



I.S.R.M
INSTITUTE OF SPORT
& REMEDIAL MASSAGE

NEWSLETTER

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Contents

Breaking news	2
Editorial	4
Our profession and its future	5
Feature articles	7
Event work	17
Expand your knowledge...	22
Members' offers	27



Breaking news! Breaking news!

ISRM, New Website
From Mel Cash

We now have a new ISRM website. Our web designer Martin Docherty has done a lot of work to redesign it so that it is easier to use and can be downloaded better onto iPhones and iPads, etc.

It is now simpler to edit your contact details for us as well as the details that appear on your therapist's directory entry which the general public can see. It is also now possible to put a link there to your own website.

Important reminder: We must have a valid insurance expiry date on the system otherwise your therapist's directory entry will NOT appear on the list the general public see (if you are insured on the ISRM

Block policy with Balens, your expiry date will be 30th March).

Please follow this procedure to amend your details:

- Log in at www.theism.com and go to 'Your ISRM'.

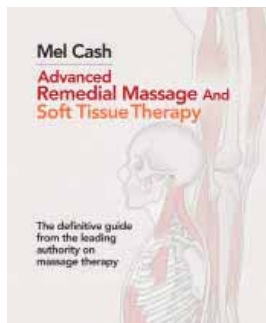
Then go to:

- 'Your details (add/edit)': to edit your contact details and insurance expiry date.
- 'Your therapist's directory entry': to edit the details that the general public can see.



Coming out soon...

Remedial Massage and Soft Tissue Therapy
From Mel Cash



The aim of the therapist is to treat and 'remedy' a client's problem; but to offer a real remedy you must do

more than just relieve pain; you must also understand how the problem came about and how it can be avoided in future.

Advanced Remedial Massage and Soft Tissue Therapy develops a deep understanding of the way the

musculoskeletal system functions and dysfunctions. It also describes a range of advanced treatment techniques within a framework of assessment and rehabilitation. The guidance in this book will enable therapists to work safely and effectively with a very wide range of conditions suffered by people from all walks of life. Illustrated with 200 photographs and 75 diagrams, it offers clear concise text, written by a therapist for the therapist.

This highly informative guide is a must-have both for students and therapists of Remedial Massage, Physiotherapy, Osteopathy and any other form of manual therapy.

Caption competition

'Well I thought the neck MET was going really well, but all of a sudden the head came of...' Please send in your suggestions to editor@theism.com,

thank you.
From the Editor



Seeing Hands Nepal goes from strength to strength

From Mel Cash



Seeing Hands Nepal (SHN) is a small charity that ISRM has been closely involved with now for several years. It trains blind Nepalis to become qualified massage therapists, and has set up smart professional clinics where they can earn a very good living by treating tourists and trekkers. Several of us have travelled there to teach the new students, especially Jo Chatfield and myself who have visited many times.

The first SHN centre is now well established in Pokhara, a very laid-back tourist town alongside a beautiful lake near the spectacular Annapurna mountain range. Tired trekkers flock to the practice for some rest and recovery. The centre is given a very positive review in the Lonely Planet Guide,

so during the two main seasons it operates at full capacity.

When I was there last Xmas (2010), a second centre in Kathmandu had only just opened, and was getting off to a slow start. But it has been a good year, with the therapists there performing a lot of treatments, as well as having a new group of students to train. Besides treating numerous tourists, they are also gaining regular work with expatriates living in Kathmandu, mostly working for aid and charity organisations.

The qualified therapists are now earning a very comfortable living at the two centres – a far cry from their former terrible poverty – which is enabling them to support their

own families. But there is a need to expand and take in more students. There are plans to expand the Kathmandu clinic by extending into the adjacent building, but everything in Nepal takes a lot of time... In Pokhara, the centre is at one end of the long narrow town which runs along the lake, so a second centre at the other end of town is called for.

Half the income from clients is reinvested into the charity to pay for the premises and student training. The present number of treatments achieved means that the project is almost self-funding, but further funds are desperately required to enable the new centre to be opened. So any donations are very welcomed and appreciated.

I will be returning there again this December (2011), in the company of LSSM tutor Stefania D'Addetta. Rob and Sue Ainley, who set up the charity, live in Nepal most of the time now (and are good company), so we should get a lot of work done, as well as enjoy a good time. We will be working at both centres, but in between we will all be taking a few days off over Christmas to visit a game reserve in south western Nepal. So if we don't become Xmas dinner for the tigers (we'll be lucky if we see one!), we will let you know how it turns out.

My special thanks to Nigel Marshall of Marshcouch for donating some couches to the charity.

To find out more about Seeing Hands Nepal see www.seeinghandsnepal.org

NB: Further personal accounts of the SHN project can be found among the Feature Articles later on in this Issue – Ed.



Editorial

From Tanya Ball

Welcome...

A very warm welcome to all readers of this 'bumper' hard copy Issue, and a special welcome to any new members who have joined the ISRM over the past twelve months. We hope that everyone will find this Newsletter both entertaining and informative, as well as a great way to feel a part of a fantastic network of colleagues sharing the same aspiration to provide the highest standard of Remedial Massage in the country.

It has certainly been a busy, productive year for ISRM collectively, with more accredited schools opening in the West Country, further invaluable inputs into the Seeing Hands Nepal (SHN) project, record event work participation, not forgetting... Mel FINALLY completing his new book!

Meanwhile, the process of creating a database of useful reference material, is ongoing. As mentioned in the summer 2011 edition, this will comprise a twofold facility, enabling members to access (a) previous issues of the Newsletter, and (b) individual clinical, educational, or otherwise relevant articles, study reports, etc. on the other. We will of course keep you informed of progress.

In this Issue...

As promised in the 2011 electronic Newsletter editions, you will find reproduced herein any Feature Articles and other relevant contributions, in addition to some excellent new material.

Mel Cash's 'Breaking News':

Mel updates us on the new, more user-friendly ISRM website, as well as on the growth and expansion of the SHN Project.

Our profession and its future:

For the benefit of new ISRM Members in particular, we have re-published general information on our representative voluntary Regulatory Body, CNHC (Complementary & Natural Healthcare Council) and how to join, alongside recent news.

Feature articles:

We are spoilt for choice of inspiring and entertaining stories in this extensive edition! From a 'Never say "never"' unlikely journey to the world of SRM by a recent Graduate, to finding an effective, 'novel' means of inspiring your clients to exercise... From volunteering as a physiotherapy assistant in poverty-stricken Nepal, to earning a living as a SRM therapist amid pristine ski slopes... Not forgetting finding the curiosity to experience the benefits of 'WATSU' movement therapy... There really is 'something for everyone' in this section, so – enjoy!

Event work:

Soak up the true atmosphere of being immersed in onsite SRM, from colourful and humorous reports on key ISRM and other 2011 events, not least the IAAF World Championships.

'Educational' section ('Expand your knowledge, enhance your skills'):

Senior LSSM Tutor Allan Murrell provides the highlight of this section with his remarkable Case Study involving a patient with Idiopathic Scoliosis.

This reflective account concurrently demonstrates the effectiveness of (myo) fascial work, the crucial importance of CPD, and the mutual enrichment dynamic of new learning, resulting clinical reasoning and application, in

turn calling for further knowledge. May this excellent report be an inspiration to us all.

Speaking of CPD, readers can also select from a wide range of 2012 courses and workshops for variable levels in London, Oxford, Southampton, and Basingstoke. There are also a number of Kinesis UK courses listed for those with a specific interest in 'fascia'.

My grateful thanks, as always, to all who have contributed to this and/or previous Issues, and my renewed appeal to all readers please, please to send me your contributions for the spring 2012 edition. No story is too small or trivial – who knows how much you could inspire, inform, or just lighten up someone else by sharing your knowledge or experience.

Finally, may I wish every reader and their loved ones a joyful, peaceful Christmas, and the best of health, happiness, and fulfilment in 2012 and beyond.

Please keep sending your newsletter contributions to me at:
editor@theisrm.com

Please note that the submission deadline for the **Spring 2012 Issue is Wednesday 29th February 2012**, thank you.

