Myofascial Training for the Upper Body



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Quick Promo!!!

Check out Muscle Imbalances Revealed: Lower Body for more awesome presentations!!



For Those Who Want An Outline...

- Overview of fascial anatomy & physiology
- 2. Upper Body Fascial Merdians
- 3. Posture and Fascia How one can impact the other
- 4. Training Lines of Force
- 5. Party like rock stars!!

A little about myself...



- BSc. Kinesiology, University of Alberta
- CSCS NSCA
- CEP CSEP
- MES AAHFRP
- Medical & Rehabilitation Coordinator, World Health
- Former competitive athlete, multiple injuries
- Clientele ranges from pre-post surgical, MVA, cancer, up to athletes & "weekend warriors"
- Written articles for T-Nation, ThePTDC.com, and a few others





- Muscles have defined and specific origins and insertions
- The muscle fibre is the only part of the motor unit that can undergo contraction
- The sensory fibres for muscles are the golgi tendon organ and the muscle spindle





THERE'S MORE!





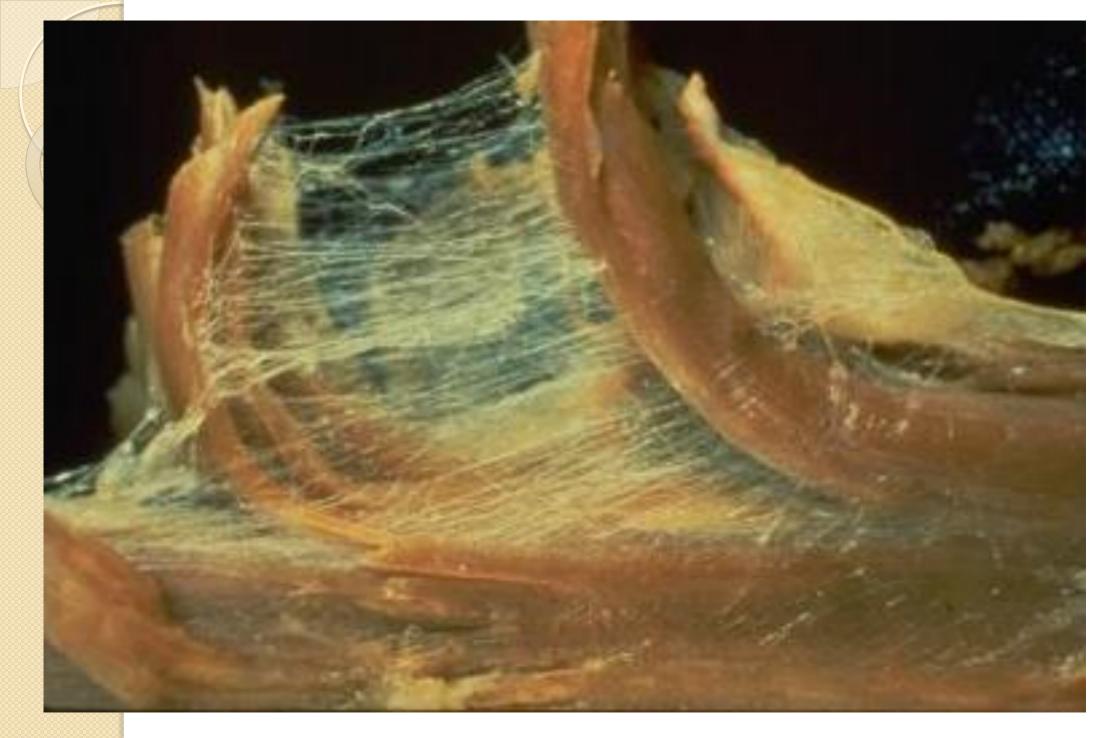
Riddle me This.

- How can tension through your neck and shoulders cause shoulder problems?
- Why do some people NEVER loosen up?
- What the hell are those foam thingies for??



What is Fascia??

