Deep pressure techniques are based on the 1980’s Travell and Simons book documenting what would later be termed myofascial trigger points. We were instructed to use direct pressure and/or stretching to ‘mash’ tissue into submission. My patients felt better after treatment, but after their tissue recovered, they returned the next appointment with little gains in ROM or decrease in symptoms. This treatment also caused patients already in pain to experience even more pain. Feeling frustrated, I went looking for something more effective.

In 1985, I began Muscle Energy Technique (MET) and Strain/Counterstrain classes with Dr. Loren Rex, DO. He explained the physiology behind the involuntary muscle contraction causing my patient’s symptoms. I also learned that movement and/or exercise overrides involuntary contraction of the muscles but, at rest, the muscle strands will once again involuntarily contract. This is why patients feel tighter in the morning or after a long period of inactivity. The muscle will also test weak because strands are ‘stuck’ in partial contraction.

Over the last 20 years, I have developed a systematic protocol which I call Structural Relief Therapy (SRT). SRT is a tool that gently stops involuntary muscle contraction. There is no rubbing, deep pressure, or pulling and it’s nearly painless for the patient. Basic principles of SRT are:

1) **Assess** the tight tissue gently.
2) **Find** the SRT Tender Point (*not* myofascial trigger point).
3) **Position** the body passively to eliminate the pain of the SRT Tender Point.
4) **Hold** the position for 90 to 120 seconds.
5) **Return** the body to neutral slowly.
6) **Reassess** the tissue.

We have used SRT successfully on paraplegics. Instead of finding an SRT Tender Point, we use the muscle contraction to guide us to the shortened position, hold it for 90 seconds, and return to neutral. The nurses for these patients report their spasms stop and the patients feel more at ease. We think SRT works because it reprograms the jammed signals of the muscles to and from the brain via the autonomic nervous system. Dr. Leon Chaitow says, “Without research, we can only speculate on how these techniques work, but we can be content that they are effective.”

Muscles develop involuntary contraction from accidents, sleeping, and/or prolonged postures commonly combined with an emotional event. This involuntary contraction leads to compensation patterns of movement which limits ROM and eventually causes pain and/or discomfort. It’s like having a rock in your shoe and changing your step to avoid putting pressure on the rock.

Involuntary muscle contraction also causes the antagonist muscles to be overstretched which creates inflammation and/or pain. An example is patients with sciatic pain. Gently squish through the gluteus maximus with the full palm of your hand and compare the piriformis side to side. Notice that the tight, contracted piriformis is commonly on the opposite side to where the patient reports their symptoms. It is usually the overstretched piriformis rubbing against the sciatic nerve that creates symptoms.
Using SRT, you will be treating the most recent involuntary muscle contraction, so a series of treatments is usually necessary and appropriate for patients with complex and chronic symptoms. We do not impose a technique on the patient, but rather let their body ‘be the boss’ and communicate with us via the SRT Tender Points into the passive positions it needs. SRT integrates easily into your practice and is not intended to replace other forms of treatment. You can also teach your patients SRT positions for self-treatment between appointments.

SRT classes are 6 CE hours per day because the brain can only absorb so much at a time. We make learning fun at an affordable cost with a payment plan if needed. Participants receive a manual with text, illustrations and color photos to help recreate what you learn. Patients and students alike keep telling me, “It’s like magic, my pain is gone!” SRT is an essential tool that every bodyworker needs.

Contact Taya Countryman, LMP at 425-422-3449, and find out more at www.StructuralReliefTherapy.com