

Patient Information Sheet

What does *myofascial* pain and dysfunction mean?

The term “myofascial” comes from the Latin “myo” meaning muscle and “fascia” meaning the membranous connective tissue which binds tissue together and separates and identifies various muscle groups.

Through overuse, chronic shortening of muscles through remaining in an unusual position (sitting, hunching shoulders, repeated reaching, craning neck to look at a monitor, etc.) or a sudden blow, jerk or twisting, irritable spots called Trigger Points are developed. These Trigger Points (TrPs), when latent, are responsible for stiffness and inflexibility. When flare-ups occur from psychological stress or repetitive misuse or overuse, these TrPs become active, meaning that they cause pain to travel or “refer” to a predictable zone. For instance, a TrP flaring in your pectoral or chest muscle may cause pain in your chest, shoulder and inside of your elbow. Compression to a TrP may recreate the referred pain pattern, the source of which had been previously frustrating and mysterious. Myofascial Trigger Point Therapy has proven very successful in the alleviation of chronic muscular pain when other modalities utilized were not.

What is *Myofascial Trigger Point Therapy*?

Certified therapists apply deep compression to the TrP, as well as utilize myofascial release, passive stretches and movement, postural and ergonomic retraining and kinesthetic awareness to reduce chronic pain and to facilitate a return to normal activity. Nutrition, medication and other therapies are considered to work in an integral fashion.

Emphasis is on patient involvement, education and self-care. Stretching and exercise programs are tailored for individual capacity and use, as well as training in self-application of manual pain-relief techniques. Use of compression tools, aqua exercise, and creative interaction with environment (e.g. chair/car/pool exercise) may be used. Attention to individual lifestyles and professional requirements receives careful consideration. Goals are set cooperatively at the patient’s initial evaluation and are periodically reassessed. Patient input, insight and creativity are highly encouraged.

What should I expect from treatment?

Your rate of improvement depends on many conditions:

- ~ type and length of time injured
- ~ overall physical health
- ~ weight
- ~ level of fitness
- ~ underlying skeletal abnormalities
- ~ nutrition
- ~ quality of sleep
- ~ depression or anxiety
- ~ patient compliance with self-care
- ~ other medical conditions (i.e. allergies, diabetes, thyroid dysfunction, etc.)

Response to treatment varies; some patients experience superficial soreness the day after treatment. This usually resolves after the first few treatments. You may experience fatigue as the chronically held musculature is allowed to relax and return to a normal tone. Some patients experience an increase in energy.

As the work load of the musculature shifts and returns to a normal balance, pain patterns may change. This is a temporary and normal stage of recovery from chronic pain. It is suggested that patients keep activities to a minimum after treatment for maximum benefit.

Returning to normal activities without pain is most often accelerated by adherence to the self-care program given to you by your therapist. Minimizing stress, pacing your activities and avoidance of overexertion (as well as focusing on what you can do instead of your limitations) are of prime importance. Patience and a positive attitude are essential.