Our profession and its future

What is the Complementary and Natural Healthcare Council (CNHC) and what are the benefits of CNHC registration?

From Hazel Russo

The CNHC is the UK regulator for complementary healthcare which was set up with Government support.

The Complementary and Natural Healthcare Council (CNHC) opened its register in January 2009. Its key function is to enhance public protection by setting nationally agreed standards for registration. It follows over ten years of work by many professional associations to introduce regulation to complementary healthcare in the UK. At the time of writing the CNHC registers practitioners from thirteen disciplines¹ with more due to come onto the register during 2012.

Benefits of CNHC registration

There are a wide range of benefits for practitioners who register with the CNHC.

- **Use of the CNHC Quality Mark:**

Practitioners who register with the CNHC are able to use the CNHC Quality Mark on their websites and in publicity materials.

- PR support: CNHC registered practitioners have been gaining a wide range of local coverage by using PR support provided by CNHC. Practitioners from around the UK have been featured in local newspapers, magazines and local radio with many seeing an increase in enquiries and clients as a result.
- Entry on national register: CNHC registered practitioners appear on CNHC's national register which received over 40,000 searches in 2011.
- Employment advantages: An increasing range of bodies such as employers and insurers are using CNHC registration and the CNHC quality mark as an independent validation of standards. CNHC registration is increasingly becoming a requirement for referrals and employment.
- CNHC and professional associations working together: The CNHC and professional associations are working together to raise and maintain standards of practice and it is increasingly seen as good practice to sign up to both.

CNHC registration and the CNHC quality mark demonstrate to the public and others that you meet national standards of practice. This builds confidence in you, your practice and in complementary healthcare.

For further information

The ISRM has been approved by the CNHC to verify applications to register and encourages members to register in order to gain the quality mark. All full ISRM members meet the requirements for registration for Massage Therapy and Sports & Remedial Therapy. Registration costs £45 for a single discipline (an additional £10 to register for both) and for annual renewal. Any member wishing to register with the CNHC should contact the ISRM office or download the 'Request to register' form on the ISRM website. Details of the process are set out on the CNHC's website. For further information about the CNHC go to www.cnhc.org.uk or call 020 3178 2199.

¹ Aromatherapy, Alexander Technique Teaching, Bowen Therapy, Healing, Hypnotherapy, Massage Therapy, Microsystems Acupuncture, Naturopathy, Nutritional Therapy, Reflexology, Shiatsu, Sports & Remedial Therapy and Yoga Therapy.



Complementary & Natural
Healthcare Council

CNHC News

November 2011

From Hazel Russo

CNHC registration in demand

CNHC is finding that increasing numbers of NHS commissioners and employers are requiring their complementary healthcare practitioners to be CNHC registered to enhance public safety.

Jan Wilkinson, Complementary Therapies Co-ordinator for Guys and St Thomas's NHS Foundation Trust said: 'CNHC registration is essential for any complementary practitioners

who wish to work for us. This is in line with guidance from the National Cancer Action Team and demonstrates our commitment to meeting national occupational standards.'

Similarly, Jeannie Dyer, Clinical Lead for Complementary Therapies at the Royal Marsden's Markus Rehabilitation Centre commented: 'We added CNHC registration to the specification for therapists working at the Marsden last year. Working as we do

with allied health professionals who are of course members of the Health Professions Council (HPC), CNHC registration adds to our credibility.'

Lyn Lamont, Complementary Therapies Co-ordinator for the Cancer Centre, Belfast Health and Social Care Trust agrees. Lyn said the Trust currently employs a team of eight CNHC registered practitioners within cancer care and is due to recruit a ninth: 'As

a team we aim to provide evidence based high quality care and ensure patient safety. It's important for us to model best practice to the complementary therapy community and also within the health and social care setting. CNHC registration ensures that the team comply with Trust policy on recruitment of therapists and also the National Cancer Peer Review Programme, Manual for Cancer Services 2008 Complementary Therapy (Safeguarding Practice) Measures.'

Emma George, who was recently employed by Guy's & St Thomas' as an aromatherapist and reflexologist, also sees CNHC registration as a positive thing: 'It helps the complementary therapy profession to progress and develop. It also helps complementary therapies become more integrated with conventional care which is particularly good for practitioners like me who want to work in the health service.'

MyCNHC Resources - New for Registered Practitioners!

CNHC registered practitioners can now download a range of useful documents by logging into **MyCNHC** and clicking on the 'Resources' option.

The documents available include:

- The latest PR Tips for registrants who want to gain media coverage.
- CNHC policy documents, such as the CPD policy and template CPD log to complete.
- CNHC Quality Mark and the terms of use.

CNHC registrants may login to **MyCNHC** at the top right hand corner of the CNHC website.

The username is the email address which was used to register with the CNHC. If registrants

have forgotten their password please contact CNHC at: info@cnhc.org.uk or telephone: 020 3178 2199.

CNHC seminar at camexpo

A reminder to come and visit the CNHC team at this year's camexpo on Saturday 22nd and Sunday 23rd October at Earl's Court in London. CNHC will be at Stand 2536. There is also an opportunity to hear CNHC's Chair (Maggy Wallace) and Chief Executive (Margaret Coats) speak at the CNHC seminar on Saturday 22nd October from 1.45pm – 2.30pm.

For further information about the CNHC and how to register call 020 3178 2199, email info@cnhc.org.uk or visit www.cnhc.org.uk

Groupon or Groupoff?

From Sophia Florimo



A few weeks ago I decided to join Groupon. I had heard so much about the ridiculously cheap deals they offered that I simply had to join. At 2.37a.m. I was offered a 40 inch plasma TV screen and three sports bras for £300 (all inclusive). Great! Shopping done! I was quite excited about the daily deals and the fact that I could get all these bargains locally.

One sunny morning my excitement was challenged when I saw that a chiropractic clinic offered a FREE consultation, followed by a chiropractic treatment and an X-ray for just £15... but you had to make a further appointment to return for your results and be given a maintenance plan. Can this be

right? It reminded me of the dubious Nectar deal a few years ago, where you bought a bumper packet of Walkers crisps... and got a Sports Massage for free.

Groupon recently offered a Sports Massage for £12, which clearly is a fantastic offer. However, if newly qualified or established therapists feel that this is an opening to new patients, then please think again. Surely people will come back to you because you are good – not because you are cheap. If Groupon is becoming a way of underselling our service, then patients will wait for the next deal. As potential clients begin to realise that it is possible to have a treatment for a mere £12, they will come to view the £50 session as a rip-off... so we will effectively need to 'educate' them that £40-£60 is in fact the going rate. We could then be left with a patient who has had a session for £12, and may never come back again. So – do we really want to associate ourselves with this kind of marketing?

Sports and Remedial Therapies Council (SRTC): Working with elite athletes – (reminder)

SRTC and the British Athletes Commission (BAC)

ISRM is a member of the Sports and Remedial Therapies Council (SRTC), the lead body for sports therapy, which in 2010 became an official benefit provider to the British Athletes Commission (BAC), making soft tissue therapy available to their athletes. The BAC recognises how vitally important it is that athletes can access sports therapy treatment to help them recover from training and prevent injury, and is equally concerned that these athletes only receive the best quality of treatment available.

The BAC represents over 3,000 Olympic, Paralympic, and World Class funded elite athletes. Their membership includes those expected to win medals; those recognised as development athletes; and those in the Talented Athletes Sponsorship Scheme (TASS), who are college and university students showing potential but receiving little to no funding. The BAC also represents more than 1,000 retired athletes.

Not yet involved in the BAC scheme? Do you meet the criteria?

ISRM-accredited therapists who wish to participate in the BAC scheme must meet the following criteria:

Be registered with the CNHC, the official voluntary regulator for sports and remedial therapy and massage therapies

Hold a minimum of a £3m combined Medical Malpractice, Public and Products Liability insurance

Have a minimum of three years' practical sports therapy experience and/or soft tissue therapy experience in dealing with sports injuries

Hold full professional membership of the ISRM

Agree to charge BAC athletes a single treatment fee of £20*

BAC athletes can access the database of eligible therapists held on the SRTC

website and are required to show their BAC membership card to their chosen therapist to be eligible to receive the £20 single treatment fee.

