

THE IMPORTANCE OF KNOWLEDGE: PART IV

Do you know how to successfully treat tendonitis? Do you know how to correctly assess tendonitis? I chose this subject to inform you of yet another aspect of the tremendous amount of knowledge to be acquired by taking all four Onsen Technique classes: cross fiber friction. (It is the only actual massage technique that is taught in the series.) Rich Phaigh refers to it as Transverse Friction Massage (TFM). Many of you may already use TFM for the treatment of tendonitis, but if your results are not great you could be missing key pieces of information. It's important to know when it needs to be done, precisely where it needs to be done, what your impact is accomplishing, and how to explain this to your clients so that they understand proper self-care post treatment. Your knowledge will result in confidence; the outcome will earn their confidence and *referrals*. Listen up on this one, kids, it is a gift!! So, are you ready to examine tendonitis in depth and see if there is more knowledge to be gleaned on the subject?

What is the cause of tendonitis? It is a tear (or strain) of a certain percentage of tendon fibers, anywhere along the length of a tendon, from its junction with the muscle to its attachment to the bone. Most strains happen near the musculo-tendon junction where tendon fibers must have the ability to separate in order to accommodate the broadening of the muscle as it contracts (splay your fingers to picture this action – the tips of your fingers are where the tendon attaches to the muscle). The problem occurs when the body comes in to do its repair work: it lays down scar tissue in an effort to bind the tear, but it ends up doing a darning job (as in socks) binding the fibers of the tendon *together*. This interferes with the separating action that has to happen every time the muscle contracts. Each time the tendon attempts to separate more tendon tissue tears, because scar tissue is not meant to separate. Then there is new inflammation, more scar tissue, and so on. This tearing causes the pain that is felt each time your clients make certain movements.

Movement is a key word. It requires muscle contraction and is performed by contractile tissue (muscles and tendons). Pain felt on active or resisted movement identifies the source as contractile tissue so we can eliminate inert tissues (ligaments, bursa, bones, nerves, cartilage, fascia and joint capsules): they are mainly incriminated by passive testing. All types of testing plus specific locations for TFM are taught in the Functional Volumes of the Onsen Technique (Vols. 2 & 4), but let's get started with the actual treatment!!

Usually I start by asking my client what action causes their pain, or caused their injury. From their answer I can perform testing that will confirm the source of pain, and as I begin doing TFM I check with them to make sure that they agree that this is the site of their pain (usually it's an emphatic YES!). It's important that the skin is moving across the underlying scar tissue, and that the direction of the movement is cross fiber (not with fiber). In my opinion, however, this action does not necessarily separate the scarred-together fibers of the tendon. Friction is the key here, because it heats the scar tissue and makes it softer and more "mold"able. After applying TFM 4 -10 minutes or longer, I feel

the lesion (scar tissue) soften and the client's pain diminishes. Now we're poised to perform the most important part of the treatment: separation and realignment.

Soft scar tissue will readily realign along lines of stress. You're probably wondering what kind of stress and how to provide it. Muscle contraction certainly causes stress, and if it's performed with appropriate resistance (usually the weight of the limb it's moving), this is all it takes. Think about it: as the muscle contracts, the tendon fibers can now slowly succeed at separating. It's truly amazing! As the client performs repetitions of the *appropriate* action, the first 8 – 10 are painful. But, as the scar tissue realigns (now parallel to the fibers), the pain diminishes and disappears!! I usually have them continue for a total of 30 reps, if they can assure me that the last 15 reps are pain free. (If their pain does not totally diminish it's necessary to find any missed painful adjacent areas, applying TFM until they also soften and become pain free.)

I may or may not ice following TFM, usually it's performed with relatively light pressure that's not unbearably painful. If I've had to go overly long or deep enough to cause significant inflammation, I'll ice the muscle-tendon unit in its stretched position until all excess heat is removed.

Now comes the next important aspect of the treatment: rest!! It is vitally important that the client understands the fragile condition of their newly aligned scar tissue. They should allow 3 to 5 days for it to "set up" (as in glue or cement). They should NOT use it if at all possible; NO testing the old painful action to see if the pain is gone – I tell them they have to "baby it." When they do begin to use it I tell them to warm it up first, by doing 30 reps of the exact same action they did to realign it in the first place. One treatment is usually all it takes if it is a smaller tendon (shoulder or forearm) that the client can successfully avoid using during the healing period. Larger tendons (glutes; hamstrings) could take significantly longer. The point I want to make is that it works. No wasted energy by performing TFM and not realigning it. No expectation that ice will magically realign it. No unnecessary unproductive pain for the client. No endless months of rest or P.T. assigned exercises. No needless cost to the health care system, driving our rates up!!