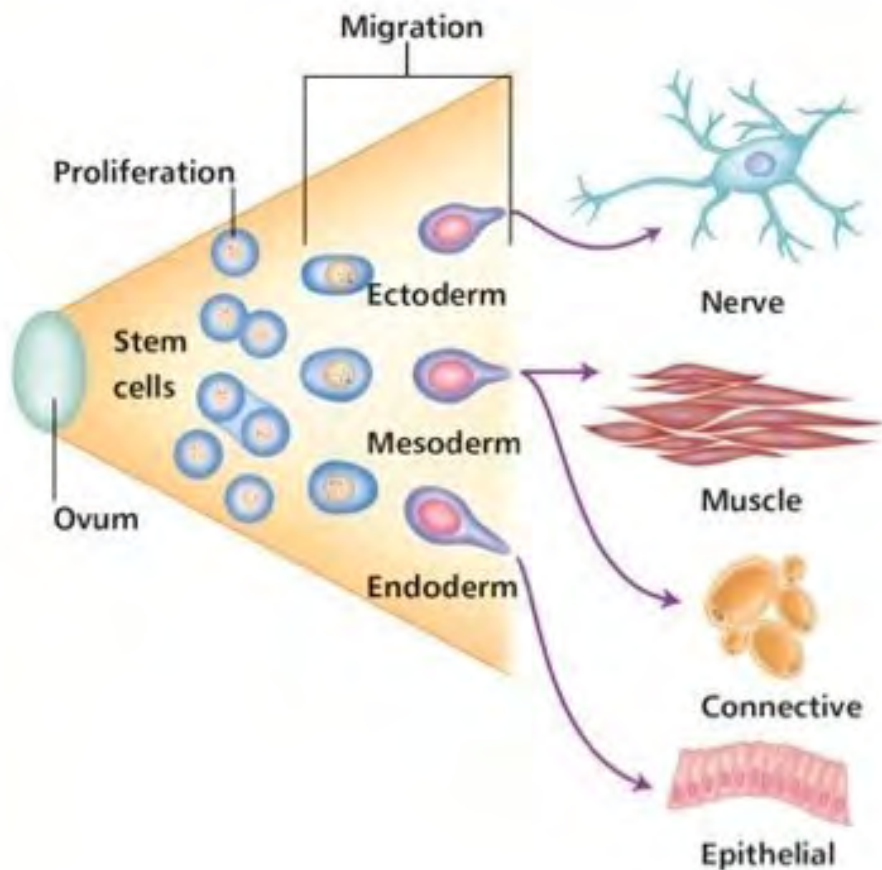


Niel Asher.

Advanced Trigger Point Techniques



Simeon Niel-Asher BSc (Ost), BPhil

Trigger Point Theory

NAT Pro Series:

FOUNDATION COURSE IN TRIGGER POINT THEORY

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Welcome

Welcome to the NAT Pro series. Here we will journey together to investigate trigger point theory and practice as it relates to musculoskeletal pain. Our courses cover many common conditions in depth, with best of evidence-based practice (EBM). They are dynamic, and we are always open to input and feedback, so please check for updates.

Myofascial Trigger Points (MTPs) are ubiquitous and myofascial pain affects as much as 85% of the population at some time in their life (Simons 1996; Fleckenstein 2010). There is evidence that myofascial trigger points may be present in babies and children (Davies 2004); they have even been demonstrated in muscle tissue after death. The impact of myofascial pain on health can be severe, as patients not only suffer from pain and loss of function, but also from impaired mood and decreased quality of life (Gerber 2013).

This foundation course is designed as a platform for you to understand what trigger points are and how they develop. Trigger points are amazing, and the story of how they were discovered and rationalized is one of legend. We come to trigger points from thousands of hours of clinical practice, and these guides are written by osteopaths, soft tissue therapists, physiotherapists, and medical doctors. Anyone who touches the body should have a thorough and deep knowledge of trigger points. We also hope to show you the hidden power and magic of trigger points and how they can be used as inputs to tap into the “healing wisdom” of the body.

Trigger point therapy is used by literally thousands of practitioners worldwide every day. The model is compelling and the results of therapy are outstanding. Since the early days, hundreds of therapists have dedicated themselves to sharing and exploring trigger point therapy and research.

Published research has improved our understanding of the microscopic world of trigger points, which is fascinating in and of itself; however, there is less focus on the macroscopic world MTPs inhabit. With the ever-increasing complexity of technology, we are able to peer ever deeper into what trigger points are made from, but the fundamental questions remain: What is the body trying to achieve? What is the purpose and function, and how do they fit into the body's sublime wisdom?

This course will help us answer those questions, but to do this we are going to look outside the box and explore “non-linear” models such as neuroplasticity and complexity theory; so let's get started.