If you meet the above criteria, you can apply to register on the BAC list through the ISRM website (see 'Your ISRM').

**£20 maximum fee per treatment, which includes a consultation as part of the first treatment.*

Feature

A 'VSO' experience with a difference – LSSM Graduate and Physiotherapy Student Hazel Ginnever shares her experience in Nepal

From Hazel Ginnever

'If the language barrier was difficult to overcome during physiotherapy assessments, we were definitely speaking the same language when it came to play time! Many of these children had no toys at home, so their stint in hospital was a chance for them to enjoy some fun and forget about their illness. For this reason, I regarded playing with, and entertaining the children as one of my most important, and personally fulfilling roles during my stay.'

'They had only had three weeks' massage experience, so Steph and I volunteered as bodies for them to practice on. They were so professional and in tune with their touch that we both instantly felt at ease. (...) Two of my friends and fellow-physiotherapy volunteers from the UK, were also able to visit the Pokhara clinic and receive massages from fully qualified therapists. They both declared that it was the best massage they had ever had, so I think we would all agree that on any trip to Nepal, a visit to SHN is definitely a must!'



On 12th August 2011, I embarked on a journey to Nepal to volunteer as a physiotherapy assistant at the Hospital and Rehabilitation Centre for Disabled Children (HRDC) in Banepa, Nepal. On a previous trip to that country in 2008, to trek the Dhaulagiri circuit and conduct some research into altitude sickness as part of a Sport Science Degree, I had been overwhelmed by the generosity, friendliness, and openness of the Nepalese people – specially when they had

so little themselves. They welcomed me to their country with such great kindness that it made me want to do something to help them in return. As a graduate of the London School of Sport Massage (LSSM) and a student physiotherapist at Cardiff University, I decided to use my skills by volunteering at HRDC for a month. HRDC is a NGO-funded (Non-Government Organisation) orthopaedic children's hospital in Nepal, which provides treatment for some of the

most disadvantaged children with congenital or acquired disability.

When I arrived at HRDC, I was greeted by my friendly host father and was given a tour of the hospital. The children were so excited to see us and everywhere we turned, we were greeted with 'namaste', a little bow made with hands pressed together that is a traditional salutation and sign of respect. It was a pleasant surprise to see that the Physiotherapy Department was fairly well equipped for orthopaedic rehabilitation. The cases were very interesting, and ones that I am unlikely to encounter in the UK, such as children with poliomyelitis or clubfoot, which had not been treated in infancy. The physiotherapy techniques used were very similar to those in the UK, and much of the interventions consisted in mobilising joints and strengthening muscles after trauma or surgery. The physiotherapists were also greatly involved in conducting limb length, girth and joint range of motion measurements in preparation for surgery.

I was pleased to see that the physiotherapists included massage as part of their treatment plans. It was used primarily as a means of softening and improving the condition of the skin prior to surgery or to applying a Ponseti casting. Ponseti casting is a non-invasive method of correcting deformities such as clubfoot. The child goes through a series of sessions, with each cast providing a better correction. This is predominantly used at infant stage to correct the deformity and avoid surgery later on, but it can also help prepare the foot for surgery in older children. Softening the skin with massage both helps realign the foot into the corrected position, and prevents tight skin drawing the foot back into its deformity. Patients



who had incurred severe burn contractures were also prescribed professional oil massage to facilitate surgical improvement, while parents were also taught oil massage techniques so that they could maintain home treatment until their child returned for surgery.

As a student, much of my time at HRDC was spent observing the other physiotherapists. However I was able to help with Ponseti casting on a number of occasions, and was also assigned some of the mobilisation work and strengthening exercises for children with fractures. If the language barrier was difficult to overcome during physiotherapy assessments, we were definitely speaking the same language when it came to play time! Many of these children had no toys at home, so their stint in hospital was a chance for them to enjoy some fun and forget about their illness. For this reason, I regarded playing with, and entertaining the children as one of my most important, and personally fulfilling roles during my stay.

Towards the end of my placement at HRDC, I was able to take some time off and alongside Stephanie Louie, a volunteer from the USA,

was fortunate enough to visit the Seeing Hands Nepal (SHN) Clinic in Kathmandu. SHN is a UK-registered charity set up to provide training and employment opportunities in massage therapy for young blind Nepalese people. We received a very warm welcome from Sue Ainley, who explained the history of the charity and gave us a tour of the therapy rooms. At the time of our visit, there were three new students, Santosh, Sagar, and Deepak, who had only recently commenced their training. They had only had three weeks' massage experience, so Steph and I volunteered as bodies for them to practice on. They were so professional and in tune with their touch that we both instantly felt at ease. They had also just begun learning how to locate tension within the muscles, which they did a great job of identifying and relieving. Two of my friends and fellow-physiotherapy volunteers from the UK, were also able to visit the Pokhara clinic and receive massages from fully qualified therapists. They both declared that it was the best massage they had ever had, so I think we would all agree that on any trip to Nepal, a visit to SHN is definitely a must! Therapists interested in volunteering for or donating to SHN can find out more information on their website: www.seeinghandsnepal.org

Some ISRM therapists have chosen to give regular support (It costs £35 a month to provide a scholarship for a blind student – roughly equivalent to one treatment fee) and a number of trainee therapists are also collecting donations in return for treatments (since they cannot charge for their services until they are qualified). If anyone reading this is interested in supporting in this way, please get in touch. Thank you.



'Never say "never"' – or how to transmute from 'squeamish' business consultant to buzzing SRM Graduate in 18 months!

From Lynne Roscrow

'I was a like a bunny in headlights when it came to paring up, taking off clothing, and practising the first effleurage strokes on the leg. Seriously, I was rooted to the spot. Anyway, with encouragement I put my hands on my first female classmate... and I was a changed person. I loved it!'



Hello, my name is Lynne Roscrow, and I became a qualified massage therapist in December 2010, after studying for a Diploma in Swedish Massage at the TSL Holistic Centre in Loughborough.

Prior to that, I had worked in various careers, including managing a record shop (yes, records!), working for a science and education NGO (Non-Government Organisation), qualifying and working in Human Resources, and finally offering consultancy advice to government businesses on carbon efficiency. As a mature student in my thirties, I had also managed to achieve a 2:1 BSc (Hons) in Wildlife Management and a MA ('with Distinction' this time!) in sustainable development – no mean feat for someone who is not an academic. Not to mention numerous visits to interesting parts of the world, mainly as a result of working with the NGO Earthwatch.

So, as you can see, I hadn't really settled on what my 'thing' was to be in life. I was being a bit of a butterfly, or a Jack of all trades, master of none.

What changed? How did I find myself on the SRM BTEC Level 5 course with Tanya Milne at the ASCT in Loughborough?

I had moved from Oxfordshire to Leicestershire with my partner Paul in August 2010, so that he didn't have to endure a hideous daily commute. I was ready for a career change by that point anyway, which coincided with my having time on my hands and a touch of financial 'comfort'.

Over many years I had sought out complementary therapies to help set my physical and emotional health back on track, and a number of people – friends, therapists, and those who were both! – had suggested that I would make a good therapist. For about a year or so, I had been searching for inspiration as to which complementary therapy to choose to train in. One thing I did know was that hands-on body work was not for me – too squeamish.

Ok. So, again the question, why am I a now a massage therapist??

The only therapy course I could find that was running locally was massage. And it was a full-on Diploma, not a three-hour taster session that I was looking for. So I signed up, paid my money, and turned up to class. I was a like a bunny in headlights when it came to paring up, taking off clothing, and practising the first effleurage strokes on the leg. Seriously, I was rooted to the spot. Anyway, with encouragement I put my hands on my first female classmate... and I was a changed person. I loved it!

But it wasn't long before I felt that... Swedish massage was not enough. I found myself feeling 'things', in backs mainly, and I couldn't help but work on those lumps and bumps and knots of tissue. I wanted to know more. I wanted to know what I was working on in great detail and more importantly, how to relieve the recipient's pain and discomfort.

