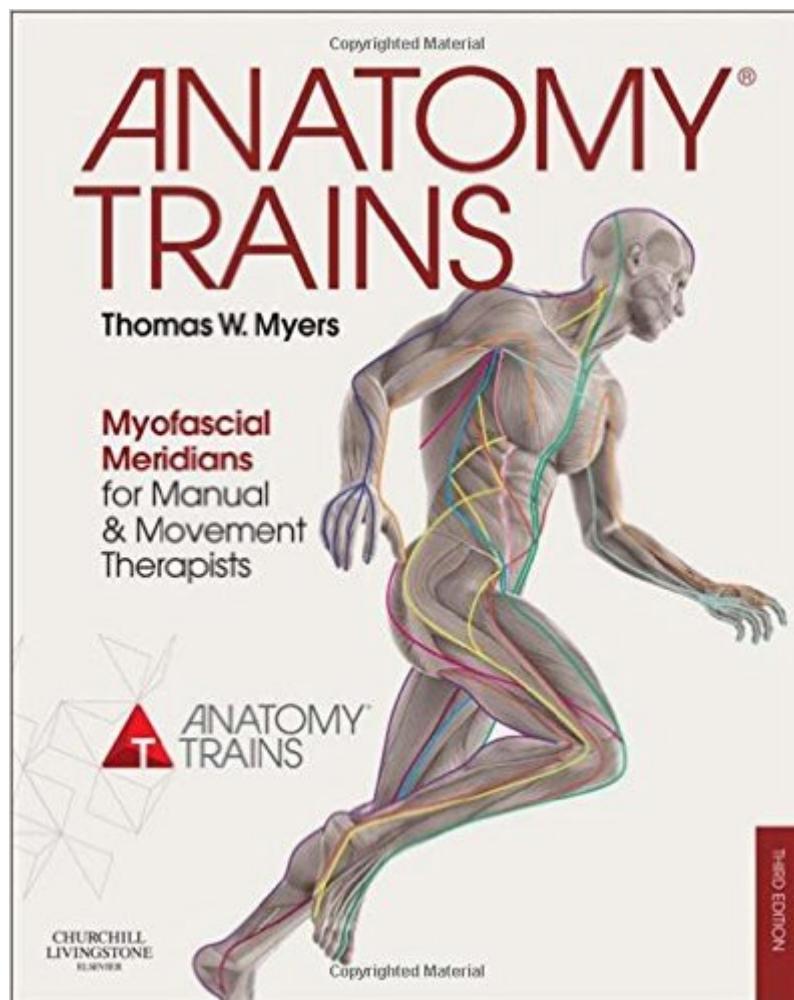


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Anatomy Trains: Myofascial Meridians For Manual And Movement Therapists, 3e



Synopsis

The new edition of this hugely successful book continues to present a unique understanding of the role of fascia in healthy movement and postural distortion which is of vital importance to bodyworkers and movement therapists worldwide. Fully updated throughout and now with accompanying website (www.myersmyofascialmeridians.com), Anatomy Trains: Myofascial Meridians for Manual and Movement Therapists will be ideal for all those professionals who have an interest in human movement: massage therapists, structural integration practitioners, craniosacral therapists, yoga teachers, osteopaths, manual therapists, physiotherapists, athletic trainers, personal trainers, dance and movement teachers, chiropractors and acupuncturists. "There is a clinical relevance to this book that could change the thinking of most physiotherapists and encourage a more "whole body" approach to therapy." Reviewed by: Sam Blanchard, Head of Academy Physiotherapy, Brighton & Hove Albion Football club. Date: Aug 2014 Provides a revolutionary approach to the study of human anatomy which has been shown to improve the outcomes of physical therapies traditionally used to manage pain and other musculoskeletal disorders. Describes a theory which is applicable to all common types of movement, posture analysis and physical treatment modalities. Layout designed to allow the reader to gather the concept quickly or gain a more detailed understanding of any given area according to need. Design icons direct readers to their own specialist areas of interest, e.g. manual therapy, movement therapy, visual assessment, kinaesthetic education or supplementary video material. Appendices discuss the relevance of the Anatomy Trains concept to the work of Dr Louis Schultz (Meridians of Latitude), Ada Rolf (Structural Integration) and the practice of Oriental Medicine. Accompanying website (www.myersmyofascialmeridians.com) presents multi-media exploration of the concepts described in the book - film clips from Kinesis DVDs, computer graphic representations of the Anatomy Trains, supplementary dissection photographs and video clips, webinars, and some extra client photos for visual assessment practice. Text updated in relation to the most up-to-date research originally published at the International Fascia Research Congress, Vancouver, 2012. Includes the latest evidence for the scientific basis of common clinical findings, including preliminary evidence from human fascial dissections. Explores the role of fascia as our largest sensory organ. Contains updates arising out of continual teaching and practice "for example, the role of the fascia and its interconnectivity in the generation of pain and/or force transmission." New chapter discusses the role of Anatomy Trains theory in the analysis of gait. Video clips on an associated website (www.myersmyofascialmeridians.com) present examples of the concepts explored in the book. Podcasts on the website explore the therapeutic techniques involved.

