



77a Myofascial and Fascia Techniques (Part II) : Body Mechanics for Therapist Health



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Class Reminders

Early Warning:

- 85a Orthopedic Massage: Outside Massages – Begin these now!

Quizzes:

- 78a Kinesiology Quiz (see syllabus for all the muscles covered) – 50 questions in 40 minutes

Spot Checks:

- 78b Orthopedic Massage: Spot Check – Low Back Pain
- 81b Orthopedic Massage: Spot Check – Rotator Cuff and Carpal Tunnel

Assignments:

- 85a Orthopedic Massage: Outside Massages (2 due at the start of class)

Preparation for upcoming classes:

- 77b Orthopedic Massage: Technique Demo and Practice – Low Back Pain
- Packet J: 69-76 and 77-78
- 78a Kinesiology Quiz
- 78b Orthopedic Massage: Spot Check – Low Back Pain
- 79a Orthopedic Massage: Introduction – Rotator Cuff and Carpal Tunnel
-Packet J: 79-84



Classroom Rules

Punctuality - everybody's time is precious

- Be ready to learn at the start of class; we'll have you out of here on time
- Tardiness: arriving late, returning late after breaks, leaving during class, leaving early

The following are not allowed:

- Bare feet
- Side talking
- Lying down
- Inappropriate clothing
- Food or drink except water
- Phones that are visible in the classroom, bathrooms, or internship

You will receive one verbal warning, then you'll have to leave the room.

Classroom Rules

Cell Phone – Turn it off!



And put it away!



77a Myofascial and Fascia Techniques (Part II): Body Mechanics for Therapist Health Outline

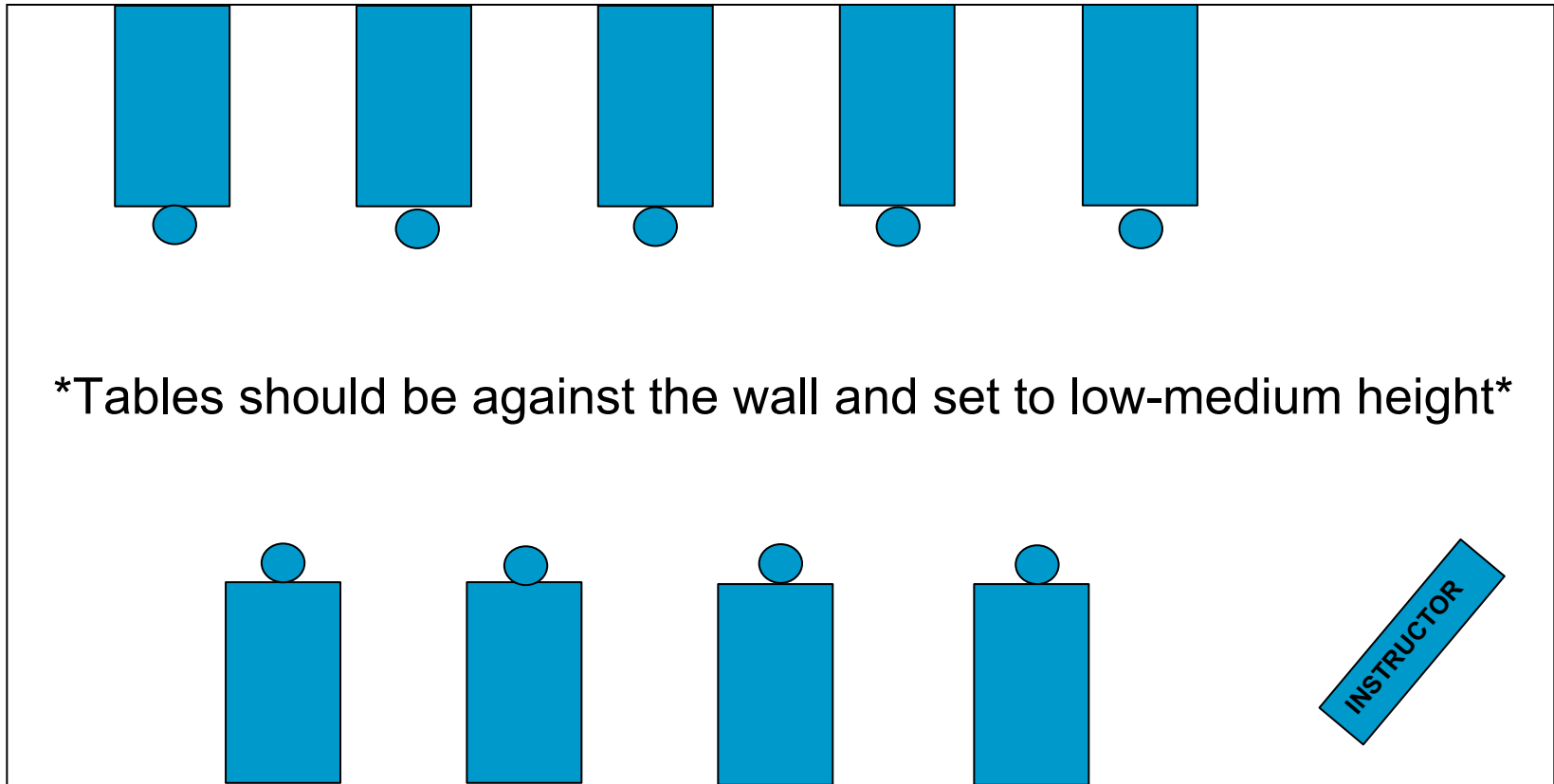
5 minutes	Attendance, Breath of Arrival, and Reminders
55 minutes	Lecture: Body Mechanics
1 hour Total	



