



Integrative Health Education Integrative Neuromuscular Therapy Course

Course presenter: James Duffin

Part two – lower body

Four-day course

Evaluation and treatment of the thoracic spine and ribcage

The spine is the column where all axial movements occur. Keeping a well-aligned and functional spine is paramount for proper posture and overall health.

In this workshop attendees will explore different pathologies affecting the spine, such as hyperkyphosis, hyperlordosis, roto-scoliosis, facet joint dysfunction, erector spinae strain, intervertebral disk lesions, spondylolisthesis, and spondylosis and how Integrative Neuromuscular Therapy (INMT) can positively affect them.

The ribcage will also be explored, and common pathologies such as, intercostal neuritis, thoracic outlet syndrome, costovertebral strain, and most importantly abnormal breathing patterns. In the first part of the course we will:

1. Review the anatomical highlights of the spine, and ribcage (muscles, fascias, blood vessels, organs and related structures).
2. Name and classify the different trigger points occurring along the spine and the ribcage's musculature and fascias, along with their clinical importance.
3. Identify specific spine and ribcage distortions and their intimate connection to the development of trigger points and other distortions in the body.
4. Discuss the most common complaints and pathologies related to the spine and ribcage, including, hyperkyphosis, hyperlordosis, roto-scoliosis, facet joint dysfunction, erector spinae strain, Intervertebral disk lesions,

spondylolisthesis, spondylosis, intercostal neuritis, thoracic outlet syndrome, and costovertebral strain.

5. Discuss abnormal breathing patterns and their clinical significance;
6. Explain the different mechanical links between the spine/ribs to other body areas and organs;
7. Demonstrate and practice a functional assessment of breathing mechanics.
8. Demonstrate and practice the protocol addressing the spine musculature (including the fascias);
9. Demonstrate and practice the protocol addressing the ribcage musculature (including the fascias);
10. Demonstrate and practice the protocol addressing the abdominal musculature and fascias;
11. Demonstrate and practice MET for the ribcage;
12. Explain the importance of viscerosomatic reflexes in the perpetuation of myofascial pain;
13. Demonstrate and practice the different active isolated stretching exercises for the spine, ribcage and abdominal musculature;
14. Present recommended corrective exercises for spine and ribcage conditions;

Evaluation and treatment of the lumbo-pelvic complex & lower extremities

The pelvis, along with the SI and hip joints, is the place where all the forces from the lower body are transmitted to the upper body when we walk, stand and seat. Attendees will learn how asymmetry in the pelvis can create lower back and hip joint problems. The positioning and functioning of the SI joint depends, in great extent, to the symmetry of the innominate bones, and these, depend on the symmetry of the lower extremities and muscle balance.

Attendees will experience and practice powerful myofascial release protocols and specific isolated stretching exercises to bring structural and functional homeostasis to the lower extremities, hip and lower back.

During the course we will:

1. Review the anatomical highlights of the pelvis, and lower extremities (muscles, fascias, blood vessels, organs and related structures);
2. Name and classify the different trigger points occurring along the musculature and fascia of the pelvic girdle and the lower extremities, and their clinical importance;
3. Identify specific pelvic and lower extremity distortions and their intimate connection to the development of trigger points and other distortions in the body;
4. Discuss the most common complaints and pathologies related to the lumbo-pelvic complex and lower extremities, including; hyperlordosis, sacroiliac joint dysfunction, hip joint strain, sciatica, piriformis syndrome, adductor strain, repetitive hamstring strain and chondromalacia patella;
5. Explain the different mechanical links between the pelvis, low back, and lower extremities to other body areas and organs;
6. Discuss Janda's lower cross syndrome and its application to pelvis/knee pathologies;
7. Demonstrate and practice a functional assessment of the hip and lower extremities musculature.
8. Demonstrate and practice the protocol addressing the hip musculature (including the fascias);
9. Demonstrate and practice the protocol addressing the six deep lateral rotators musculature (including the fascias);
10. Demonstrate and practice the protocol addressing the lower extremities musculature (including the fascias);
11. Demonstrate and practice the pelvic stabilization protocol;
12. Explain the importance of viscerosomatic reflexes in the perpetuation of myofascial pain;
13. Demonstrate and practice the different active isolated stretching exercises for the pelvis, low back and lower extremities;
14. Present recommended corrective exercises for the pelvis and lower extremities conditions.