So I conducted an internet search for sports massage courses, which brought the ISRM to my attention. From there, I discovered that there was an ISRM-accredited school near me... there was no time to waste: I called up Tanya at the ASCT, chatted for a while, went and met her, demonstrated my skills (on Paul – he's been a brilliant body!), signed up and paid my money for the Level 5 BTEC course. This time I knew exactly what I was letting myself in for!

In an incredibly short space of time, I have developed a skill that just over a year ago I had no idea I had. Or would even like, never mind love. At the time of writing, I am due to sit my final exam in two days... what will be next after qualifying? Well, building my business for one – my client base is somewhat small, and the semi-professional rugby team I work for free of charge haven't yet come to me for private, fee-paying sessions (cheapskates). Yet secondly, there is so much fascinating stuff in the world of manual therapy and massage that I will definitely be looking for the next learning route. After a short break away by the coast first, that is...

STOP PRESS... I passed!

Feature

Underwater Massage Ballet

Exploring the muscle reprogramming potential of Watsu

From Ian Tennant

'As my limbs flowed freely in sweeping arches with the water, I felt a rushing sensation that ran from head-to-toe, helping me sense the subtle interconnectedness of distant body parts. I became extra-sensitive to mild stretches in patches of skin and tissue where blockages or restrictions existed. Later in the session, as Stef rhythmically rotated my shoulders, to my surprise, my legs automatically peddled in the opposing direction making me suddenly more conscious of the gyroscopic way our bodies balance movement in all directions.'



I'm often intrigued by the way clients describe what it feels like to receive a massage. The sensation felt when working slowly up from the Achilles tendon along the deep fibres of the soleus muscle towards the knee, was likened by one lady to squeezing

toothpaste out of tube. Another said her back felt 'all warm and squidgy, like porridge or custard' after her treatment – rather than the 'brittle, grey plastic guttering' that was lodged in her shoulder blades beforehand. Yet, it was the similarity to 'ironing creases

out of a tea-towel' which recently got me thinking more about the role of functional, flowing movement and trust during therapy in helping clients stay relieved of unnecessary tension, and aid recovery and proprioceptive reprogramming.

When we treat clients with standard techniques such as effleurage, petrissage, or friction in a linear, uniform way – perhaps lying still and prone on a couch – the ‘tea-towel’ comparison ideally describes the local smoothing effect of massage on a specific part of their body. Yet a whole person is much more interesting than a flat, piece of cloth that spends half its life in a kitchen drawer! As soon as they jump off the couch, our client’s bodies twist and stretch using complex patterns of movement that require a phenomenal amount of whole-body coordination, muscle memory, and spatial awareness in three dimensions. One of the hardest jobs for a therapist is to make sure that the one-hour’s worth of ‘ironing’ done on the couch is integrated by the client into the twenty-three hours of living off the couch in the real world, and that they avoid resorting to damaging patterns of muscle recruitment and build-up of tension in other soft tissues. So, to upgrade the tea-towel analogy, we might like to think about the fabric of our clients’ bodies more in the way a fashion designer or tailor would when designing a ball gown: appreciating the role that the properties of cloth – such as drape and absorbency – play in the overall performance of the garment, or in our case the performance of the client’s body.

I was made acutely aware of how much our ability to move gracefully and pain-free depends on our body’s connective fabric (our fascia’s) ability to ‘flow’ freely, when I experienced a deeply relaxing and powerful water-based massage treatment called ‘WATSU’, which involves elements of dance and stretching in three dimensions. During the one-hour session I was lead around a spa pool by the supportive and light touch of Lanzarote-based therapist Stef Cerf, who after training in many types of bodywork now chooses WATSU as his main therapy for clients, because it blends his life-long passion for water with massage. Not knowing exactly what to expect from the treatment, I was soon astonished by how thoroughly absorbing it was – and within minutes I was left feeling like an autumn leaf dancing in the wind.

Afterwards I was curious to find out more from Stef about the elegant movements used during the session. ‘I work with archetypal shapes such as the figure of eight, vortex, circle, and sinusoidal wave when steering clients through the water,’ explained Stef. ‘There is a force behind shapes and these somehow resonate with us.’ This left me wondering whether his treatment could help align a body with the universal forms, shapes, and patterns which are so commonly observed in nature.

I certainly felt the resonance that Stef referred to whilst being steered around the pool along these classically-shaped paths. I noticed different forms reverberate with different fascial trains: as my limbs flowed freely in sweeping arches with the water, I felt a rushing sensation that ran from head-to-toe, helping me sense the subtle interconnectedness of distant body parts. I became extra-sensitive to mild stretches in patches of skin and tissue where blockages or restrictions existed. Later in the session, as Stef rhythmically rotated my shoulders, to my surprise, my legs automatically peddled in the opposing direction making me suddenly more conscious of the gyroscopic way our bodies balance movement in all directions. As Stef returned to using faster, dance-like movements – incorporating manipulation and stretch, I could feel tension melt away and awareness return to a ‘blind spot’ around my left shoulder blade, that wasn’t moving freely and had been responding poorly to couch massage and stretches for several months previously.

‘WATSU’, a name that is derived from ‘WATER’ and ‘shiatSU’ – was developed 30 years ago by Harold Dull, a renaissance poet who also headed-up a massage and shiatsu school. Dull began to apply stretches and massage on his clients and students whilst floating in warm water. WATSU is now practiced by over a thousand therapists around the world and has evolved alongside similar aquatic treatments such as Water Dance and Healing Dance, all of which incorporate dynamic stretches and dance-like elements. Stef explained to me how powerful water can be as a medium for practicing positional release: ‘Working with clients in the spa pool eliminates gravity and helps them to

move with the least amount of effort. To get the most benefit, it is crucial for the client to feel safe and to trust the therapist – if they do then water is the best place for letting go of chronic tension.’

Indeed, as any massage therapist will know, the greater trust a client has in the person they are working with, the easier it is for them to release tension during a treatment. To me, this relationship was even more intense when submerged in water. ‘It takes a while for some people to melt into a comfortable natural shape in water,’ explained Stef, ‘but once they let themselves become at one with the water, the whole body can be made harmonious and graceful again.’ To me, once the trust barrier has been overcome, it seems WATSU has the potential to go further than just release tension: through whole-body movement in all directions, it can truly re-program long-held, adverse muscle recruitment patterns and rebalance fascial tension. That said, having experienced this ‘underwater massage-ballet’ for myself, I would be keen to incorporate more dance-like movements in the therapy room and test Stef’s theory that ‘you can do everything in water that you can do on land, and vice versa’.

Finally... a good pull-out quote: ‘Water is the best place for letting go of chronic tension’.

Further information

Watsu Lanzarote - <http://watsu.yolasite.com>
Venue in Lanzarote offering gentle and affordable retreats including Watsu:
www.b-the-change.com/retreatlanzarote.html



Feature

Can't run, won't run? Try Nordic Walking!

Jo Chatfield suggests an alternative way to get that CV workout.

From Jo Chatfield



A few years ago, I had finally to listen to my complaining body and hang up my running shoes for good! I really struggled to find an alternative way to get a good CV workout. I lacked the motivation to work hard in the gym on my own. Classes were at the wrong time of day to fit in around my work. Most of all I really missed the buzz of running in events or with a club and friends.

As I resentfully watched the Running Club go out from my health club one morning, someone handed me a leaflet on Nordic Walking. Eureka! Nordic Walking was reported to use 20% more calories than normal walking as one uses more muscles, but it feels easier and is less tiring. It seemed that this could be just what I needed - kind to your joints, low cost, and surprisingly aerobic!

Based on a sports coaching technique for cross-country skiers for their summer training, it uses special poles. It is not

just 'walking with poles' though! It is a progressive, structured way to exercise suitable for all levels of fitness.