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77a MFR:

Body Mechanics for Therapist Health Room Setup





QI GONG FOR GROUNDING

Please give yourself room to move freely.

All personal belongings should be stowed under the tables

Myofascial Release Review of Previous Techniques

- **Absolutely NO lubricant is used in this technique**
 - The client's skin must also be free of any lotions prior to receiving work
 - A small cup of water or a spray bottle may be used to apply to the practitioner's working tool in order to give some extra traction



Myofascial Release Review of Previous Techniques

The direction of force is OBLIQUE

- Only by working at an angle to the tissues can we attain the desired fascial stretch.
- Visualize working through the body, not into it or across it





Myofascial Release Review of Previous Techniques

- **Chest 1 – kneeling or sitting at the head of the table**
 - Fingertips or soft fist
 - Tissue is stretched inferiorly from the clavicle
- **Chest 2 – standing at the opposite shoulder, facing up-table**
 - Palms
 - Tissue is stretched inferiorly from clavicle & laterally from the sternum
- **Upper Trapezius – standing at the head of the table**
 - Knuckles (MCP joint)
 - Traction of the neck and lateral flexion to the opposite side (optional if room is needed)
 - Tissue is moved posteriorly from the clavicle toward the table
- **Lateral Neck – standing or sitting at the head of the table**
 - Fingertips or soft fist
 - Traction of the neck and rotation to the opposite side
 - Tissue is stretched inferiorly from the occiput toward ribs
- **Suboccipitals**
 - Middle phalanges/knuckles of the 2nd and 3rd digits
 - Head rotated to the opposite side
 - Tissue is stretched medially from the mastoid process toward the spinous processes



Body Mechanic Basics which apply for every moment in MFR

- Ground and relax your body
- Maintain alignment of relaxed joints
- Use gravity to apply controlled body weight into the client
- Use an oblique angle to “hook in” to the fascia and stretch it
- Move as one body unit, as in yoga. Lengthen your body as you work.
- Work in short excursions – this work is meant to be very slow and to be done without continuous “flow” as in Swedish Massage
- When desired excursion is reached, disengage completely from contact to allow the work to take effect
- If it hurts the client, reduce force and distance or choose a broader tool

***ALL PRINCIPLES MUST BE APPLIED SIMULTANEOUSLY TO BE EFFECTIVE
AND TO PROMOTE CHANGE IN THE CLIENT***



Prepare

- Each principle of body mechanics must be used simultaneously in order to attain maximum efficacy and safety for both practitioner and client
 - If one principle is compromised, they're all compromised!
- Engagement of one's whole presence is essential – without presence of mind, body, and spirit, boundaries and safety cannot be maintained.
 - This includes awareness of your own body!
- Feeling, sensing, & palpating are far more important than thinking. Listen with your hands.
- Stay relaxed in your body and hands
- Align and stack your joints as well as your entire body from head to toe
- Make use of your oblique angles to stretch the tissues
- Lean your body weight into the tissues by using power from the legs
- Disengage fully for the benefit of both client and therapist at the end of each movement
- SLOW DOWN

