



## Myofascial Dry Needling

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### Preamble

The issues surrounding the application of myofascial dry needling (MDN) in the massage treatment are numerous. They include legal, medical, therapist training and protection of the consumer. Massage & Myotherapy Australia (Association) is of the opinion that MDN is outside the general scope of remedial massage.

The term 'dry needling' is not a protected term under section 80(2) of the Health Professions Registration Act 2005<sup>i</sup> (HPRA). Provided the practitioner is not deemed to be holding out to practise acupuncture then the practitioner is exempt from both the punitive and regulatory provisions of the HPRA.

The Association has not prescribed curriculum for the practice of MDN.

The unit of competency "Provide Myofascial Dry Needling" was renamed to 'unit VU21879 but the content was unchanged, in the review of the Advanced Diploma of Myotherapy implemented from January 2017. The unit is designed to provide the skills and knowledge to enable the participant to administer MDN treatment. The nominal delivery hours are 60 hours and the student must demonstrate competency on a minimum of 10 clients. Further, the student must demonstrate needling on various parts of the body.

MDN can be provided by trained practitioners with a minimum qualification of the Diploma of Remedial Massage under the adoption of appropriate safety precautions and legal frameworks which may be appropriate in the treatment of some musculoskeletal conditions.

To avoid ethical complaints in relation to MDN, the Association believes the client should have available to them adequate information about risk of practice and the opportunity to provide informed consent<sup>ii</sup> prior to the treatment.

### Aim

This position statement is to serve as a guideline for therapists who perform MDN, a platform from where the National Ethics Committee can make an informed determination in relation to any complaints and for the National Education Committee to determine appropriate levels of training.

This position statement should be read in conjunction with the Association Code of Ethics and Standards of Practice<sup>iii</sup>, the practitioners' level of education and the practitioners own scope of practice.

The Association Board of Directors serves to protect both the membership and the public by adopting this position statement which is resolutely linked to the overall policy of the Code of Ethics and the Standards of Practice<sup>iv</sup>.

## Process

Every remedial therapist has the right to make the decision as to the appropriateness of treatment in consultation with the client. However, decision making and treatment protocols should be consistent in context with the pathology and within the scope of practice of the practitioner.

Remedial therapists should never, under any circumstances, proceed with treatment on any area of the body without first obtaining written "informed consent"<sup>iv</sup> and providing the client with information on how the treatment will be performed and associated risk.

In particular MDN should not be considered without assessment of soft tissue dysfunction and the initial standard use of digital ischemic pressure. This ensures that non-invasive strategies have been sought prior to the therapist/client decision to proceed with MDN and the inherent risks of skin penetration.

Remedial therapists are to consider the following carefully prior to providing MDN treatment;

- Proportionality: The benefit must outweigh the burden of treatment
- Nonmaleficence: The therapist must do no harm and must prevent harm from occurring
- Beneficence: The treatment must contribute to the client's wellbeing

The Associations Position Statement advises that prior to training in the application of MDN, therapists should hold a Diploma of Remedial Massage or later equivalents and have an excellent knowledge of manual trigger point therapy and human anatomy and physiology.

Further, the Association endorses MDN courses who meet the benchmark criteria as set out in the unit of competency titled "Provide Myofascial Dry Needling" (unit VU21418) with delivery of 60 nominal hours and with competency demonstrated on a minimum of 10 clients at the date of adoption of this document.

To ensure ongoing competency in the use of MDN, therapists should complete 20 hours of MDN education every 3 years.

Therapists should seek to train with education providers that cover infection control, Work Health & Safety (WHS) issues, and Federal, State and Local Government laws.

For practice guidelines, indications, contraindications and scope refer to the Associations Practice Guidelines - Myofascial Dry Needling<sup>vi</sup> on treatment and education.

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<sup>i</sup> Health Professions Registration Act 2005 - Act Number 97. Retrieved 14th February 2014 from <http://www.legislation.vic.gov.au/>

<sup>ii</sup> Massage & Myotherapy Australia Position Statement - Informed Consent

<sup>iii</sup> Code of Ethics & Standards of Practice

<sup>iv</sup> ibid

<sup>v</sup> ibid

<sup>vi</sup> Massage & Myotherapy Australia Practice Guidelines - Myofascial Dry Needling