Website addresses and references fully updated throughout

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Customer Reviews

Tom Myers in his two books presents an appealing if not compelling theory on fascial anatomy and its potential effects on movement and posture across broad planes. The theory itself is not new, with other Rolfers and osteopaths referring to the vast "network" of fascia throughout the body being the integrator of posture and movement. At least one other well known fascial bodywork author has equated the fascial network to a sort of sweater made of fascial yarn in which snags can form and propagate tension across long distances in the body. The book is wonderfully done, and the theory is well presented with ample and useful anatomical illustrations of each anatomy train. There is a lot to learn from here, and as always, Tom Myers' writing is thought provoking, intelligent and easy to read. This is not one of those books that tantalizes you with tidbits and then says "but to really learn it you need to take my classes." Myer's doesn't hold back in his books. I would recommend this book to anyone interested in anatomy from a movement or manual medicine perspective. That being said I do have some reservations about the Anatomy Trains concept and the phenomenon of whole scale acceptance that surrounds the theory. If you want a great book that explains the Anatomy Trains concept clearly and deeply enough to take to the clinic or massage table, then definitely buy this book. Read no further, it is worth it. IF, on the other hand, you are reading reviews wondering what the Anatomy Trains phenomenon is all about, then read on. What is troubling is not the theory presented in this book, but the almost ubiquitous acceptance in massage and

chiropractic circles as proven fact. One repeatedly reads reviews calling this book "essential" and referring to other theories on fascia as "outdated" or "misguided." I believe this speaks to the elegant and intuitive nature of the Anatomy Trains concept and the way it is presented, rather than speaking to its veracity. In fact, the most basic elements that would make this a relevant clinical tool seem to be completely missing from the scientific literature. I say this not as a skeptic of manual medicine. I myself trained with Tom Myers 20 years ago, trained and practice as a practitioner of structural integration (Rolfing) and use manual medicine in my veterinary practice. I've had anatomy instructors in Rolfing training, in pre-medicine in college, and in both chiropractic and veterinary college, and I can say Tom Myers is as good as they come in making anatomy relevant to clinical treatment. I think he is a visionary in stepping back to look at functional anatomy from a whole body perspective. While there has been a great deal of basic scientific work done on the microscopic structure and chemistry of fascia, the work has yet to be done to verify what Rolfers have always proposed: 1) that restriction in a small area of fascia can be propagated across long distances and across firm attachment points to cause global movement dysfunction and 2) that deep manual intervention is actually able to stretch or "free" fascial restrictions deep in the tissues. Over the years I have seen some prominent Rolfing authors back away from these theories after participating in actual anatomical dissections. I myself was taught that I could stretch the quadratus lumborum fascia with my elbow, yet even a cursory look in dissection at the depth and overlying muscle would lead one to doubt the possibility of achieving that outcome. I was also taught that I could "effect" the TFL and the very tough fibrous fascial attachments around the hip joint (think lateral line here) with manual intervention. Having actually held these tissues between my fingers, I have to doubt the possibility. In fact, given the strength and organization of those tissues and the forces they must withstand, any gross change in them whether manual or surgical would amount to tissue damage and joint capsule injury and would require substantial healing. While the Anatomy Trains concept is an excellent theory that, if true, would be a wonderful guide to strategy in manual therapies, there are other competing theories that make as much sense and may have a better scientific underpinning. One such theory is that deep fascial intervention, as a secondary byproduct, causes mast cell degranulation in superficial tissues and that the released histamine granules cause extravasation of intravascular fluid into the tissues which "hydrates" those tissues, bringing about better sliding between fascial planes. My Rolfing teachers often commented on this feeling of "tissue hydration" underneath their fingers as they worked. A German medical approach to fascial manipulation is based on this phenomenon. The redness you see on the skin after fascial treatment and acupuncture is partially due to this phenomenon of mast cell degranulation. Moshe Feldenkrais,