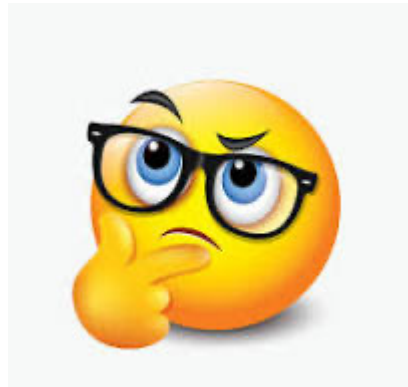


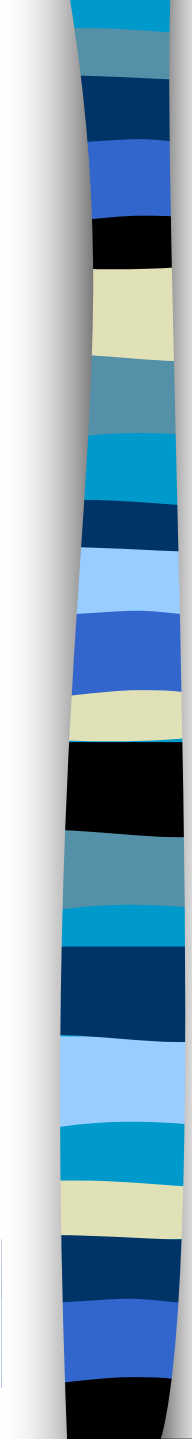
Learning MFR is kinesthetic,
not cognitive.

Don't think.

Feel.

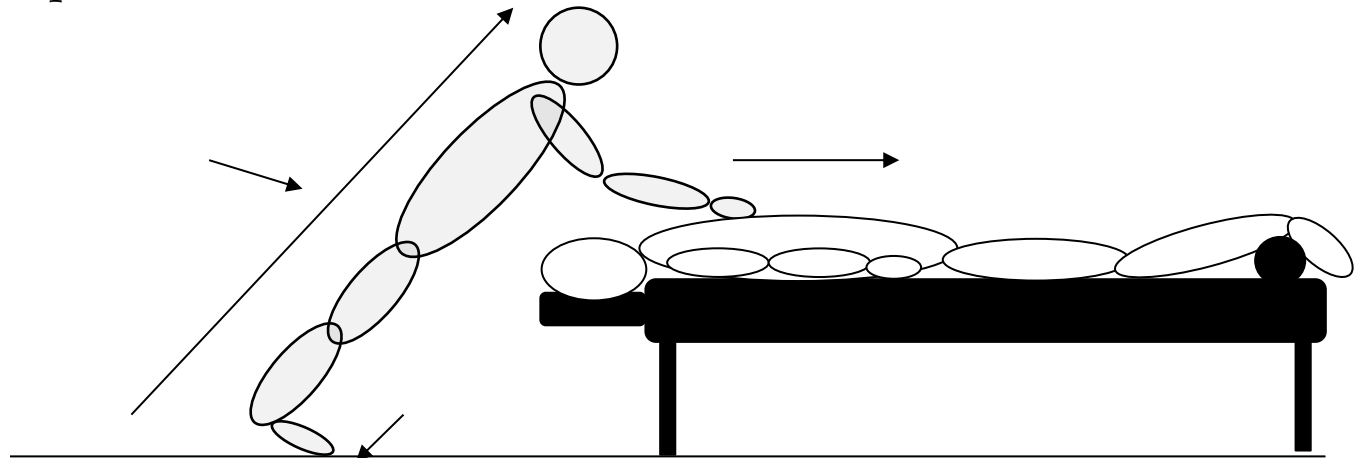
So, how do we adapt the technique we've already learned for larger areas of the body?



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- All you need are a few basic “moves,” though I may show you more as alternatives for your comfort
 - You can do the same “move” repeatedly
 - If you feel good doing the work, chances are the client will feel good
 - Explain to the client, if they are unfamiliar, that they might feel a pull but that the intensity will lessen as the session goes on
 - Take fascia away from the joints, don’t bunch into joints.
 - Take fascia away from areas where it is bunched up (like C7!)
 - Start with broader, lighter moves before doing more concentrated sections.
 - For hairy body parts, use shorter, slower strokes or simply hold.