I had to have a one-to-one lesson first to master the technique, and since then have regularly joined group walks. As well as all the fitness benefits I found it is a really sociable way to exercise. In fact, we often refer to our regular walks as 'Nordic Talking'! Poles are provided by the instructors, or if you wish to go on to Nordic Walk by yourself, you can purchase your own. But – do get advice from an instructor as to which ones would be suitable for you. The reason I wanted to write this article was to share how beneficial it can be for our clients. I now suggest Nordic Walking to people who can't, or don't want to run, but need something else, as I did when I gave up running. It can be suitable for someone requiring weight-bearing exercise, but perhaps has hip, knee, or ankle joint problems, or osteoporosis. I find it a useful way to keep my thoracic spine mobile as

you really use your arms to get good upper body rotation. Anyone with balance issues could also find it helpful as it means they can exercise with the additional stability of the poles. My fellow walkers have found it a good way to improve their fitness for more serious treks such as Kilimanjaro and the Great Wall of China. The Nordic UK website gives abundant further information on the health benefits and suitable uses of this activity, including for cardiac rehabilitation, and how they are involved in the Change for Life health program.

Costs will vary from instructor to instructor, but I paid £25 for my initial one-to-one lesson. Our group walks last from one-and-a-half to two-and-a-half hours at £7-10. A good instructor should include a warm-up and stretch-out as part of the session

I cannot think of a better way to enjoy the great British countryside whatever the weather. Walking in the fresh air certainly feels healthier than working out in a hot sweaty gym any day!

For more on Nordic Walking, to find an instructor, or become one yourself go to: <http://www.nordicwalking.co.uk>

Thanks to Karen Grace, my Nordic Walking instructor, and some of the Reigate walking group, for the photos!



Feature

Climb every mountain, forge every stream, follow every rainbow... and join the *Reload Centre Team!*

From Sophie Rayner

'Acclimatisation and enthusiasm began with the first step off the bus onto the crisp white snow. A week of marketing our massage service commenced, enabling us to get to know other familiar faces in the resort; the clinking of drinks with colleagues started in earnest, and I began to realise that I was embarking on an incredible few months.'

'I look back on my Reload experience with great fondness and as a crucial contribution to my fledgling career as a therapist. This was a personal quest for confidence in my new skills, to meet kindred spirits within a profession, and to have a good time – all which criteria were met with a big fat tick.'



5 out of 7 of the Reload team 2010

As far back as I can remember, I have aspired to dance barefoot on the green grass of the Austrian Alps à la Maria in the childhood classic *The Sound of Music*. As fortune would have it, the Austrian Alps became my home last winter. Admittedly, my style was less Julie Andrews, twirling innocently atop vertiginous mountain pastures, more Will Ferrell (think *Blades of Glory*), hurtling down snow-capped mountains with all the grace of a cat on roller-skates.

Nestled in these mountains, in the Arlberg region, lies St Anton, home to the *Reload Centre* – the place to go when a hard day's skiing has left your quadriceps on fire; when your attempts to learn snowboarding have resulted in whiplash; or when you simply need a damn good massage. *Reload* is entering its fourth year of business, and at the helm is Jo Bennett, taking St Anton by storm.

I had the privilege of working for *Reload* last winter, and as a progressive step in a massage career it was second to none. Prior to qualifying in SRM, I knew that I wanted to work in a ski resort, not simply on account of my passion for skiing, but because I believed consistent hours of treatments would help consolidate and develop all that I had learnt from the Diploma Course. The only way to do this is to clock up regular hours.

Unlike other Therapy practices I found, *Reload* stood out as offering the type of massage I was trained in. Jo being a fellow LSSM graduate, I knew I would be utilising the extensive skill set I had learnt. Another significant aspect of my experience there was the opportunity to work as a multi-disciplinary team, which included physiotherapists, sports therapists, and sports massage therapists.

Alternative employment options seemed to offer the more lonesome prospect of driving to chalets solo and I had been working alone ever since qualifying. With *Reload* I not only anticipated learning from my colleagues, but also knew that help was always at hand if I needed advice. The



Centre provided a major boost to my self-confidence as a therapist.

Acclimatisation and enthusiasm began with the first step off the bus onto the crisp white snow. A week of marketing our massage service commenced, enabling us to get to know other familiar faces in the resort; the clinking of drinks with colleagues started in earnest, and I began to realise that I was embarking on an incredible few months.

The weekly timetable consisted of six days on, one full day off. Most of the time work started in the afternoon. There were two early morning starts for which a bright-eyed, bushy-tailed demeanour, or the appearance of it, was vital, even if a dance floor had been a feature of the previous evening.

The majority of the work was carried out in a studio, sub-divided by partitions. *Reload* also contracts out to a few luxury hotels and chalets, which offers a variety of working locations.

We treated locals, seasonal residents, holidaymakers, and famous ski cross and freestyle skiers (St Anton attracts professional and amateur skiers alike). There were many achy quads and calves, and holidaying office workers brought their sore lower backs and shoulders to our tables. Every client posed a different assignment, so the work was far from repetitive. You might throw in some STR, an MET, or a sneaky NMT but each treatment was different.

Some clients simply wanted to relax, while other talkative souls were so high on the holiday spirit you could barely get them to stay still while they giggled away with their friend in the next cubicle. The variety of nationalities also added an extra dimension to each treatment. We had clients from Scandinavia, Germany, Russia, Israel, South America, Spain, The Netherlands, and the UK. I met some fascinating people, and enjoyed some unforgettable and inspiring conversations. You never knew who or what you might encounter: an old friend, a prospective job offer, or members of a stag party that had escaped the labours of forced drinking, and just wanted to listen to the Sound of Music as they were massaged (that actually happened!).

One major advantage of working for *Reload*, compared with other resort jobs, is that you get ample time each day to explore the 440 km of pistes at leisure. But there is no doubt that it can also be tough at times, so you really do need to take good care of yourself, the hardest part being keeping your energy levels up. Much as chocolate supplies from the neighbouring Spar help, dancing into the night, skiing all morning, gym at lunchtime, and massage all afternoon make up a lot of activity, and you need to be sensible. You might have a tiring five-hour stint in a chalet of Russians who don't speak English, but you still have to be consistent and sociable in your work.

That said, there were moments that for me made it all worthwhile – even on days of severe sleep deprivation, when there was just one hour to go before finishing – such as when my client let out a joyous 'Super-duper!' in a broad Russian accent, giving me the thrill of satisfaction at the task in hand and leaving me, that evening, with a spring in my step from a job well done.

St Anton-am-Arlberg is a wonderful town. The locals are amiable and very forgiving for the lack of German spoken by its wayfarers. There are numerous restaurants to tickle your taste buds, a great live music scene, notorious après-ski entertainment, and a buzzing nightlife. A highlight for me was the outdoor swimming pool and heated whirlpool at the Wellness Centre. It was a surreal experience to be swimming along as



Entrance to Reload



it was snowing, and skiers 'schussed' past on the slopes in padded warmth.

In the darkness of the evening it was nothing short of magical: steam coming off the surface of the lit-up pool and the moon revealing the white peaks towering above, whilst you were floating along. The heated whirlpool brought you back to life: I defy anyone not to rejuvenate by at least twenty years after being spun round in the water at speed. In addition to the Wellness Centre, which also houses a gym and sauna, St Anton offers climbing, cross-country skiing, tobogganing, tennis, and squash. It is also renowned for off-piste skiing, and touring with a guide is very popular.

I would recommend *Reload* to anyone considering work of this nature. You do need to be committed, as it is a long season and although a lot of fun, it can often be hard work. Even though St Anton has much else to offer, it would ideally suit therapists with a desire to ski or snowboard. A keen interest in other people is important, not only in terms of client conduct, but being part of the team means supporting colleagues, sharing knowledge and, sometimes, treatments.

I look back on my *Reload* experience with great fondness and as a crucial contribution to my fledgling career as a therapist. This was a personal quest for confidence in my new skills, to meet kindred spirits within a profession, and to have a good time – all which criteria were met with a big fat tick.

I will not forget the immense satisfaction of being complimented post-treatment by a man who, 50 minutes previously, had told me I that I didn't look big or strong enough to give a good massage... or of treating someone who could barely move because he was in too much pain from skiing – and then called at the studio the following day to say he had managed to stay out skiing all day long. The *Reload* Centre delivers the high standard of treatment that the ISRM represent, and I am proud to bear the stamp of such quality.

Interviews for these positions start in August, so if you are interested, keep an eye on the ISRM online noticeboard, or send your CV through to:
info@thereloadcentre.com.

