

Neuromuscular Therapy

American™ Version

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Neuromuscular therapy (NMT) addresses the person as a whole, by broadly considering biochemical, biomechanical and psychosocial influences on a client's *state* of health. While most NMT practitioners will use manual methods to influence primarily biomechanical factors, treatment through any one or combination of these categories can usually make some change in a person's *wellness state*. Synergistic combinations can be profound.

Neuromuscular Therapy American™ version has a broad impact on the body. It specifically focuses to reduce ischemia within myofascial tissue as well as deactivate trigger points (TrPs) and, where possible, uncover the cause of their formation. It will consider and relieve nerve entrapment and/or compression possibilities and assess and influence postural alignment. Additionally, it aims to enhance well-being through nutritional awareness and reduce the effects of emotional stress.

Neuromuscular Therapy commonly uses applications of effleurage, friction, digital compression, myofascial release (MFR) through manual light traction of specific tissues, muscle energy *techniques* such as passive and active stretching, Positional Release and a variety of hydrotherapies. Additionally, an effort is made by both practitioner and client to discover the causes of primary and secondary dysfunctions. Where possible, causes are removed or altered (new chair, orthoses, awareness of head position, daily active stretching, relaxation methods, etc.) and new habits of use suggested.

When forces, such as shearing, heat, or vibration, are introduced to fascial tissue, its ground substance displays a unique property, called *thixotropy*, that allows it to change its *state* from a solid to a more liquid form. If left immobile and undisturbed it returns to a more solid *state* over a period of time, and movement eventually ceases due to solidification of synovium and connective tissue. A wide range of therapeutic interventions can be applied by the practitioner and/or the patient in an attempt to temporarily change the *state* of the ground substance from gelatinous-like (which limits movement) to a more watery, flexible solute *state*. These may include the introduction of energy through muscular activity (active or passive movement provided by activity or stretching); soft tissue manipulation (provided by specific *BodyWork techniques*); heat (hydrotherapies, manual friction); vibration (manually or mechanically applied); and nutritional changes (including fluid intake).

Neuromuscular Therapy requires thought and intuition on the part of the practitioner as to which applications to use, in what order to apply them, and how much is enough yet not too much for the client's system to effectively handle. The practitioner's role may be to alleviate the stress burden as far as possible, to lighten the load, or to work toward more efficient handling of the adaptive load. It also includes teaching and encouraging the individual to alter daily habits.

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TouchAbilities®

Technique	Component	Skill
Effleurage	Gliding	Sliding
Friction	Gliding	Rubbing (subsurface), Planing
Vibration	Oscillation	Vibrating
Digital Compression	Compression	Pressing/Pushing
Tissue Compression	Compression	Squeezing/Pinching, Twisting/Wringing
Tissue Mobilization	Expansion Compression	Pulling, Lifting, Rolling Twisting/Wringing, Pressing/Pushing
Light Traction	Kinetics Expansion	Mobilizing Pulling, Lifting
Passive/Active Stretching	Kinetics	Mobilizing, Stabilizing
Positional Release	Kinetics	Holding/Supporting
Structure Balance	Kinetics	Stabilizing
Tapotement	Oscillation	Striking, Shaking
Respiratory Rehabilitation	Breathing	Tracking, Directing
Client Assessment	Cognitive Energetic	Visualizing, Inquiring, Focusing Sensing, Intuiting, Balancing
Client Education	Cognitive	Transmitting, Intending, Focusing, Inquiring