hospitals established T and CM, with the first launch at Hospital Kuala Batas in October 2007. In 2008, the Ministry of Health took the next step by setting up T and CM unit in two other hospitals, which are Hospital Putrajaya and Hospital Sultan Ismail, Johor Bahru. Then, T and CM units were also introduced to hospitals located at Hospital Sultanah Zahirah, Terengganu, Hospital Umum, Sarawak and Hospital Duchess of Kent, Sabah since December 2009.^[6] Initially, TMM under T and CM units is used mainly to address poststroke patients. Then, it is widely used for various chronic pain and postnatal care due to the high demand of health care.^[5] Even though TMM is newly recognized as a certified treatment in Malaysia, its effectiveness on various diseases remains to be seen, and a lot of information needs to be discovered about TMM. The aim of this study is to find the available evidence about the effectiveness of TMM as an alternative treatment approach.

METHODS

In this narrative review, articles including the case study, case report and research study were identified using online databases such as Ovid™, Scopus, EMBASE and PubMed. A Boolean search strategy was used to reduce the systematic error and narrow the articles search which is to discover relevant articles that focus on the main review.

The main keywords used to identify required articles are Malay massage and *urut Melayu*. The keywords “Malay AND massage” produced three articles. Furthermore, keywords “urut AND melayu” were entered and then the results came out with three articles. Afterwards, the combinations between these two results using “OR” has shown six articles found. There are three duplicate articles that need to be removed. The end result, only three articles, has filled the criteria of this review.

During the article search, additional limitations are performed to ensure availability and specificity of the articles. The limitation includes human as subjects in the research performed. Other than that, the articles must be published in English and the publication's year up to 2009. Finally, the publications were included when they were available in full-text article with an abstract. As mentioned before, three articles had met these inclusion criteria which are of two case studies and one qualitative research.

RESULTS

Traditional Malay massage for chronic diseases

A case study done by Othman *et al.* showed the prevalence of Malay patients seeking TMM for their related diseases. The chronic diseases involved the hypertension, diabetes mellitus, surgical and others. Osteo-related disease as the highest patient's percentage (71.3%) who seeks TMM in a medical center, followed by back pain (70.5%), insomnia (13.1%), thyroid gland dysfunction (5.4%) and other medical conditions (10.0%). All patients were given TMM with different techniques comprising spine alignment, point massage and cupping. Other than that, some patients needed combination techniques depending on their conditions. As usual, before practitioners started the treatment, they recited specific healing Al-Quran verses as well as provided a psychological approach.

After five visits, only 60 patients still carried on TMM sessions, and six patients had completed them with positive outcomes. None of those leaving the treatment session reported negative results. More than half didn't report any results since their first visit. Focus on pain observation using 1–4 Likert scale, only 35.4% showed slightly reduced in pain intensity (pain score 1) and 7.9% stated no pain reduction (pain score 0) after five visits. The rest of them (56.7%) still didn't show their pain score progression since their first visit. No patients claimed their pain progression in scoring 2 (reduce more pain), or 3 (reduce all pain) after five visits.

Traditional Malay massage for postpartum stroke condition

One study done by Fadzil *et al.* was used *urut Melayu* or TMM for postpartum stroke patients.^[7] This case report presented a 32-year-old woman with a prenatal condition admitted to the hospital on 26 June 2008 due to contraction pain. She went through cesarean section on the lower part caused by fetal distress. Then, she experienced postpartum hemorrhage after delivery causing her uterine muscles to fail to contract normally. The subtotal hysterectomy was done and provided ventilation after operation on the next day. On the same day, she got a dense stroke, which affected the right side of her body due to hypoxia ischemic encephalopathy.

After she had been discharged on 13 August 2008 with tracheostomy *in situ*, the T and CM unit advised her to do *urut Melayu* on the next day. The first

session of *urut Melayu* focused on right lower and upper limb and lasted 45 min. At this point, she was unable to do any daily activities by herself including bathing, eating, dressing and toileting. In addition, she also was problematic on a psychological aspect as she was always crying and showed depression and unhappiness about her condition.

After 3 months she received *urut Melayu*, which was the final session. She was able to walk using a walking frame by herself and could stand within 1–2 min unsupported. Her right hand also can do writing more clearly but slowly. Furthermore, her slurred speech is reduced even sometimes followed by slight stuttering. The best improvement is that her daily activities are going well without any help from caregivers. Psychologically, she has improved her sleep patterns and gained body weight. Therefore, she got more self-confidence and wished she could be able to work again.

For the next 3 months, she got a job as an educational technologist or instructional designer at a private university. Hence, she doesn't have a problem doing her work tasks including typing on a computer because of her improvement in fine motor skills. In the mobility, she had improved in walking style with minimal assistance using a walker. Other than that, her speech also showed more progression in tone variation as well as word intonation. However, she decided to maintain her *urut Melayu* session at T and CM unit, but infrequently visits.