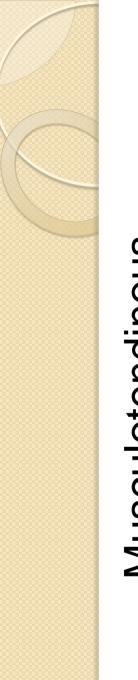
- Connective tissue made of collagen and elastin fibres
- Found between, around, and throughout muscles, blood vessels, nerves, everything!!
- Rich proprioceptive environment (specifically ruffini and pacini fibres), AND has smooth muscle cells embedded in matrix
- Contains myofibroblasts, makes its' own contractile tissues
- [highest] in thoracolumbar fascia (Klinger et al, 2007, World Congress on Low Back & Pelvic Pain)

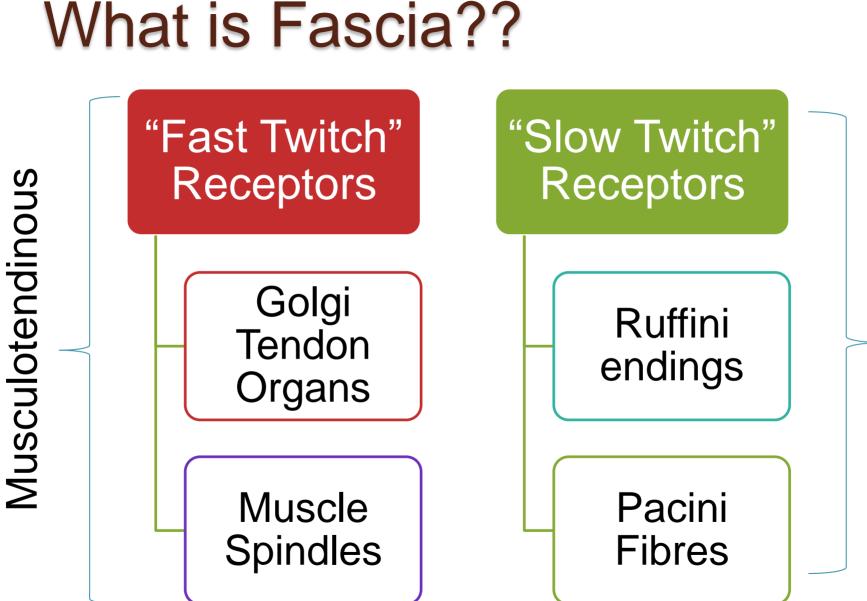




What is Fascia??

- Ruffini endings slow adapting, low threshold mechanoreceptors
- Decrease tone of tissues in presence of stretch. Tend to like direct pressure (SMR, massage, etc), inhibit sympathetic activity
- Pacini Fibres provide proprioceptive feedback.
- Tense tissues when vibration & rapid pressure changes occur





Fascial

Tissue

What is Fascia??



- Has contractile properties, and carries electric charge
- ↑activity → high ↑[fibroblast]
- Contractions are slow, can last for hours
- Contractions can be strong enough to influence joint stability & structure
- Schleip et al, 2006. World Congress of Biomechanics



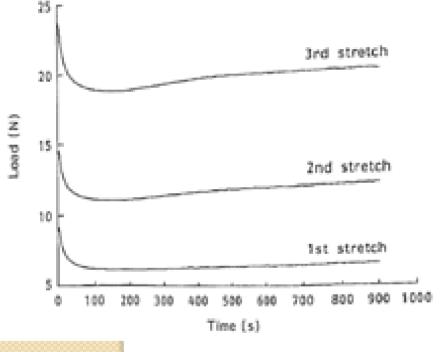


But Wait a Second!!!





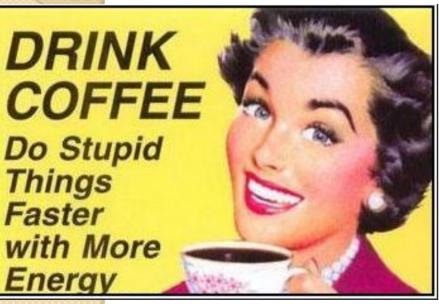
Fascial Stiffness



- Stretch one:
 ↓ Elastic resiliency

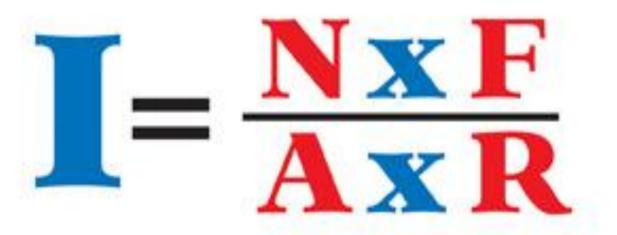
- Schleip et al, 2004. World Congress on Low Back & Pelvic Pain
- Multiple stretch bouts ↑ contractile capacity of tissue, which could lead to ↑ joint stability or muscle force production.
- HYDRATION IS KEY!!!!

