Myofascial Release Technique

For Late Effects of Polio

Origins of Myofascial Release

- Conceptualised by osteopath Andrew Taylor Still in the early 20th century
- Term coined by osteopath Robert Ward in 1960's. Ward studied with Ida Rolf
- Greatly developed by John Barnes, considered the grandfather of MFR
- Fascial network finally recognised by conventional medicine in 2018 as the interstitium.

Conditions helped by MFR

- Back strain and general chronic or acute back pain
- Lumbar, pelvic and thoracic pain
- Chronic neck pain
- Dizziness, vertigo
- Carpel tunnel syndrome
- Fibromyalgia
- Headaches
- Myofascial pain dysfunction
- Plantar fasciitis
- TMJ dysfunction
- Whiplash
- Chronic pain syndrome
- Post-polio symptoms

Common conditions of LEoP

- Fatigue
- Muscle pain and weakness
- Muscle cramps or “crawling”
- Myofascial pain in upper & lower back
- Joint pain
- Wrist pain, weakness, numbness
- Cold intolerance
- Fibromyalgia

Symptoms of Fibromyalgia

- Tenderness in 18 specific points
- Fatigue
- TMJ syndrome
- Skin sensitivity
- Chronic headaches
- Morning stiffness
- Dizziness or impaired coordination
- Sleep disorder
- Tiredness/muscle pain after exercise
- Numbness and tingling
- Irritable bowel syndrome

What is fascia?

- Pronounced FAH-shah or FAY-shah
- A continuous web of connective tissue
- Surrounds all important systems of the body
- 3 types or layers:
  - Superficial: below the skin
  - Deep: surrounds muscles, bones, nerves
  - Visceral: surrounds organs
- Extends to the cellular level, surrounding muscle cells

Functions of fascia

- Absorbs shock and physical stress
- Force is transferred to all parts of the fascial network
- Gives the body its shape
- Supports posture
- Monitors inflammation
- Part of immune response, fights infection
- Contains “emotional memory”

Components of fascia

- Collagen for strength
- Elastin for flexibility
- Ground substance, a gel-like medium in which fluid exchanges occur, and which provides cushioning

Causes of adhesions in fascia

- Physical blow
- Cuts, wounds, surgery
- Postural inefficiency/imbalance
- Inflammation
- Emotional trauma

Effects of adhesions in fascia

- Poor cellular efficiency
- Fascia shrinks when inflamed
- Slow to heal - poor blood supply
- Focus of pain – rich nerve supply
- Like a Chinese finger trap – entrapment
- Creates musculoskeletal misalignment
- Causes pain
- Predisposition to further injury

DVD

Strolling Under the Skin

- Dr Jean-Claude Guimberteau 2005

How MFR works

- Gentle traction stretching 3-5 minutes
- Practitioner waits for unwinding of fascia
- Increases the glide within the fascia
- Impacts the whole web of fascia
- Fascia has memory, returns to balance

Types of MFR stretches

- Cross hands stretch (multiple directions)
- Fingertips stretch
- Gentle compression to a segment
- Gentle decompression to a segment
- Unwinding techniques

Resources

- Dr Jean-Claude Guimberteau
  Strolling Under the Skin DVD (on YouTube)
- John Barnes
  www.myofascialrelease.com
- Terra Rosa e-
  zinewww.terrarosa.com.au/newsletter/