

Somatic Patterning
Supplemental Instructor Materials
Chapter 12: Integrative Manual Therapies

Note: Numbered points in the chapter's reading list, objectives, and summary are correlated and focus on topics that I think will be most relevant for massage students.

In brackets after suggested readings and objectives you will find an occasional reference from a subsequent chapter that expands on material introduced in this chapter. Please contact your education director for answers to the chapter questions.

Chapter 12 Suggested Readings

1. Standard Terms to Describe Movement, pp. 249-250, [see also "flexion" and "extension" in *Normal Spinal Alignment*, p. 41]
2. The Spine, The Back of the Spine, The Front of the Spine, pp. 250-254
3. Integrating Spinal Movement through Arcing, pp. 254-255

Chapter 12 Objectives

1. Describe each of basic premises of structural integration: the fascial network and tensegrity system, myofascial meridians, and the role of gravity in body posture and the Rolf line.
2. List and briefly describe each of the ten steps in Rolf's structural integration recipe.
3. Identify the objectives and benefits of Rolfing Movement and name four Rolfing movement exercises.
4. Describe and contrast symmetrical patterning exercises with asymmetrical patterning exercises found in Aston Patterning .
5. Describe cranial motion and summarize the mechanism that drive it.
6. Describe the physical and energetic attributes unwinding process and how it applies to hands-on work.
7. Define proprioceptive neuromuscular facilitation (PNF).
8. Describe each of the four PNF movement patterns.
9. Name and define six benefit of performing the PNF patterns.
10. Identify three planes of movement in each of the four PNF movement patterns, two for the arms and two for the legs.
11. Identify six of the original elements in Kabat's PNF method.
12. Identify four variables
13. Describe how manual therapist can integrate resisted movement techniques with the PNF patterns in the arms and the legs.
14. Define spinal instability and briefly describe how it affects the joint structure, muscle function, and neuromuscular mechanisms.
15. Describe and contrast the role of the transversus abdominis in low back pain and lumbar/sacroiliac joint stabilization.

Chapter 12 Summary

1. The integrative manual therapies described in this chapter are first generation therapies that combine some sort of movement education with hands-on modalities and introduced ground-breaking techniques.
2. Structural Integration, better known as Rolfing, was originally developed by biochemist Ida P. Rolf (1896-1979) as a 10-session method for systematically restoring verticality and motion to the body using a combination of myofascial release along movement pathways (also known as "Rolf lines") coupled with movement education. Rolf was one of the first to pin the myofascia in its restriction, then ask the client to move in a way that stretches the restriction. She also formulated a holistic paradigm and recipe for bodywork and emphasized the psychological roots of neuromuscular disorganization.
3. Rolf and her colleagues develop a series of simple exercises called Rolfing Movement Education for practitioners to teach their clients during bodywork sessions. Rolfing Movement is designed to improve posture and neuromuscular coordination and includes exercises such as the pelvic tilt, arm rotations, and sagittal tracking exercises for the lower limb.
4. Aston Patterning was developed by one of the original of founders of Rolfing Movement, Judith Aston, who broke away from Rolf's focus on symmetry to address spiral-shaped motion in the core of the , combines hands-on techniques and movement exercises that follows spiral-shaped patterns in the core of the body.
5. Cranialsacral therapy

Chapter 12 Questions

*Note: Make sure to pay attention to the italics in some of the questions because they ask you to identify the statement that **does not** refer or is **not true** about the topic of the question.*

1. The front of the spine has disks
 - a. shock.
 - b. muscles.
 - c. segment.
 - d. three planes.
2. Which of the following statements *does not* describe the patterning exercise called arcing?
 - a. It is spinal flexion and extension motion that initiates at either the head or the tail.
 - b. It requires spinal movement to progressively mobilize each vertebral segment.
 - c. It organizes motion through each vertebral segment in a linear sequence.
 - d. It is the most efficient when it initiates somewhere in the middle of spinal curves.
3. Which of the following statements is *not true* about the shoulder and hips.
 - a. They are ball-and-socket joints that freely move in all three planes

- b. They both attach to the axial skeleton via highly mobile girdles.
 - c. They are called proximal joints because they are closest to the trunk.
 - d. One is more mobile and the other is more stable for weight support.
4. The statements that *does not* describe a functions of the pelvic girdle is
- a. to transfer forces between the spine and lower limbs.
 - b. to allow enough mobility in legs for locomotion.
 - c. to be stable enough to support the body's weight.
 - d. to be flexible enough to allow prehensile articulations in the toes.
5. The incredible dexterity and mobility of the upper limbs comes from
- a. the two-directional range of motion in the ellipsoid joints of the wrists.
 - b. the ability of the forearms to twist in supination and pronation.
 - c. the combined circumduction of the shoulders, elbows, wrists, and fingers.
 - d. the range of flexion and extension in all the joints of the arm.
6. The shoulder girdle attaches to the axial skeleton at
- a. the sternoclavicular joints.
 - b. the acromioclavicular joints.
 - c. the scapulothoracic joints.
 - d. the glenoumeral joints.
7. Which of the following statements *does not* describe a function of the pelvis?
- a. It supports and protects the pelvic organs.
 - b. It serves a base of support in a seated posture.
 - c. It contains the articulating sockets of the hip joints.
 - d. It allows greater flexibility than the shoulder girdle.
8. Restrictions in hip mobility will throw off a normal lumbar-pelvic rhythm by
- a. causing compensatory flexibility in the lumbar spine.
 - b. causing compensatory rigidity in the lumbar spine.
 - c. causing compensatory instability in the lumbar spine.
 - d. causing adaptive shortening in the lumbar spine.
9. In an arm movement with a normal scapulohumeral rhythm
- a. The scapula always moves slightly before the shoulder moves.
 - b. The scapula remains stable through a full range of shoulder motion.
 - c. The scapula remains stable until after 90 degrees of arm flexion.
 - d. The degrees of motion in scapula and arm occur in an equal ratio.
10. One way to ensure a full range of motion in the hips while walking is to
- a. roll from the heel to the toes on each step.
 - b. avoid bending the toes as you step forward.
 - c. make sure the heel lands on the ground after the toes.
 - d. make sure the whole foot lands on the ground at the same time.

Chapter 10 Suggested Learning Activities ~~[last section has already been edited, please skip]~~

~~Note: Any exercise titled “Patterning Exercise” can be found in the current edition. Page numbers for these exercises (inserted in parentheses) are included to help instructors utilize activities during lessons that may be based on other segments of the book~~

Patterning Exercise #76: Proprioceptive Skills: Contract, Relax, and Stretch (p. 213)*Objectives:*

- ~~—To develop control over skeletal muscles~~
- ~~—To identify and contrast the sensations of muscle contraction, relaxation, and stretch.~~
- ~~—To practice skills that can be used in client education.~~

Exercise: (10 minutes for each part by yourself, 20 minutes for each partner exchange)

1. Pick any