Fascial Stiffness



- Stretch Slow or Fast??
- Ruffini fibres reduce tone in presence of low threshold, long duration stretch under direct pressure.
- Reduce sympathetic activity, resulting in neurochemical relaxation of mechanoreceptors
- → Slow stretching for fascia!!

LAW OF REPETITIVE STRAIN



Number of Repetitions

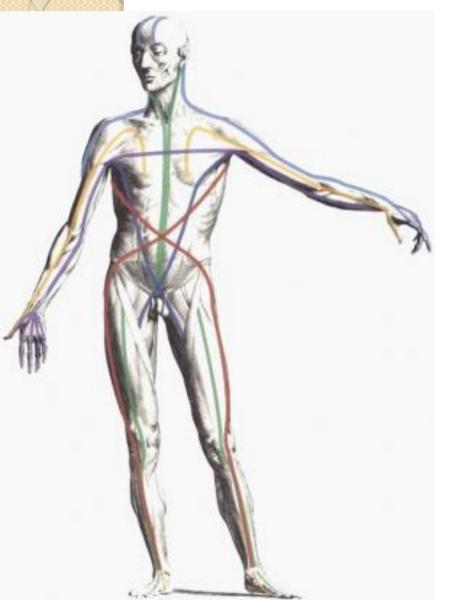
Force

Amplitude

Relaxation

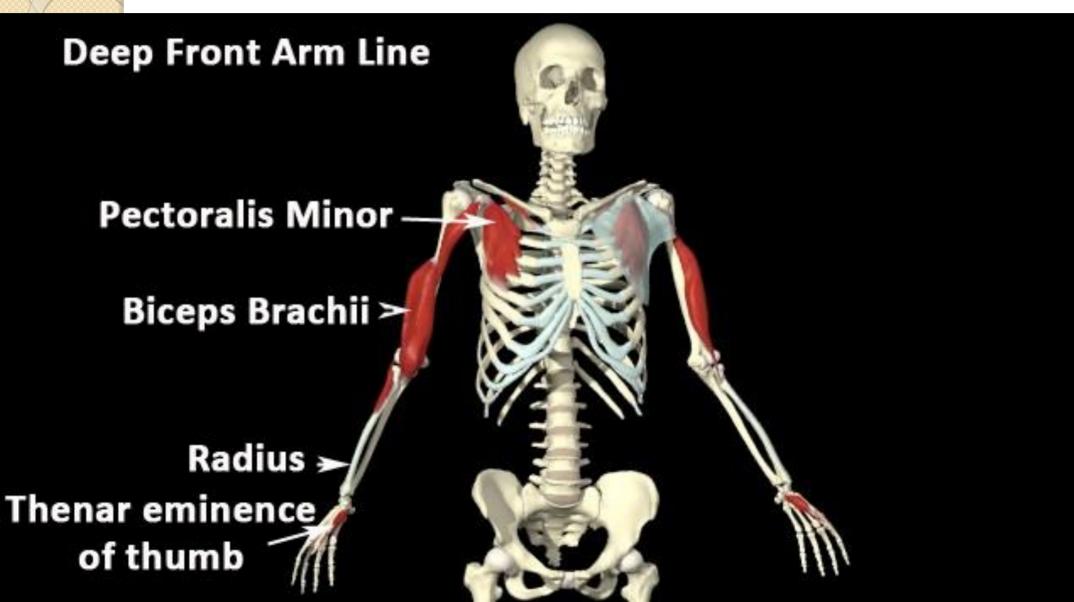
Take-Home Points

- It adapts to physical stress like muscle.
- Lays down more dense collagen in areas with more stress, can break down when stressed too much without recovery
- Deteriorates faster when dehydrated
- Takes a long time to remodel effectively (1-2 years), which explains slow healing times in certain injuries