Useful websites:
reloadsportsmassage.com
stantonamarlberg.com/en/home/2.html



Feature

Seeing Hands Nepal expands!

From Sue Ainley, Founder of SHN Charity



training programme. The target amount needed is £10,000, and some of this fund would also be used to provide management and leadership training for selected blind staff, so they can learn the skills required to run clinics independently in the future.

The attached photos, which show our blind therapists before they joined SHN and now, speak for themselves in terms of the difference we have made in their lives.

None of this would have been possible without the kind and generous support from our donors and volunteers, many of whom are members of the ISRM. Special thanks to Mel Cash, Jo Chatfield, Paul Martin, Manicon Pillai, and Alessandra Figini.

The Seeing Hands Nepal (SHN) Project is going from strength to strength. Here's a brief update on our recent activities and plans for the future.

Last November (2010) we opened up a second SHN massage clinic in Kathmandu, and relocated two of our trained blind therapists from Pokhara there. Business was slow at first, but improved steadily and we broke even in April, just six months after opening. We are excited about this because it proves how well SHN is working as a social enterprise, and truly shows its potential to becoming totally self-sustaining in future years.

In the Pokhara clinic, revenue continues to grow steadily year on year. Clients still rave about the quality of our massages, and SHN is now listed as one of the top attractions in Pokhara on TripAdvisor.com. We currently employ eight blind therapists in that clinic, all of whom have sufficient income to support themselves and their families, and a dramatically improved quality of life.

In April 2011 we moved our training programme to Kathmandu, to widen our geographical catchment area (and free up rooms for paying clients in Pokhara!). There we have taken on

three further students, which brings the total number of blind people involved with SHN up to nineteen.

The priority is now to raise the funds required to open a third clinic, so that jobs can be provided for current students when they graduate, as well as for future beneficiaries of our continuing

If any other members are interested in volunteering for the project, please email info@seeinghandsnepal.org or speak to Mel Cash or Jo Chatfield.

Donations go direct to Nepal and are not wasted on administration. Any support, however small, will be greatly appreciated.



Event Work

World class Event Work – the 2011 IAAF World Championships, Daegu, South Korea

From Roberto Ciurleo

‘Though I remained greatly focused on my massage work during my 20 days’ input, I could not help feel captivated by where I actually was each time I looked up!’

It also proved another lifetime experience, and better than a dream, as I was actually living it and have the memories and the story to share with you.’



After completing my work at the IAAF World Championships in Berlin in 2009, I was not sure whether I would have a further opportunity to provide my services at another World Championships event. As it turned out, I was wrong! In spring 2010, I received an email from the medical team manager for the 2011 IAAF World Championships in Daegu, South Korea. I was being offered to collaborate throughout the World Championships as Sport Masseur, with my expenses being funded by the LOC. Needless to say I was most delighted and over the moon at the offer.

I was looking forward to returning to Korea, having worked at two World Championships in Seoul in 2006 and 2008, both of which had been a great experience.

The time arrived to fly to Daegu, and on arrival at the airport I was welcomed by my Medical Team Manager, Mr Dogham, who took care of me throughout the event.

The following morning, I met the rest of my team for a briefing: the sports doctor, physios, and sport masseurs, and was informed about

my shift. This would be from 8 a.m. to 10 p.m. and based at the warm-up stadium throughout the competition, alongside the rest of the medical team. My role would be to provide pre- and post-event massage to the athletes, the main priority being to help them recover from training, identify and resolve any injuries, by combining general assessment and testing, sport massage, and MET and STR and stretching.

Without delay, the medical team – me included – set off to work at the medical centre in the warm up stadium. On arrival... guess who was there in the stadium? Everybody! All the best athletes in the world were gathered there, training in preparation for the upcoming competitions. This included the ‘King of 100m’ Usain Bolt, who just happened to be sprinting down the track alongside Yohan Blake – an amazing sight!

I felt so elated and full of adrenaline, and knew instantly that this was going to be another great experience.

Though I remained greatly focused on my massage work during my 20 days’ input, I could not help feel captivated by where



I actually was each time I looked up! The athletes I treated included Jamaican 400m hurdler Isa Philips, Eritrean 10,000m (and world ½ marathon record holder) Zersenay Tadese, the Puerto Rico 4x100m team, members from the Ethiopian, Colombian, Nigerian teams, and so many others...

I cannot deny that the unrelenting work – 20 consecutive days, sometimes up to 14 hours per day depending on the competitions, was difficult and pressurized, and felt an immense responsibility to take on. BUT it also proved another lifetime experience, and better than a dream, as I was actually living it and have the memories and the story to share with you.

Looking back, I regard that event as one of the best performances of my lifetime to date. Finally, I was delighted to receive the following message from 4x100 Puerto Rico team member Marcos Amalbert: ‘Hi Roberto, just to say thanks for helping me at the WC, and to let you know that we broke the national record!!! Really appreciated all you do for us.’

London Marathon 2011 – OXFAM Team

From Wendy Chaplin



As I suspect many other therapists did, I had second thoughts after volunteering to work at the London Marathon. I had naively thought that couches would be provided – surely they couldn't expect us to carry couches through central London! Then I received the email that suggested items to take including not only a couch but covers and a plentiful supply of towels plus a multitude of other items... oh, and lunch! Plus don't forget there are road closures. Ok... don't panic... surely everyone is in the same boat... there must be a system! Then came the team allocation – I am at the British Academy, just off the Mall, with the Charity Oxfam. Great – there are quite a few of us, so I hope that means that they will meet us somewhere to transport our stuff. Whizz off some emails still hoping some generous soul is offering to help us as to how to get our load there. More emails... No, it's official, it's 'get there any way you can'. More emails, and I agree to brave London Transport with fellow team-mate Liz.

We start off with a car journey down the M4 to Osterley tube station nice and early to avoid the crowds, then onto the Piccadilly line to Piccadilly Circus, to avoid changing tubes... which we are keen to do, being laden with two couches and rucksacks. Do you know there are two flights of stairs, followed by two escalators, to get out of Piccadilly

Circus, not forgetting another flight of steps to get to street level? A short...ish walk to the venue, then more steps to the grand hallway, followed by more to the first floor and the Grand Mall Room where we will be working – once our arms have recovered from carrying, that is! We are first there and are greeted by Dominic, our team leader. We set up and get the opportunity to go and watch some of the race. After seeing all the Elite finishes, we make our way back to base for a briefing, followed by an amazing lunch (a real bonus – as the lunch box had been jettisoned to lighten the load). The room had by now filled up with therapists.

We are given a quick demo of what is expected by an experienced therapist, as most of the volunteers are students. Then a further reminder that 'time is our enemy', and Dominic will be making sure that we stick to the plan of 20-minute treatments each. Dominic is starting with me – no pressure then. Then he arrives – the first Oxfam runner home comes in to a round of applause, and is led to my couch. He finished in 3 hours and 4 minutes! I carry out my massage... he looks and his muscles feel as though he has just been sitting in the sun. He is the first of many, and probably one of the freshest, some of them looking slightly the worse for their marathon experience. As it turned out, time wasn't really our enemy,

as we had a steady flow of 'bodies' and a large team of therapists, Dominic looked like Head Waiter as he determined who went to whom, and never seemed flustered.

All too soon we had finished and it was time to pack up and head for home. The only snag was that most of the runners, their families and friends, were also making their way to the tube station. It was busy, very busy, people were queuing everywhere. The kind staff opened the barrier for us when they saw our load. Unfortunately, most of the queue saw that opening too and made their move. I would like to say that people saw our burden and helped, or even that they let us through, but that would be a lie. So we had to force our way down all those stairs and escalators and push our way on to the first tube... it wasn't the right one... but never mind it was out of there. The finishing line was to escape the tube at Hounslow: as the staff wouldn't open the disabled barrier, we had to risk the usual exit, and yes it had its revenge and trapped me, my couch and rucksack. Alarms went off, I stayed put thinking someone would release me, but no one moved other than to watch the mad woman trapped in the barrier! So I resorted to pulling myself through the barrier and finally someone left a queue to help pull my couch through.

