

Core Concept #1:

## **SYNDROMES**

### **TREAT THE SOURCE, NOT THE SYMPTOM**

Insidious onset symptoms predominate the world of orthopedic pain. Such symptoms are typically felt at a location that is not the actual source of the problem. For instance,

How did you hurt your knee?

"I don't know. I was just getting up, and the front of my knee felt a sharp twinge."

*Getting up* is not a useful reason to attach to the cause of this problem. Consider that a syndrome was already in place for some time until the knee finally reacted to the forces working against it, causing pain or other symptoms.

As proactive manual therapists, we must Treat the Source, Not the Symptom. Embrace the fact that most symptoms involve an underlying identifiable syndrome that contributes to and causes symptoms to persist. Effective manual therapy treatment can produce profound and long-lasting positive change to these syndromes, helping to eliminate the end-product symptom they often cause.

A syndrome typically contains a number of dysfunctions or hypertonicities within a region of the body. With The Bowstring Method<sup>®</sup>, we use our system to scan, identify, and treat the multiple problems that contribute to a syndrome within individual muscles, throughout muscle groups, and among related regions of the body.

For instance, using our knee client that was mentioned earlier; an MRI or x-ray may find no pathology within the joint complex itself, even though significant symptoms are present. Fortunately for this client, The Bowstring Method<sup>®</sup> system of manual therapy helps the hands can feel what the eyes can't see. This allows us to assess and treat the numerous contributing dysfunctions within this knee syndrome, improving the biomechanics eliminating the pain signal.

The Bowstring Method<sup>®</sup> system uses a unique and specialized manual technique to feel for rigid tension outliers within the quads, hip adductors, hamstrings and calf as well as muscles intrinsic to the pelvis and foot that may be biomechanical contributors to the "sudden" sharp knee twinge. The Bowstring Method<sup>®</sup> helps to reset those muscles to a more normal tone and consistency with the surrounding tissue. Once the hypertonic muscles have been normalized, they are less likely to pull,

compress and displace that region of the body in abnormal patterns. This helps improve physical function at all levels, promoting less wear-and-tear and diminishing the faulty mechanics that lead to pain and dysfunction.

This thorough approach provides lasting relief by resetting the multifactorial sources of a problem. Here are some more examples.

#### Sacroiliac as part of a Lateral Hip Syndrome

A client describes insidious onset 'low back' pain exacerbated by standing and walking, while gesturing with the index side of their hand along the sacral contour. In this case we can certainly assume that some symptoms are emanating from the sacroiliac joint. While awareness of the anatomical location of a symptom is useful, a more profound discovery would be the identification of syndrome components that led to this discomfort. In this case it's likely that the deep hip external rotators and lateral glutes have ongoing hypertonicity, creating displacement and movement anomalies that eventually create the irritation and symptoms at that joint. If you treat the sacroiliac joint but not the muscles that stabilize and position it, the muscles will continue to alter the joint mechanics and cause irritation again over time. But, if you assess and treat the muscle tension outliers, the rigid muscular components, and then treat the joint, you will see more rapid and long-lasting results.

#### Disc Bulge

A client is experiencing significant low back pain after bending down to pick something off the floor. When the client shows up for treatment, he's feeling dejected because he's been diagnosed with a disc bulge by MRI and doesn't see how this can be fixed without surgery. As manual therapists, do we think the disc bulge is the cause of the problem, or is it the end-product symptom of a regional syndrome that had been in place for some time?

As Bowstring Method therapists, we assume a syndrome was already in place. Bending down was simply the 'last straw' that caused this tissue to injure due to the ongoing abnormal stresses imposed by the syndrome of this tissue. With this mindset, we prefer to go about systematically assessing and treating the numerous underlying syndrome components that put the disc in harm's way to begin with. By doing so, we reduce abnormal stresses at the location of the disc, giving it the best environment in which to heal. And we also decrease the likelihood of recurrence as we engage the client in movement therapy with a body that is now in a more resilient and capable position.

As manual therapist using The Bowstring Method®, we have the opportunity to make substantive biomechanical changes within a client's body by simply making positive changes in the elements we know we can affect immediately, consistently and with long duration. This way we gain power over the syndrome, taking away the various pathological elements, eventually flanking the problem and eliminating the stress points that cause injury over time.

### IT Band Syndrome

A distance runner wants to enter a marathon, but after 15 miles, a burning pain begins at the lateral knee, causing him to walk straight legged to relieve symptoms. A Bowstring Method® therapist will evaluate and properly assess that this is iliotibial band syndrome. He'll apply the majority of the treatment, not at the I.T. band, but over a foot away at the TFL and/or glute max, because one or both of these muscles will be found to be very hypertonic, contributing greatly to the problem. The therapist will also prescribe strengthening the lateral glutes and assess the client's running technique. Treat the source, not the symptom.

The Bowstring Method® of advanced manual therapy uses a systemized approach to understanding the syndrome, eliminating the source causes, thus extinguishing the symptom.

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