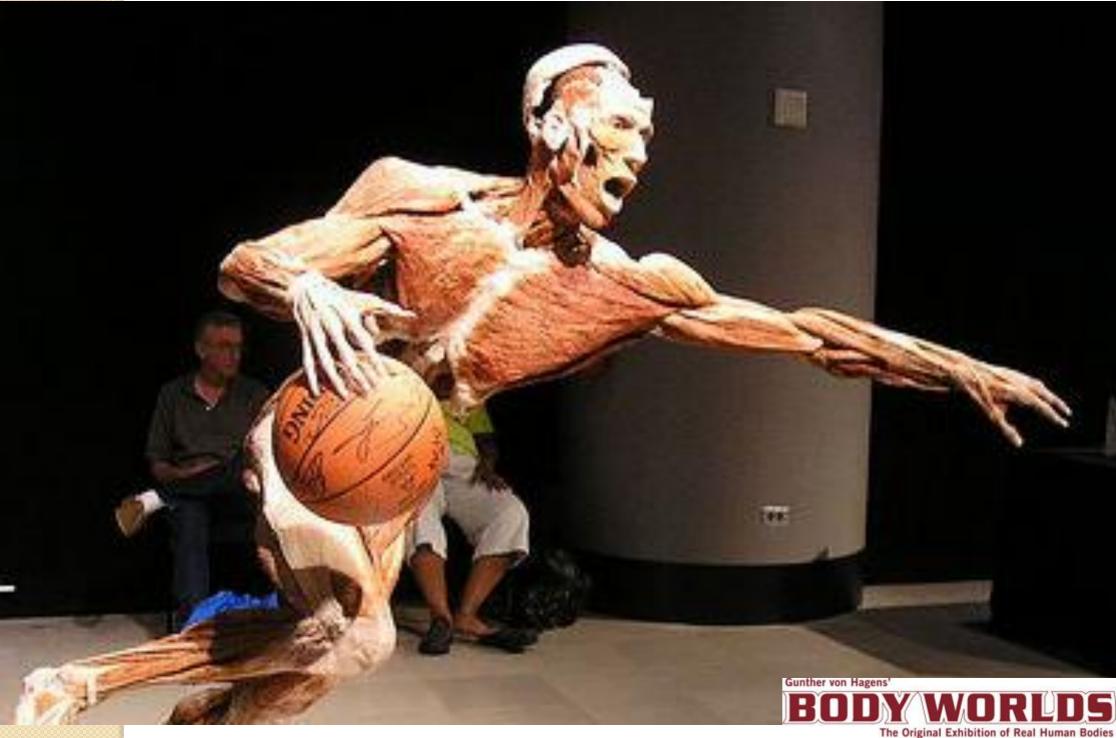
- Developed by Thomas Myers, popularized in his book Anatomy Trains
- Systematic view of anatomy as integrated sub-structures instead of parts of a whole
- Linkages of adjacent muscles and fascial tissue that create a continuous "track" of connective tissue







Superficial Front Arm Line Pectoralis Major <Intermuscular septum Latissimus Dorsi Flexor muscles





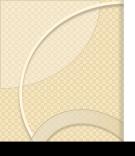
Deep Back Arm Line

Origin 2: Rhomboids Infraspinatus Teres Minor Origin 1: Rectus Capitus Lateralis Levator Scapula to Supraspinatus

— Triceps Brachii

Ulnar periosteum

Hypothenar mm's



Deltoid: Anterior Middle Posterior

Lateral Intermuscular septum

Common Extensors

Trapezius: - Occipital - Cervical - Thoracic



DEEP FRONT

Bony Attachments: Cranium Basal part of occiput Hyoid bone Posterior Sternum Bodies of: Cervical vertebrae Thoracic vertebrae Lumbar vertebrae

