## SET TALK

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## RAPID RELIEF!! QUICK RELEASE TECHNIQUE

Saturday morning class, FSMTA Convention, June 30

What do you do when clients come for treatment presenting with any of the following conditions:

- acute neck or back conditions that keep them from being able to lie on your table?
- the atlas / occiput relationship is so jammed that the cerebral spinal fluid cannot properly pump in and out of the cranium?
- headaches so severe that they need quick relief?
- an acute whiplash injury that is still in the stage of swelling?
- the occiput is so jammed that it would take an entire hour to free the occiput and restore free cranial motion?
- the dura is so restricted in the low back that the area of the sacrum is locked making it difficult to lie in the supine position comfortably?
- a history of sexual abuse makes it difficult to relax enough for you to touch them?
- osteoporosis that is so severe that when they lie on the table their head is 5 inches off the table?
- cervical discs that are compressing the spinal column because of the reverse curvature of the neck?
- client has a fever or virus and can't be treated with normal massage?
- the neck is swollen and inflamed and you need to work deeply to release adhesions and scar tissue from an old auto accident?
- clients arrive with a high emotional charge after a fight with a significant other?
- The cranium is totally locked and you need to restore cranial motion?

Clients will often arrive for their sessions with these challenges and other conditions that can make the application of massage techniques almost impossible or intolerable. Having a solution that can address all these conditions at the beginning of a massage session will allow you to make a significant difference in your clients' well-being.

During my first year in practice clients were coming into my sessions with these conditions. In order to be able to do myofascial restructuring work for rehabilitation of the conditions that were causing their discomfort, I needed to develop a technique that would work quickly and effectively at the beginning of their sessions to prepare them for deeper therapeutic work.

I began looking at some of the acupressure points and associated meridians and discovered a referral pattern that involved the neck, cranium and low back. Further research into specific trigger points that had pain referral zones related to the musculature of the head, neck and shoulders brought this referral pattern into greater focus. The most effective trigger points for releasing the muscles and tension in the neck and shoulder were also some of the more powerful acupressure points. It became a moot point as to whether it was an acupressure point or a trigger point. What became important was the end result.

Working with trigger points clears ischemia, inflammation and swelling resulting in relaxation of the associated muscle. Holding or stimulating acupressure points mobilizes energy, releases rigidity, swelling and inflammation, and opens the energy flow along the entire meridian. Some of my answers for quick and effective treatment to prepare challenging clients for deeper work were now becoming evident.

It became obvious that releasing the distortion in the neck and shoulders was necessary to facilitate the flow of energies and release of tension in the musculature. This distortion manifested in forward head/neck posture, reverse curvatures, high-low shoulders, shoulder rotation, and shortening of tissue at the atlas/axis and occiput.

Knowing the effect that treating the acupressure and trigger points would have on the soft tissue holding patterns and energy flows, I realized that in order to normalize the structure these points would need to be treated in a specific sequence. Consequently, a protocol with a sequence that would first release the shoulders back, lower the raised shoulders and reduce the contraction between the rhomboids would alleviate the pulling forward of the neck and shoulders. Then the reverse curvature of the neck could be reduced, and the restricted and contracted tissue affecting the occiput / atlas / axis relationship could be softened. Thus, with the whole shoulder, neck, and head area becoming progressively relaxed the structural distortion could begin to normalize.

Since the occiput was now more mobile it could be tractioned and released with the cranial motion eight to 12 times a minute. This also pumped cerebral spinal fluid through the entire spine and cranium, lengthened the dura, and facilitated the reduction of the exaggerated curvatures in the thoracic and low back. With this protocol there was also a mobilization of the energy flows through the meridians, the diaphragms of the torso were released, and the sacrum was able to move more freely. The effect on clients was amazing – the progressive relaxation throughout the whole body from the cranium through the feet now made it possible for clients with challenging conditions to relax on the table and be ready for the deeper myofascial structural techniques.

This whole protocol sequence only took 10-15 minutes to apply. Thus, I hastily named it the Quick Release Technique. I could now apply this Quick Release Technique and in approximately 10-15 minutes I could quickly and efficiently accomplish a number of treatment goals. Here are just a few.

Clients who come in with headaches are not comfortable on the table, have difficulty relaxing and want immediate help. The Quick Release Technique 1) moves the cerebral spinal fluid to release trapped pressures in the cranium, 2) releases the jamming of C1 and the occiput which releases pressure in the brainstem, 3) releases soft tissue that is chronically tightened at the base of the occiput, 4) releases the trigger points that are responsible for pain referral in the head, 5) releases nerve impingements from structural distortions, 6) clears trapped energy in the acupressure meridians, and 7) releases inflammation and swelling. Thus, most headaches disappear with this protocol.

For clients with intense emotional situations and histories of trauma, relaxing and lying comfortably on the table can be a challenge. Clients can be fully clothed for the Quick Release Technique and the weight of the client's body presses down onto the therapist's hands. This creates a safe environment with a touch that is felt to be nurturing and loving, and rapport between therapist and client develops quickly. The energy flow in the acupressure meridians is mobilized and the tension in the tightened musculature directly below the occiput, one of the major blocks to emotional expression, is softened which allows the client to releases emotional energy and stress that could prevent the client from relaxing – i.e. crying, laughing, vibration and/or streaming.

Osteoporosis clients with acute kyphosis can't lie comfortably on the table because their heads can be 5-7 inches off the table. With the application of the Quick Release Technique the muscles of the shoulders and neck relax, the mobilization of the occiput lengthens the dura which initiates the reduction of the exaggerated curvatures in the spine, all of which allows these clients to lie more comfortably on the table so other work can be done to further release the shortened contracted tissue. This also allows clients with back pain to be more comfortable. Clients with acute conditions can be highly sensitive to even light touch. However, there needs to be a significant change in the distortions of the neck and shoulder for long term relief. Holding the points in the Quick Release Technique releases ischemia, fluids and inflammation almost immediately, releases muscle spasms responsible for holding the distortions in the neck and shoulders allowing for structural changes, all of which releases the pressure on nerves that was causing severe pain. Now it is possible to do the deeper work to rehabilitate their painful conditions.

A locked cranium that has minimal cranial motion affects the whole body and all body systems, and it can take up to two hours to fully mobilize it. However, the application of the Quick Release Technique is able to make a significant difference in the cranial motion in 10-15 minutes. The restrictions in the soft tissue of the neck and shoulders that influence the cranial motion are softened, energy blockages in the acupressure meridians are opened, swelling and inflammation in the trigger points is reduced, structural imbalances in the neck and shoulder begin to normalize, and the restrictions along the dura are also released which allows the entire cranial/sacral mechanism to relax and rock gently achieving full range of motion. When this is accomplished the diaphragms of the body also relax and open, emotional holding patterns and myofascial holding patterns let go, and mobility and homeostasis in all of the systems of the body are more easily achieved and longer lasting.

If you would like to learn this extremely effective technique and become a more effective therapist, come to my class at the FSMTA convention– June 30, in the morning session. Hope to see you there.

Please visit our website for more information – <u>www.StructuralEnergeticTherapy.com</u>. You may also contact me through that site with any questions you may have.