

Neuromuscular Therapy

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The philosophy and intention of Neuromuscular Therapy is to help reduce pain in injured tissues and help reset and recalibrate muscle tonus through contact with trigger points. The essential ingredient in working with this *modality* is the *palpation* of trigger points (Tps) within the muscle tissue. The NMT therapist uses pressure and gliding to identify Tps within the soft tissues. This pressure is usually applied downward in a perpendicular (90 degree) direction and will vary from location to location as dictated by the needs of the client. It may cause a sensory input that is interpreted as “pain.” The painful area may be ischemic and thickened due to injury or trauma. Generally, Tps tend to soften and melt when pressure is applied, which increases the resting length of the muscle fiber. Then the Golgi tendon organs reset, and *fascia* softens to accommodate the newly lengthened muscle bundle. Too much pressure will cause the client to recoil and possibly reduce the effectiveness of the application; too little pressure and the client’s sensory inputs to the brain may remain unchanged.

NMT works through the body/mind connection. A client may not report soreness or tenderness until the tissues are manipulated. Contact may cause feelings/sensations of tension or pain in the conscious realm. This neural firing at the contact point causes stimulation up the neural chain until the brain receives the message and sends out a motor neuron message to adjust to the new stimulus. After a few minutes of sustained pressure and even slow friction, the muscle, ligament, or tendon may feel completely free of Tps.

Therapists with refined touch skills palpate small areas of a muscle group to probe for Tps. This exploration can be assisted by verbal interaction and direction from the receiver. Including clients in the *feedback loop* is key to successful treatment. In fact, the client should be directing the treatment for optimal results. Tips such as “a little more to the right” or “less pressure, please” complete an energetic loop as the client helps the therapist “press it just right” and the therapist helps the client “feel it just right.” Using controlled breathing techniques can also help the client “connect” with the area being treated.

There is often discussion about referral patterns and referred pain sensations. Referred pain does not have to be present to treat a Tp, however, dermatomes and enervation patterns are helpful in locating sources of pain especially in cases of nerve entrapment or compression. Referral patterns can help the therapist determine from which nerve level a problem arises and assist clients in understanding their pain, especially if that pain is distant from the spot being treated.

**Neuromuscular
 Therapy**

TouchAbilities[®]

Technique	Component	Skill
Effleurage	Gliding	Sliding, Planing
Petrissage	Compression	Pushing/Pressing, Squeezing/Pinching, Twisting/Wringing
	Expansion	Lifting, Pulling, Rolling
Compression of Tps (thumb/fingers-compression)	Compression	Pushing/Pressing
Open Fist— Static Pressure	Compression	Pushing/Pressing
Elbow— Slow Friction	Gliding	Rubbing
Friction of Lesion in Tendon or Ligament	Compression	Pressing
	Gliding	Rubbing
Joint Mobilization	Kinetics	Holding/Supporting, Mobilizing, Stabilizing