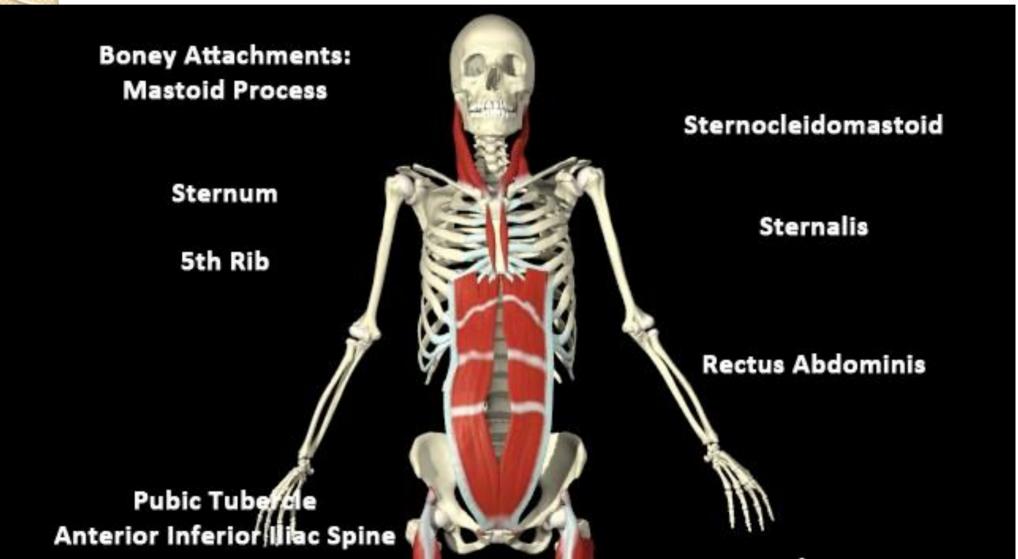


Temporalis Masseter

Scaleni, hyoid muscles Longus colli and capitus

Respiratory diaphragm Transversus Abdominis (not shown)

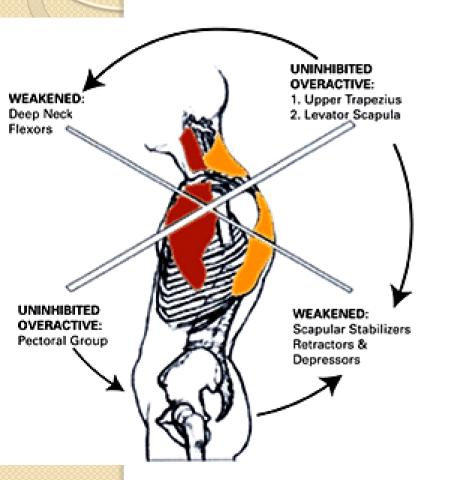
SUPERFICIAL FRONT



Fascial Posture

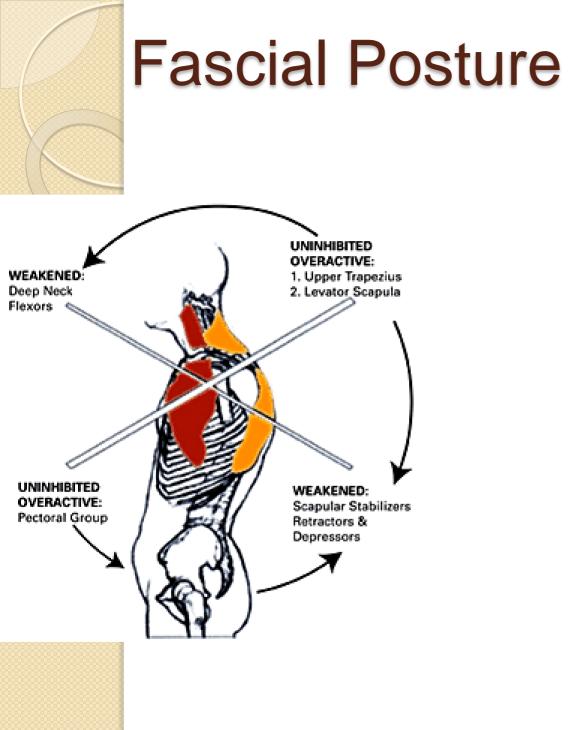
- Tension/adhesion in one area restricts mobility and function in associated areas
- Decreasing strain in area of restriction → decreased pain at area of symptom
- \$Million Question: HOW THE HELL DO YOU FIND THE RESTRICTION??