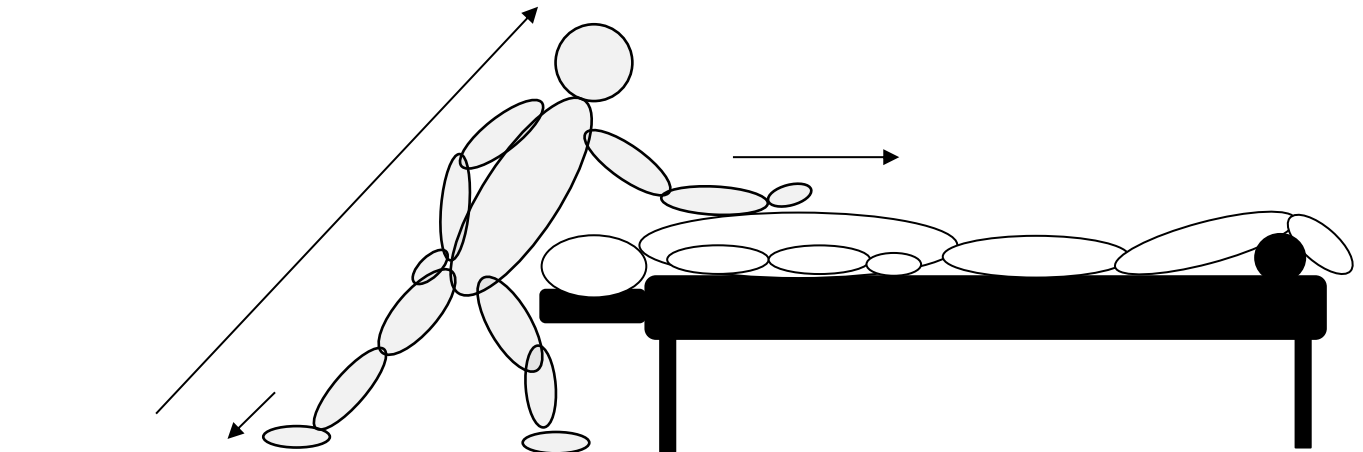
Practitioner Positioning – Front-facing

- Reach through top of head into space
- Shoulders relaxed
- Arms spanning from torso, elbows slightly flexed
- Straight plane from hand to wrist through forearm
- Pelvis squared and dropping forward in lunge
- Lifting from plantarflexion



Practitioner Positioning – Side-facing

- Top of head reaching into space, face forward, not looking at client
- Chest toward wall
- GH joint supported by axial frame
- Forearm parallel to direction of stroke
- Straight line from leg through neck and head
- Lift from plantarflexion of back leg





Step 1 – Alignment & Positioning

- Decide which approach (Front or side-facing) is appropriate for the intended work
- Make deliberate contact
- Palpate & assess the fascia
- Hook in
- Get into position
- Check in with each of your joints, from head to hip to foot and from shoulder to fingers



Step 4 – Dropping In

- Once in position, let go of anything holding your body back – tap into gravity
- If in front-facing, this means literally dropping your pelvis forward while envisioning your lumbar spine pulling back, engaging your core
- If you are in a lunge, you may bring your front foot back to join your back foot if you feel stable enough
- Your weight should be completely on your back foot



Step 5 – The Lift Forward

- Plantarflex your back foot (or feet) into the ground
- Your body should move as one unit, gracefully forward on a diagonal



Step 6 – The Journey

- Envision the fascia under your hands or arm stretching as a fabric
- Remember to relax your neck, your arms, your breath.
- Continue to engage your core muscles (iliopsoas) as you allow gravity to move your body through your client's fascial stretch
- Listen with your hands and ears for release or working signs (breath change, sigh, a twitch) and let it inform you. Is what you're doing comfortable for the client?
- Check in with your client.



Step 7 – Stop the Train

- When you feel you have reached the end of your excursion, shift your body weight onto your front leg.
- If you have been using both legs in a plank position, bring one leg forward and shift your weight onto this leg
- Disengage from your client once your weight is no longer dependent on them



Step 8 – Unwind & Check-In with your own body

- Take this opportunity to truly move your body while disengaged
- Check in with your neck, arms, back, legs and notice any areas of tension



Step 9 – Palpate for Change

- Reassess the client's fascia for changes



Step 10 – Repeat as Necessary



77a Myofascial Release:

Body Mechanics for Therapist Health