Wow, that was a week ago, my arms felt like I had done a week's worth of weight training. Would I do it again? Yes, I would love to massage there again, it was a great experience and I met some lovely people. But surely there is a more professional way to get our stuff to the venue, I am sure there is a business opportunity for someone to hire out couches for such events or even for the massage schools. I am not sure that many will want to repeat the experience once they are no longer students and do not require the logged hours, and yet that would be a shame as one of the great benefits of these events is to meet other therapists and see how they work.

Event Work

The Reading ½ Marathon, Sunday 20th March 2011 - a 'no frills' account

From Kevin Petersen



I thought it might be useful to enlighten any members who have yet not worked at an event, that it's not all that you would expect sometimes. The first thing to say is that I have already volunteered at many events, from running to martial arts, and they really are a great experience, because of the variety of work you can encounter, the need to be able to think quickly, and provide appropriate treatment 'on the spot' or refer on if needed.

I arrived at 7 a.m. with my car loaded with towels, oils, and massage couch. Displaying my 'white' parking permit, I was shepherded into the perimeter road of the Madejski Stadium Reading, feeling very fortunate that we as massage therapists had designated parking adjacent to the massage tent as pictured on the event site plan.

Then... as if stuck in a track on the ground, my car was directed by the marshal with a fluorescent jacket that was clearly too big for him, to a left turn and up a steep hill. Winding the window down, I pointed out that according to the map, the concrete

space behind him was the massage parking area, but to no avail. He unwaveringly directed me up the hill, where in order to find a space I drove further and further away. Having 'abandoned' my car (sorry – found a parking space), I loaded myself up like a 'pack horse'. 7.30 am and I made it into the vast marquee where a senior Physiotherapist, who seemed to be arranging the massage couches layout, instructed me that we (the ISRM team) could go right to the far end into the corner (whilst the student Physios from a number of Universities had prime position at the front).

Having met up with a few ISRM colleagues, we set up our couches and laid out all our towels and oils, only then to be informed the layout was going to be changed, so we had to move all the couches! After our briefing with Tanya of the ISRM, we received our first pre-event clients. Clients were asked for a suggested donation of £5 for a ten-minute Sports Massage, with the proceeds going to the Fire Fighters' Charity, and they had the option of pre-booking their post-event massage, which was a great idea, saving queues later.

There were around 50 of us massage therapists from a variety of sources, and although the marquee was cold in the morning, we were later going to feel more than warm once the competitors started to pour in after the event. As the race was getting under way, we had the chance to watch the start, which was great for me as I had the opportunity to see my girlfriend Amanda in her first 1/2 marathon (and possibly her last!). Then... disaster! I attempted to get my second latte of the day, only to find the coffee trailer machine was broken, and I began to wish I had filled that flask of coffee before leaving home...

Back in the massage tent, we were all handed a carrier bag containing a bottle of water, flapjack, pack of crisps, Kit-Kat, and a ham sandwich. Now that was very gratefully received by me, but the two vegetarians alongside me, who had also given up chocolate for Lent, were not so pleased. From about 11.40 a.m., runners began to file in, and we started our treatments. The initial trickle soon became an orderly queue, and we worked hard over the next two-and-a-half hours with back-to-back massages. These consisted primarily of leg work as you would expect, but there were also a few people with upper back problems. The event over, it was just left to us to pack up all our equipment and haul it back up hill to our cars.

Now having read the above, you might well question why would anyone want to get up at crack of dawn on a Sunday, to work in the cold, unpaid, with only minimal expenses being refunded? Well I asked myself that many times on the day... but now as I sit writing this, I am already looking forward to my next event. I think we all need to be involved in event work for a number of reasons: if you can help support the runners who give up their time to train and compete in gruelling events purely to raise funds for many needy charities, why not? Also, you help raise the profile of both yourself and the Sports and Remedial Massage profession as a whole, hopefully leading to a greater uptake of our services and therefore more recognition of the excellent benefits of our services. I hope I've not put you off by highlighting what to expect, but it is better for you to know 'what you might be in for'. You have a skill – so why not use it to benefit as many people as possible?

Event work update

From Tanya Ball



As you read this, another busy, successful event work year will have drawn to a close. Besides the smaller events posted on the ISRM event work page, where applicants are instructed to contact the event coordinator directly, we have provided SRM teams for the following events in 2011:

- Fleet ½ Marathon
- Reading ½ Marathon (new event)
- Brighton Marathon (new event – two teams)
- London Marathon (fourteen teams)
- Blenheim Triathlon
- London Triathlon
- RTTB.

This represents a total of over 150 participants, although of course in several cases, the same valiant and keen volunteers supported more than one event. Feedback from all parties – massage recipients, organisers, and of course ISRM team members, has generally been packed with superlatives, which illustrates the value of this work on so many fronts.

My grateful thanks as always to each and every team member and/or leader for enabling us to provide this much valued service by so many.

2011 London Triathlon – Saturday 30th – Sunday 31st July 2011

As previously, we were delighted once again to support the busiest and most intensive event on our calendar. As often occurs, although this event opportunity was initially over-subscribed in spring 2011, late withdrawals rose to somewhat alarming proportions. This necessitated an 11th hour appeal for further volunteers, with a much appreciated response by a few members, some of whom made the effort to attend at considerable personal inconvenience. As always in my event work experience, every single team member present excelled themselves in every respect, working tirelessly with smiling faces, impressive hands-on versatility of skills, and true professionalism – a true credit to the ISRM and the values it stands for.

An overall team of 27 students/recent & experienced graduates + two team leaders covered the two-day event, with co-team leader Peter Storry, myself (obviously), and six volunteers attending both days. The Sunday team furthermore enjoyed the bonus of the ever-cheerful and dynamic appearance and practical support of Mel Cash, with his usual tips, entertaining stories, and humour included in the bargain! An approximate total of 60 massages were performed on the Saturday, followed by a record-breaking 206 on the (always busier) Sunday, totalling an impressive 266+ treatments!

I know I am repeating myself from year to year, but – my sincere congratulations and grateful thanks to everyone. My special thanks above all to my ever-calm, collected, humorous, and immensely fun-to-work with co-leader and friend Peter Storry, whose quiet efficiency throughout the event is critical to everything running smoothly each year. Peter, I trust you are 'up for it' in 2012?

See the London Triathlon photos by co-team leader Peter Storry on page 26

2011 Run-to-the-Beat (RTTB) ½ Marathon, North Greenwich, London, Sunday 25th September 2011

After the most atrocious weather conditions of previous years, which had left therapists and clients alike shivering in our draughty marquee, not to mention numerous competitors invading it to take 'unofficial shelter' due to a delayed start... event organisers IMG had wisely elected this year to relocate the massage area to the London Soccer Dome – formerly the David Beckham Academy, adjacent to the Millenium Dome.

This is as unimpressive a grey warehouse-looking building from the outside, as it is attractively designed once indoors: smart reception/refreshment area, high quality building materials including sound- and fire-proof doors, immaculate changing and toilet facilities, variably sized meeting/educational rooms with modern IT equipment... and two full-size indoor soccer pitches covered with

artificial grass – as opposed to Astro turf. This was my first experience of stepping onto such a surface – it felt surprisingly soft, i.e. gentle on the joints, and yet firm, at the same time!

Anyway – the result of IMG's decision to provide us with much improved facilities? It turned out to be a pleasantly mild autumn day... The massage area was to be set up strategically at the end of one of the soccer pitches, adjacent to the 'kit bag' area (where competitors can hand in their sports bags of surplus clothing once they have 'stripped down' to their racing kit before the race, and collect it afterwards). This meant that we were well in sight of the runners coming in and out of the area.

Following two last-minute withdrawals due to illness, faithful Hayden Roger-Lund saved the day by generously stepping in to help at the last minute – thank you again Hayden! The valiant, enthusiastic six-strong team (excluding myself as team leader) arrived bright and early (7.30 a.m.) to set up. It is always essential to ensure that the massage area is securely enclosed on all sides so that people can only enter/exit the area by the booking desk. This ensures that people duly book and pay for their massage, therapists' personal belongings are secure, and that clients are allocated to therapists in orderly fashion, as and when the therapists are ready to receive them. It turned out that insufficient metallic barriers had been supplied to achieve this... Fortunately however there were numerous mini-football goals stacked nearby, which made excellent replacements to ensure that... nobody slipped through the net, ha, ha!