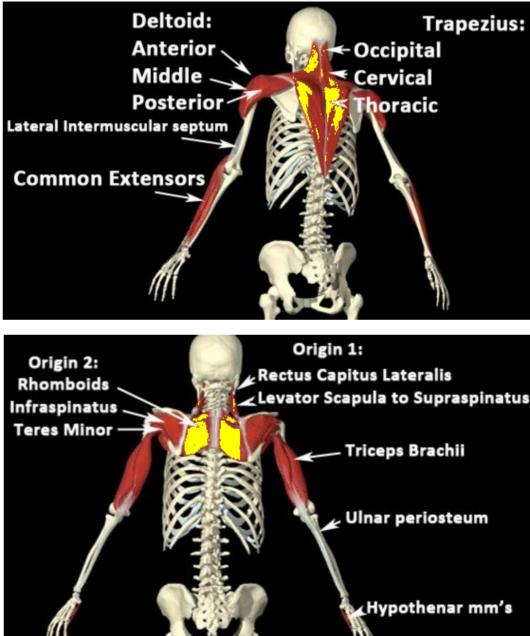
Fascial Posture

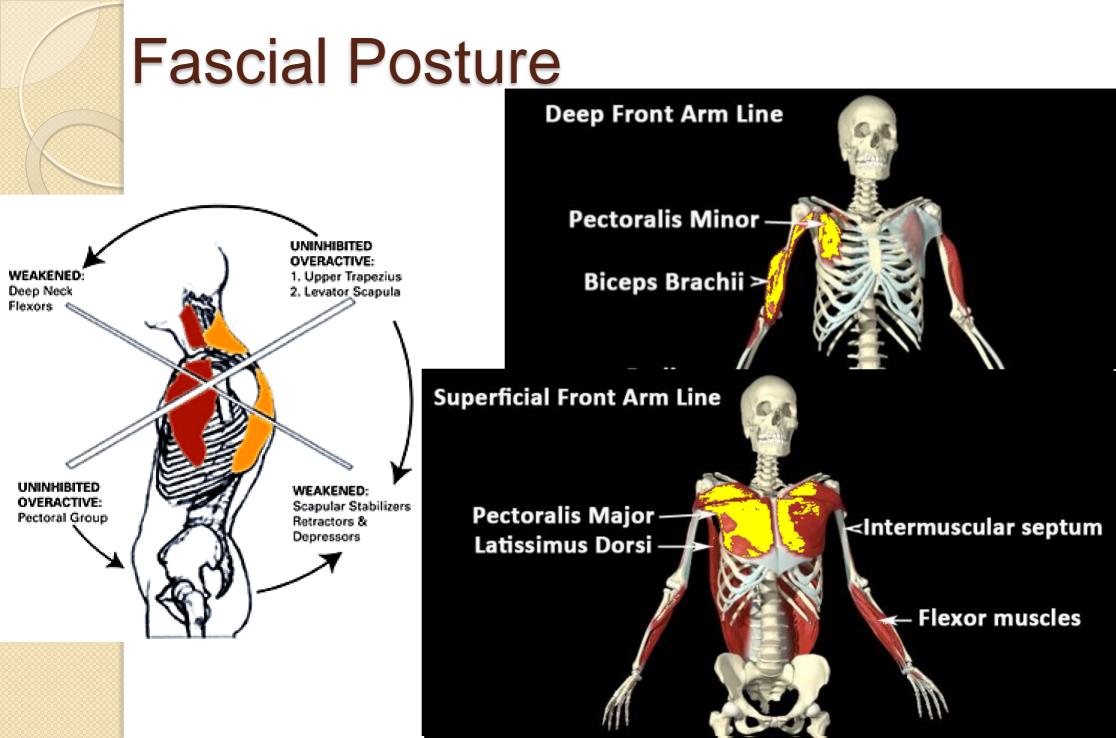


 Vladimir Janda coined the term "Upper Cross Syndrome" to decribe kyphosis and forward head posture in book Muscle Function Testing "Mr. Burn's Syndrome"

MATT GROENING







Fascial Training

The 7 means of improving "fascial fitness:"

- 1. Use whole body movements
- 2. Use long chain movements
- 3. Use dynamic pre-stretch with proximal initiation
- 4. Incorporate vector variation
- 5. Incorporate elastic rebound movts cyclic motion
- 6. Train proprioception in 3D
- 7. Incorporate pauses/rest to optimize hydration status