Video Material

This course is accompanied by video footage to aid your understanding and ability to treat patients. Click on this link or copy and paste it into your browser:

<http://www.nielasher.com/pages/trigger-point-techniques>

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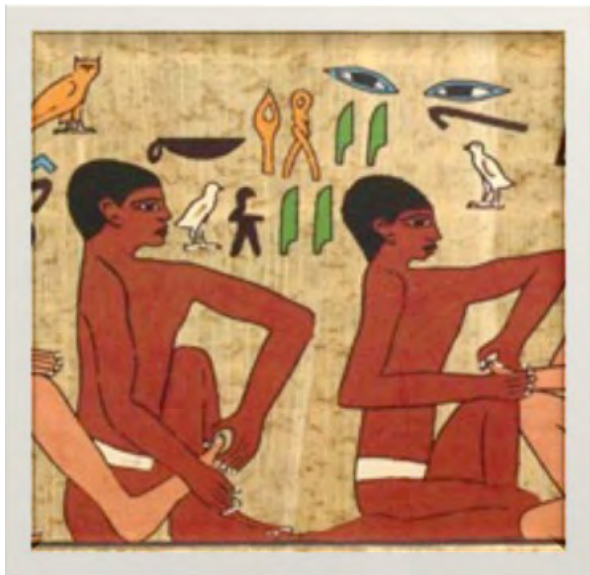
Testimonials

The History of Trigger Points

Therapeutic touch has emerged in all cultures in all ages. Massaging painful muscular spots occurred in Ancient Egypt, India, Japan, Korea, Rome, Greece, and Mesopotamia. In the West, Gowers (as “fibrositis”) and later Kellgren, Gunn, Travell and Simons all rationalized these hyperirritable spots as “trigger points.”

Touch isn’t just a human occupation – it’s primal. During his fascinating work on social grooming amongst primates, Dunbar (2010) suggests that touch triggers neurobiological mechanisms via slow unmyelinated CT afferent fibers and a neuroendocrine cascade (oxytocin and endorphins). Primates, he asserts, spend up to 21% of their waking hours grooming each other, not for reasons of hygiene but more for social bonding.

Historically, there are two pathways for exploring trigger point manifestation and treatment. One is the holistic and the other the orthodox medical.



Trigger Points in the Ancient World

The above graphic is taken from the Egyptian tomb of Pharaoh Akhmantor (2330 BC); similar images have been found from ancient India, Japan, Korea, and Thailand. Perhaps the most famous book including massage is *The Yellow Emperor* (2700 BC). This book forms the foundations of Chinese medicine. The first references to tender/trigger points in Chinese medicine were around 722-481 BC, when Shiatsu was described in order to treat “Ah Shi” or painful knots/points. The first school of massage was founded in 581 AD in China within the Office of Imperial Physicians.

In the West, Hippocrates (460 BC) wrote, “The physician must be experienced in many things, but assuredly in rubbing.” Greco-Roman medicine, including that of Hippocrates, advocates “rubbing” the body with oils to facilitate health. The great ancient physician Avicenna also advocated “pain relieving massage.”

Modern Holistic Medicine

“The fascia is the place to look for the cause of disease and the place to consult and begin the action of remedies in all diseases.” - Andrew Taylor Still, the founder of osteopathy

Andrew Taylor Still (1828-1917) was the founder of osteopathic medicine. His extensive writing often focuses on restrictions, lesions, and knots in muscles. Dr. Still realized that abnormal structures could create the same symptoms and problems that are associated with other diseases. One of his first techniques for treating his own recurrent headaches was to tie a rope between two chair legs and rest his upper neck (suboccipital muscle) on the rope.



FIRST LESSON IN OSTEOPATHY.

Orthodox Medical History

The first medical doctor to report pain from knotted muscles was British neurologist Sir William Gowers (1845-1915). He introduced the term “fibrositis” for a common but idiopathic, localized form of muscular rheumatism which he called “Lumbago,” now recognized as myofascial pain syndrome.

JAN. 16, 1904.]

LUMBAGO.

A Lecture
ON
LUMBAGO: ITS LESSONS AND
ANALOGUES.

Delivered at the National Hospital for the Paralyzed and Epileptic.

