



The Final Piece of the Puzzle – Fascia

By Victoria L Magown

We, as Myofascial Trigger Point Therapists, have been treating Fascia for years without knowing it. But now, we KNOW we are treating Fascia. One's intent makes a big difference when releasing soft tissue.

Previously, our focus was inactivating Trigger Points, lengthening/stretching the muscle to its full normal length. Then we taught the patient/client how to rehabilitate the painful and/or injured muscles with a Home Exercise Program to do frequently throughout the day.

Now, we have put 'Fascia' into 'Myo' (muscle) 'Fascial' (Fascia).

Fascia is the new kid on the block. Research in the field of Myofascial Pain and Dysfunction has been moving forward at a fast and furious pace. Previously thought to only hold your muscles in place and give form to the body; Fascia has become the Champion of Myofascial Pain.

Of course, Rolwing or Structural Integration, developed by Ida Rolf, PhD, has been treating Fascia for as long as Myofascial Trigger Point Therapy, developed by Janet G Travell, MD and David G Simons, MD, has been treating Trigger Points.

Now, we are treating both, with our knowledge and intent specifically releasing each area. The first layer in soft tissue directly beneath the skin is the Superficial Fascia with the muscles under the Fascia. If this area has been injured and feels pain (yes, Fascia actually has more proprioceptors than muscle and feels pain), then the Fascia will shorten and contract forming a Fascia Point (knot).

Since Fascia is stronger than muscle, if the Fascia remains shortened, the muscle beneath it will never fully be able to stretch and return to its full normal length, pain free. We need to release the Fascia Point first before proceeding to inactivate the Trigger Point to reach a pain free state.

*Keeping Up-To-Date gave us the final piece of the puzzle – Fascia. Call Joni at 505-872-3100 and make an appointment.
www.myorehab.net*

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WE HAVE ANSWERS**

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