Fascial Training

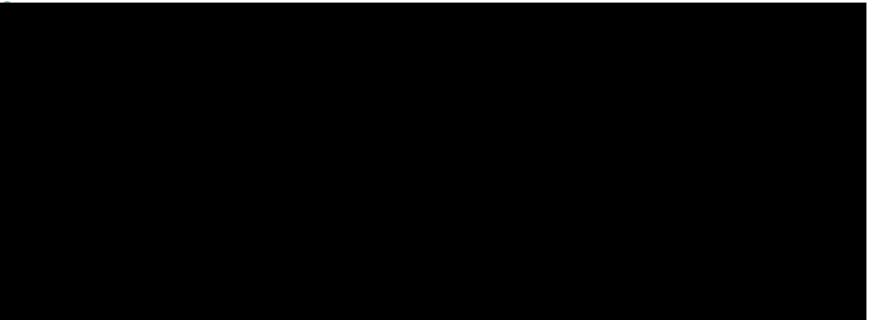
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1. Use whole body movements

Fascial Training2. Use long chain movements

Fascial Training

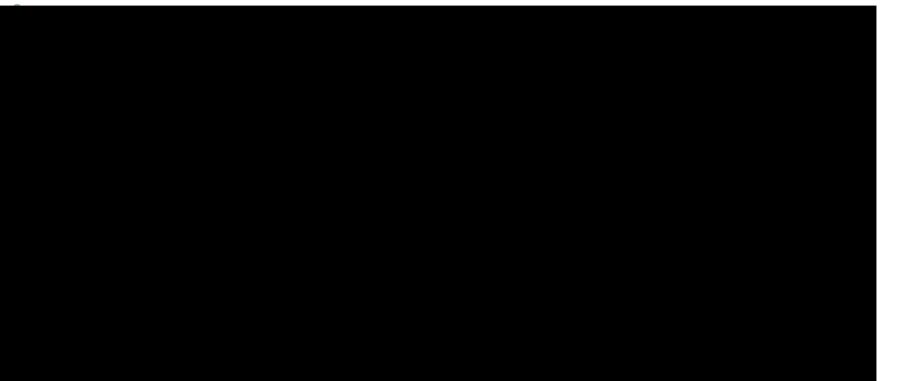
3. Use a dynamic pre-stretch with proximal initiation



Fascial Training4. Incorporate vector variation

Fascial Training

5. Incorporate elastic rebound movements - cyclic motions

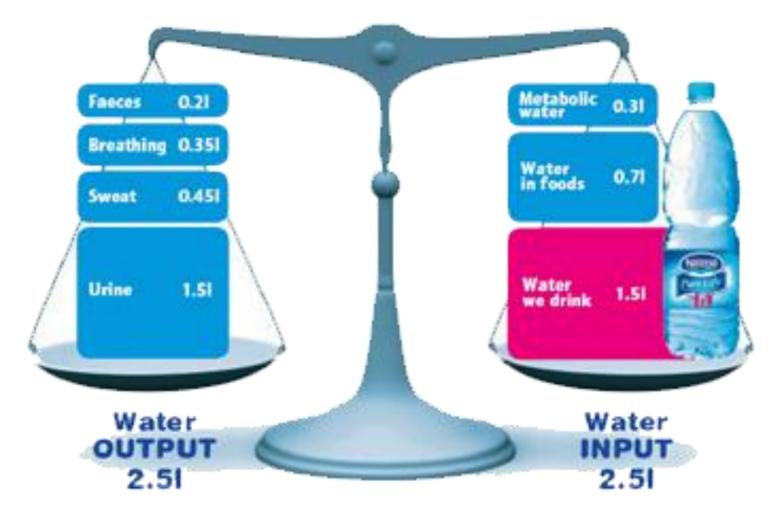


Fascial Training6.Train proprioception in 3D

Fascial Training

7.

Incorporate pauses/rest to optimize hydration status



BASIC!!! Need 3-4 litres to be optimally hydrated



In Closing...

- Myofascial training integrates anatomy for rehab and injury recovery
- Response to SMR techniques and directed strength training can reduce pain and increase function beyond static stretching and basic strengthening
- Thinking about anatomy in new ways brings new ideas for training and new performance outcomes

THANK YOU!!!! ③

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