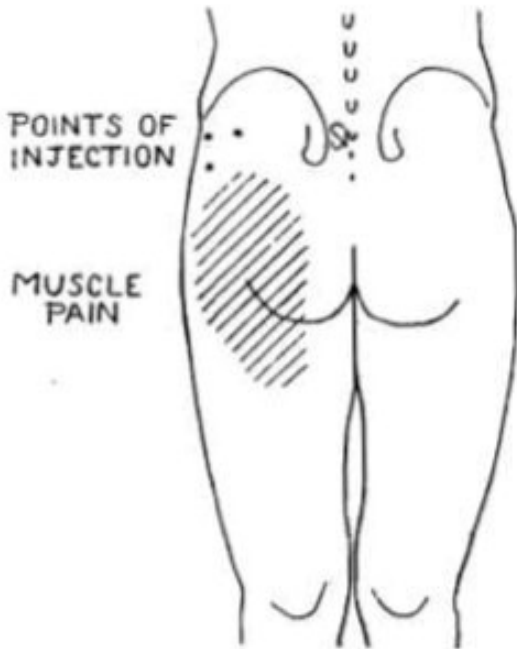
BY SIR WILLIAM R. GOWERS, M.D., F.R.S.,
 Physician to the Hospital; and Consulting Physician, University
 College Hospital.

GENTLEMEN,—There are many ways of acquiring knowledge of disease. Perhaps the most effective—although certainly

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However, it was not until Jonas Kellgren (1911-2002) came along that things really started to “get going.”

Kellgren’s seminal work on pain arising from muscles was first published in the *British Medical Journal* in 1938. He was the first to record the pain maps associated with trigger points when he injected tender/trigger spots. His findings concluded that the “Referred pain is distant from the stimulated point and may be felt in joints, teeth or even in the scrotum.” Furthermore, he found that “the pain follows spinal segmental patterns but that it does not correspond with sensory segmental patterns.”



Dr. Janet Travell 1901-1997

Dr. Janet Travell and her partner Dr. David Simons looked at the work of Kellgren in a new way. Together they pioneered work in the field of trigger points and pain medicine. Dr. Travell's work in pain relief became legendary and even reached a young man who was riddled with pain called John Kennedy (JFK). He became her most famous case study and soon after he became the President of the United States, he appointed Janet as his "Personal Physician," the first woman and one of the few civilians to hold that post.

Dr. Travell continued to explore and develop her theories and the science behind trigger points until her death in 1997, at the age of 95. Over time, her legacy has been extensively researched, expanded, and validated.



Dr. Janet Travell and JFK

Trigger Point “Hall of Fame”

Trigger point therapy is used by tens of thousands of practitioners worldwide every day. The model is compelling and the results are outstanding. Since the early days, hundreds of therapists have dedicated themselves to sharing and exploring trigger point therapy and research. The following therapists all deserve a mention in the trigger point “Hall of Fame” (please email us if you think we have left anyone out: info@nielasher.com).

Stanley Leif (1892-1963) – father of modern natural manual medicine

Hans Kraus (1905-1995) – developed Spray and Stretch techniques

Dr. Raymond Nimmo (1904-1986)

Ida Rolf (1896-1979) – “Myofascial Release,” Rolfing technique

Leon Chaitow (1937-) – worked tirelessly in the field of myofascial medicine

Sir Thomas Lewis (1881-1945)

Chan Gunn (1931-) – pioneered the use of acupuncture needles in trigger point therapy

Karel Lewit (1916-2014) – pioneered the use of acupuncture needles in trigger point therapy

Other Hall of Famers:

Ceser Frenandez-de-las-Penas, Claire Davies, Dr. T. Findley, Dr. Serge Gracovetsky, Dr. Carla Stecco, Dr. Robert Schleip, Dr. S. Mense, Jon Sharkey, Devin Starylanyl, Dr. Andrea Vleeming, Dr. David Warren,

Dr. Frank Willard, Dr. Simon Vulfsen, Dr. Ratmansky, Dr. Aaron Finestein, Dr. Jonathan Kent & Dr. M. Danoff.

Last but not least - One more name should be added to this list: Dr. Bob Gerwin. Bob is a neurologist and the Head of Pain Medicine at Johns Hopkins School of Medicine. He has kept the vision of Travell and Simons well and truly alive with his ground-breaking research and tireless efforts to promote best practices.

Every Good Story Needs a Villain

Two persistent critics of trigger point therapy and practice deserve a special mention: Dr. Quinter and Dr. Cohen from Perth, WA, Australia. By questioning the model of trigger point therapy over the last twenty years, they have, in many ways, helped to shape and redefine research studies.

All About Myofascia

What is Myofascia?

Imagine you are an orange. Your skin is (superficial) fascia embedded with hairs and receptors; the white tough pith beneath the skin is fascia; the bags that surround each segment are (deep) fascia; and, if you look really closely, the juice of the orange is held in even smaller fascial bags. We are all similar to some extent: our fascia is ubiquitous—it wraps and supports organs, bones, and tendons. Where it wraps muscles, it is known as myofascia. Fascia is a living tissue and has memory; it also helps transport and move chemical and other substances around the body. When we refer to “myofascial trigger points,” we are talking about a trigger point in a specific muscle and its fascial wrapping. Myofascia connects many of the areas of the body together, which is why it is sometimes referred to as connective tissue.