Traditional Malay massage for poststroke condition

A qualitative study by Anuar *et al.* used *urut Melayu* for poststroke patients.^[8] There are 17 patients who seek this intervention with ages between 28 and 81 years old. The patients who have poststroke condition were interviewed on their willingness to seek *urut Melayu* and their experiences after treatment. The final results are categorized in four sections including history of poststroke patient, characteristics of *urut Melayu*, patient's assessment of *urut Melayu* and poststroke treatment.

The poststroke patients who came to T and CM units are varied in their time onset of being attacked and their causes such as hypertension, postdelivery stroke, motor vehicle accident and memory loss. In addition, they had difficulty in gripping and lifting objects due to lack of sensation on hands and legs.

The *urut Melayu* was performed by two practitioners, one male and one female. This treatment is applied

on the whole body starting from the feet upward, approximately more than 1 h/patient. They use coconut oil or other medicated oil during treatment for easiness to do massage. Furthermore, before starting this treatment, practitioners must recite the Al-Quran verses to avoid the patient's pain shift to them. According to the practitioners, they suggested performing *urut Melayu* for three conservative days followed by once a week later, but they could do more regularly rather than 2–3 week's interval due to the number of practitioners increasing consistently.

All patients stated that their bodies felt more relaxed after *urut Melayu* and claimed to seek this treatment frequently. However, the majority showed the improvement on mobility as they can do more than before. According to the patient interviews, they also continue other treatments such as exercise at the physiotherapy department. They stated that these two interventions are interlinked and essential for rapid recovery. Other than that, some patients were going for acupuncture sessions but argued that *urut Melayu* is much better than acupuncture and were willing to stay with *urut Melayu*.

DISCUSSION

This review revealed the effectiveness the TMM or *urut Melayu* as a CM on different conditions such as poststroke, postpartum stroke and any chronic diseases. TMM has its style in treating on patients. It is involved in reciting selected Al-Quran verses as a protection before the practitioner starts the treatment to avoid any evil spirit from the patient to transfer to the practitioner.^[7] Additionally, it is also protecting practitioners from patient pain and any sickness moving to them during TMM.^[8]

All patients who participated showed improvement in their mobility, activity, and daily living as well as quality of life depending on their conditions and duration to seek TMM. According to Fadzil *et al.*, patients could obtain positive improvement when they choose *urut Melayu* as an alternative intervention during early onset of stroke and keep repeating this treatment on the next visits.^[7] Another study also supporting this study recommended early treatment to help patients get positive results.^[9] This is because the longer duration to seek initial treatments can cause patients to experience other problems such as muscle stiffness and joint contracture.^[10]

However, TMM can play a role as a psychological approach during treatment. This review concluded

that patients had gained their self-esteem^[11,12] because of dual communication perspective. Good communication between practitioner and patient is important in making effectiveness during and after treatment.^[13] One of the patient-centered models is communication. Patients have high expectations for their health physicians, which is to be friendly and approachable, explain how symptoms influence their activities, take notes on their complaints and give details about treatment.^[14] The full intention that health care providers showed to their patients can lead to high consistency of patient's visit to seek treatment. Therefore, patients would give full trust to their health care practitioners to manage the best treatment so that they can continue activities and daily living as usual.^[15]

In the view of physiological effect, the relation between touch and pain could be linked to each other. The pressure applied by using fingers and hands can reduce the pain intensity.^[16] The pain gate theory is one of the mechanisms of massage that comprises the relationship between touch and pain. Touch can render the pressure, which plays a role as a blocker in pain transmission. This theory involved two main fibers: A-delta fiber acts as a faster transmission in terms of pressure and C-fiber performs as slower conduction on pain impulses.^[4] When pressure is applied on the affected area, the A-delta fibers will be activated and transmitted faster than pain impulse. Thus, the gate will be closed, and pain cannot reach spinal cord level.^[17,18] Finally, patients reported reduced pain intensity^[19] and were more relaxing during the massage.^[20]

CONCLUSIONS

Literature has revealed that TMM could serve as an alternative treatment for those having chronic diseases, postpartum stroke and poststroke conditions. The outcomes are different on patients depending on their conditions, when they start the early treatment and the consistency of seeking treatment. Therefore, the current review highlights that TMM has a role in view of positive, beneficial effects to improve and optimize mobility, physical function, activity daily living and quality of life. However, more studies are required to explore its short-term and long-term effectiveness on various diseases. A well-designed and large randomized controlled trial that evaluates the impact of TMM or *urut Melayu* on selected recurrent disorders to determine the effectiveness within short-term and

long-term effects could provide much-needed clinical evidence.

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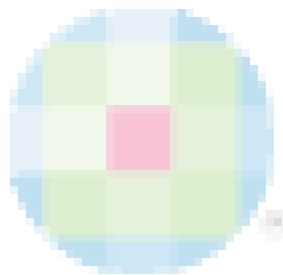
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