one of Tom's teachers, repeatedly showed that supposed "physical restrictions" in the body were actually habitual parasitic muscle tensions that could be eliminated simply through a few minutes of low amplitude client-directed movements to bring awareness to those parasitic actions. Joanne Elphinston in her excellent text *Stability, Sports and Performance Movement* takes us critically through many of the stereotypical aberrant movement patterns we in the fascial world have always credited to fascial "restriction." She shows how these are often related to and corrected by addressing weakness in stabilization strength and stabilization strategies. She also shows how weakness in stabilization in one area of the body can demand compensatory and inefficient movement patterns elsewhere in the body. Like fascia, movement strategies are also global whole body phenomenon, and weakness in one area can result in visible movement compensation across joints distant from the weakness. Not only are these compensation strategies clearly visible, but being inefficient, often lead to pathology and injury, again distant from the underlying problem. Without fascial work these problems can be reversed through skill and strength acquisition. Lastly, where physical restriction and tension are actually palpable and measurable, current scientific research seems to implicate vascular, neural and local chemical mediators all playing an intertwined role in initiating, sustaining and propagating such restrictions. Fascial adhesion may be an end point, but to what extent and how far reaching from the initial insult its effects can travel are still unknown. The manual medicine and massage world has always struggled to get itself accepted in the mainstream world of medical treatment modalities. We have often stood by the roadside watching the parade of medicine and patted ourselves on the back for being visionaries and 20 years ahead of our time. We compliment ourselves for having already accepted what "they" have yet to discover. However this is no excuse for not recognizing the difference between fact and theory. This is why I see it so troubling that the Anatomy Trains concept has become so pervasively accepted as fact, yet the most basic premises, 1) that gross fascial strain can be transmitted physically across chains of firm anchor points and 2) that deep manual intervention can stretch or "release" fascia *in vivo*, remain completely unproven theories. I hope Tom Myers continues to use his unique gifts to develop this and other theories that really feed the imagination. However I wish that the massage therapy and chiropractic worlds would embrace critical thinking rather than merely embracing every new enticing theory as fact simply because it has a certain intuitive appeal. Our clients invest a great deal in time, effort, hope and money when they come to us. We owe it to them to separate fact from theory, and to not sell them the latter as the former. As it is, the Anatomy Trains concept is an exciting theory, but it is as yet only a theory, not an essential revolutionary truth in manual medicine, as many claim.

This is another one of those must have books on your reference bookshelf if you deal with anything MSK. If you are a chiropractor, physical therapist, manual therapist, osteopathic physician, medical physician, athletic trainer, or personal trainer then you need to read this book. I find it amazing how many post-graduate education courses cite this as a source for their work or a recommendation as to its use in your practice in order for you to "sharpen the saw". As a Sports Chiropractor I find myself going back to this reference frequently to explain to patients what is going on as well as using the chains as my guidelines for taking an athlete for performance.

Fascia (connective tissue in our bodies) has played a significant role in the way we move. Thomas W. Myers explores human movement and fascia in relation to health professionals, dancers, and athletes in Anatomy Trains: Myofascial Meridians for Manual and Movement Therapists. He explores "our largest sensory organ" in a way that laymen will understand clearly. Readers of Myers' text have described it as "revolutionary" in its approach to physical therapy. It certainly isn't the first time these ideas have been put to print, but it's certainly good information to propagate. My interest in the topic led me to *Human Movement Potential: Its Ideokinetic Facilitation*, which was first published in 1974 by Lulu Sweigard who was an authority on posture and movement. Myers' modern book has an easy-to-read layout that gathers all the general ideas and explains them simply. Illustrations are also helpful in demonstrating the breakdown of human anatomy to the cellular level. Topics like gait and fitness are connected in more ways than one. It is Myers' hope that health practitioners and athletes will apply the techniques and treatments in this book as they reconsider the concept of movement defined as a "straight line." Ultimately, Myers breaks down the traditional notions of what makes a body, in order to inspire new generations who will think about body movement strategies for a better future. This book will fit well on any one's shelf related to movement. This includes massage therapists, yoga instructors, osteopaths, and even those who train in athletics and dancing.

I was disappointed that I have to log into a website and only get video of some of the techniques. To see all of the techniques, I have to purchase additional videos. Good information but a blatant example of greed and having to pay \$60+ for a book, I would have thought more practical content could have been included.

Great way to re-explore the human anatomy and the kinesiology and physiology behind it. This is a

new way to think about biomechanics in the human body, although it is more straight-forward than it may initially appear. Myers does a great job of explaining the information and there are myriads of pictures (some photographs with overlaying design, some artwork) to help explain information as well. I highly recommend for anyone who will interact with humans in a healthcare field (athletic training, physical therapy, strength and conditioning specialist, exercise physiologist, etc.).

As I got into this groundbreaking explanation of how the body's muscular system is all tied together, it was a lightbulb moment that pulled together all of what I had learned about the human body and how postural distortions develop. I now have a whole new insight and analytical clinical eye that I was missing in all my years of practice. This information is now helping me to quickly get to the root cause of a patient's complaints and dysfunction and leave old, misdirected theories behind. Thank you for your brilliant work, Mr. Myers!

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