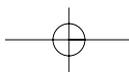
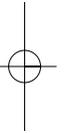
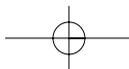


**A MASSAGE
THERAPIST'S GUIDE TO**

**Understanding, locating
and treating myofascial
trigger points**





For Elsevier:

Senior Commissioning Editor: Sarena Wolfaard

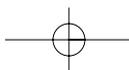
Associate Editor: Claire Wilson

Project Manager: Joannah Duncan

Senior Designer: George Ajayi

Illustration Manager: Bruce Hogarth

Illustrators: Barking Dog Studios, Graeme Chambers



A MASSAGE THERAPIST'S GUIDE TO

Understanding, locating and treating myofascial trigger points



With accompanying DVD



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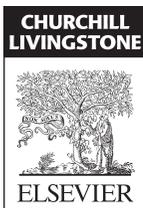
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Medical Artist



EDINBURGH LONDON NEW YORK OXFORD PHILADELPHIA ST LOUIS SYDNEY TORONTO 2006

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First published 2006

ISBN 0443 10200 7
ISBN-13 978 0 443 10200 4

British Library Cataloguing in Publication Data
A catalogue record for this book is available from the British Library

Library of Congress Cataloging in Publication Data
A catalog record for this book is available from the Library of Congress

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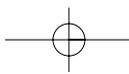
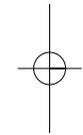
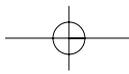
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Foreword



Some 20 years ago, while browsing through a British alternative health journal, I first stumbled across Leon Chaitow's essay entitled 'Whole Body May Be Trigger Point'. The article succinctly asserted what I intuitively knew: that the entire surface, indeed the total landscape of the body, was potentially an area, however minute, of a nasty form of soft tissue dysfunction that possessed pain-generating characteristics.

Since the entire encasement of our physical structure is a potential source of this peculiar irritating pain that, when provoked, stimulates noxious impulses in predictable ways, new and highly efficacious manual protocols are called for.

I am, therefore, honored to write the foreword to this vital and long overdue work. *A Massage Therapist's Guide to Understanding, Locating and Treating Myofascial Trigger Points* by Leon Chaitow and Sandy Fritz is a valuable and timely contribution to the field of manual therapy. I predict that almost every reader of this book will find new information and innovative methods for developing their hands-on skills and enhancing their clinical outcomes. This book is articulate, detailed, sequential, profoundly instructive and breathtakingly thorough.

Trigger point approaches consistently yield powerful therapeutic results. Stubborn cases of thoracic outlet are successfully resolved by neutralizing scalene and pectoralis minor trigger points. Trochanteric bursitis, all too often injected with cortisone (yielding little long-term success), is often cleared within three visits of treating quadratus lumborum and vastus lateralis trigger points. The sensation of having an ice pick in the mid-thoracic region upon deep inhalation is eradicated with trigger point work on the serratus posterior superior. 'Brain pain' from sub-occipital trigger points is effectively treated by normalizing

tender points and hypertonicity in rectus capitis posterior minor and the adjacent sub-occipitals. The chronically stiff neck is significantly relieved by trapezius and levator scapula trigger point therapy. Deactivating trigger points as part of a whole body soft tissue approach is now a commonly accepted therapeutic modality.

Even today, Swedish Massage, or more appropriately Relaxation Therapy, is the primary reason why clients seek the services of massage therapists at our school clinic in Chicago. Clients intuitively know they need to relax, and that relaxation is profoundly therapeutic. But they want something more: 'could you spend a little more time on the back of my neck' or 'I strained my back pushing a piano last week' or 'I twisted a rib muscle while lifting my dog' or 'I'm just beginning a new job and find it painful to take a deep breath'. These are all indicators that the public wants, and expects, the massage session to be tailored to their personal needs: their familiar aches, pains and areas of dysfunction and stress. This book will significantly help to fill that gap.

A Massage Therapist's Guide to Understanding, Locating and Treating Myofascial Trigger Points features a thorough discussion of myofascial and other forms of pain and how stress can exacerbate pain symptoms. Causal factors and pain aetiology are presented and range from postural compensations to the chronic somatization described so vividly by Latex and others. Upper- and lower-crossed syndromes are discussed, providing regional, not just local, assessments of altered physiology, pain and dysfunction. Theories of trigger point development explain the evolution of this phenomenon and charts, maps and illustrations provide the visual learner with important clues to palpation accuracy.

Palpation for practitioners will assume a new dimension after reading this book. Texture, temperature, tonicity, trophic skin changes, attachments and musculotendinous junctions assume new clinical significance. Pressing, frictioning, stretching and direct pressure are but a few of the manual methods presented in order to detect deep, hidden, cryptic areas of longstanding pain.

As a massage therapy practitioner for the past three decades, what I find most important is how trigger point protocols can be incorporated into basic massage protocols and sequences. The implications of this are

enormous. At health clubs, spas and resorts, the public can now expect a multi-dimensional approach to healing that combines the relaxation response with trigger point release techniques. This is a union long overdue!

The deactivation of pain-causing trigger points is both a science and an elegant art form. Congratulations to authors Chaitow and Fritz for an innovative contribution to this marriage of science and art.

*Robert K. King, Founder & Past President,
Chicago School of Massage Therapy, 2006*

Preface



It has become ever more obvious that trigger points produce a great deal of the pain being treated by massage and manual therapists.

One of the main problems busy therapists face is keeping up to date with research evidence that explains the way trigger points develop, the way they create pain and dysfunction, and the best ways of deactivating them.

This book has been compiled precisely to meet that need; to help the therapist and the student to have a clear idea of what research and clinical experience has taught us in recent years.

To effectively manage trigger points it is necessary to know:

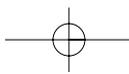
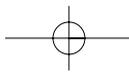
- why trigger points develop (see Chapters 1 and 2)
- where they develop (see Chapters 1 and 2)
- the nature and behavior of trigger points (see Chapter 3)
- the difference between active, latent, central, embryonic and attachment points – and why you need to know about these differences (see Chapters 1, 2 and 3)
- how some pain can be confusing – and why you need to be aware of ‘imposter’ symptoms (see Chapter 4)
- how nutrition, postural and breathing habits, stress and other factors can contribute to trigger point development (see Chapter 2)
- what symptoms trigger points can cause, and how to assess the patient’s pain (see Chapter 5)

- how to locate trigger points by palpation (see Chapter 6)
- how to locate trigger points by using ‘pain maps’ (see Chapter 4)
- how to know if trigger points are significant (are they part of the patient’s problem?) once they have been located (see Chapters 2, 4 and 7)
- when trigger points can be seen as functionally useful – for example if they are close to an unstable joint (see Chapter 7)
- how to deactivate trigger points using one of a variety of ways – including use of muscle energy, positional release, spray and stretch, and many more (see Chapter 7)
- how to integrate the methods described (and others) into a massage context (see Chapter 8)
- what other methods exist for treating trigger points outside of a massage therapist’s scope of practice (see Chapter 9)
- what to advise the patient regarding home management methods (see Chapter 7).

Trigger points are almost always a part of the story in chronic pain settings, and major research has demonstrated the value of massage in treatment of chronic pain. Much of this research will be described throughout the book.

By understanding and managing myofascial trigger points effectively you can relieve a great deal of pain safely, and enhance the wellbeing of your patients.

Leon Chaitow, 2006



Acknowledgements



I wish to pay tribute to the work of a remarkable man, David Simons, whose half-century of dedicated research into myofascial pain continues unabated in his ninth decade. Special thanks also to my co-author Sandy Fritz for her unfailing contribution of time and effort, when there were already great

demands on her both personally and professionally. However my primary thanks are to my wife Alkmini. Neither this book, nor any others to which I have contributed, would exist were it not for the supportive and loving safe haven that she has created in our home on the remarkable island of Corfu, Greece.