As mentioned last year, the race attracts some 12,000 competitors, from first-timers to seasoned elite athletes of both genders and all ages over 17, from UK and overseas. The organisation prior to, and on the day is massive, with hundreds of staff and volunteers each allocated to specific tasks, from marshalling to kit-bag storage handling, from 'ushering' runners to their starting pens in accordance with their anticipated finishing time, to handing out medals and space blankets in the

finishing funnels.

The day began well, with a number of early bird competitors requesting pre-event massage 'on the spot', while others duly booked post-race treatments. From my perspective, given the unpredictable nature of event work, I am always relieved and delighted when all team members are able to work hands-on and get 'stuck in' an event without delay.

For the first time since our involvement in this event, the race got under way on time – for the front runners at least! As we wandered out into the sunshine to view the start from a distance, queues and queues of competitors could still be seen still snaking their way along the starting pens towards the start banner, many minutes after the elite runners had vanished at their incredible sub-five-minute-miling pace. Time for a hot drink, a chat, and in my case, an immensely beneficial massage on a very sore left pelvis courtesy of Ivan Carrasco – thank you so much again, Ivan!

Not too much later, we could hear the PA system announcing the imminent arrival of the race winner – a cue for us to be ready for a possible-onslaught-of weary bodies wanting 'repairs-while-you-wait'! Soon, runners of all shapes and sizes began to trickle, and then pour, in to retrieve their kit. By this time the sight of our massage area was obviously far more attractive... So in addition to the few who had sensibly adhered to advice and pre-booked, many more queued at the desk, hoping for the off-chance of a restorative treatment. The team worked flat out, at full capacity for a considerable period, providing top class recovery massage with exemplary professionalism, impressive versatility, and great attentiveness to each client's specific needs. It was difficult for me to believe that what I was witnessing was in most cases the work of students with some months to go on their SRM course... My sincere thanks and congratulations to all for your superb effort! A total of 67 treatments were performed, despite the number of 'ad hoc' (not pre-booked) punters who declined to wait for a slot. I must admit that at every event I attend, it never ceases to amaze me how sports participants can arrive post-race at the desk, half bent over with evident aches and fatigue, in their words 'desperate' for a relieving massage... but then cannot be bothered to wait for 20-40 minutes

for the next available slot. This waiting time could so readily be put to perfect use with a gentle warm down and stretching, changing into dry, warm clothing, taking on fluid and food...

By 2.30 p.m. it was finally time to pack up and haul our variable equipment all the way back to the car park, dodging a multitude of volunteers clearing/sweeping up the unbelievable array of litter everywhere, while professional suppliers were already busy dismantling barriers, start/finish banner scaffolding, fork-lifting zillions of portaloos onto lorries (I am always worried about being 'airlifted' in that way on my pre-home-driving visit to one of them!), etc.

2011 events

At the time of writing, I am delighted to confirm that IMG have once again confirmed that they request our input for the same events in 2012. There may additionally be a separate large event on Sunday 1st April – TBC. 2012 events are about to be posted on the ISRM web page, but please be patient if they do not appear until early January 2012, thank you. ***Please note that due to the Olympics, the 2012 London Triathlon and RTTB events will take place in September and October respectively.***

2012 Olympics/Paralympics

The final selection for the provision of SRM remains in process at the time of writing. According to my latest information, applicants should be contacted by no later than late January 2012. May I again wish all our members who have applied, full success in their endeavour – please let us know the outcome of your application, and please send in any stories you can as and when the time comes, thank you!

Finally: the ISRM event work registration process

Would all members, and specially new student members for whom this is their first ISRM Newsletter please kindly note the one and only Event Work registration process below, thank you.

Registration for any/all ISRM event work is available **exclusively online**. For logistical reasons, there can be no exception, and because the Event Work web page is understandably accessible to members only (as the ISRM fund the associated administrative costs), it follows that applicants/participants must be ISRM

members. Unfortunately I still receive e-mails from people unable for some technical reason to access the page, or... because they are not/ no longer ISRM members. In the former case, I can only advise people to ask to borrow someone else's PC/email facility; in the latter case... I can only suggest that they (re-)join the ISRM and reap its many benefits!

In addition, to qualify for ISRM event work, Professional Indemnity and Public Liability insurance at the *appropriate level* (student/graduate) and *valid at the time of the event* is mandatory. We regret that no exceptions can be considered.

Students must have successfully passed their Weekend 5 General Massage assessment in order to be considered for ISRM event work. Very rare exceptions may be considered at ISRM's discretion.

How to apply for Event Work:

From the ISRM home page (www.theisrm.com), click on 'event work' and follow the very easy instructions to view the current list of events, and to register for what takes your fancy.

Please, please, PLEASE ensure that you enter **ALL** details requested including your 'status' e.g. 'student', 'recent graduate', etc., and please, please, PLEASE only apply **once** for a given event! Some people have managed to click as many as seven times for the same event...

Duplicate entries are difficult for me to spot due to the automated system, and once an applicant has been approved, I am unable to delete them from the relevant event team list. This again means having to e-mail that person individually to ask them to cancel one of their applications, unnecessarily wasting time I could be devoting more productively to the Event Work scheme.

Should you encounter problems you suspect to be website-related, please contact the ISRM and not me, as this is completely outside of my control, let alone my skills! Thank you.

A very grateful thank you to all those of you who have supported/are supporting ISRM events over the years. Remember, we could not possibly field these teams nor provide the quality of service without each one of you.

Expand your knowledge, enhance your skills

Myofascial techniques save young girl from the knife! Or – a fascial approach to Idiopathic Scoliosis: Case study

From Allan Murrell

In this fascinating Case Study, experienced practitioner and LSSM senior tutor Allan Murrell highlights the importance of Continued Professional Development (CPD) in optimising the service we can offer our clients.

Introduction

In early 2003 I was introduced to a teenage girl (for confidentiality purposes she will be called Ann). She was sixteen and a half years old when we met and had a severe scoliosis. The curve was first noticed by her dance teacher back in 2000/2001 when she was fourteen. She had seen her GP and had been referred to specialists within the NHS. It is common for scoliosis to be diagnosed at around that age, and it is more common in girls. During the period from 2000 to 2003, Ann had six-monthly hospital check-ups. By the time she was sixteen the consultant decided that there had been a significant shift, and it was now necessary to insert steel Harrington rods through the length of her back to prevent any further curvature. Accordingly, she was booked in for the operation in October 2003, just before her seventeenth birthday.

Spinal correction with Harrington rods

To correct scoliosis, Harrington rods use the principle of distraction and compression to stabilise the thoracic or lumbar spine.

The rod on the concave side has a hook at the top facing up and a hook at the bottom facing down. The rod on the convex side has the hook at the top facing down and the bottom one facing up (see illustration). Over the decades since this treatment was introduced, further hooks have been designed, which can be added to stabilise other segments of the



spine. The website www.spineuniverse.com comprises an article about the progression of scoliosis fixation entitled, 'Idiopathic Scoliosis: Options of fixation and fusion of thoracic curves.' This explains the surgical progression in further detail. Once the procedure is complete, it is accompanied by a spinal fusion – involving bone grafting to 'solidify' the spine and prevent the rods gradually working free and becoming mobile.

Could fascial techniques 'mimic' the rods?

In March 2003 a friend mentioned to Ann's parents that they knew me as a Sports Massage Practitioner. Following that conversation, Ann's mother inquired whether massage might help her daughter's condition and if possible spare her the need for rods. Based on detailed information and examination, I decided that I would endeavour to create the same effect as the rods, but by using soft tissue techniques, which are explained later on in this article. We began treatment at this time primarily to seek to elicit structural change. Obviously I made no claim as to what might be possible, as I did not know myself! Ann being a dancer, she was keen to carry on her activities as normal, which was agreed, alongside assessing any changes over the course of the treatments. By the time she went for her pre-operation check up, Ann had received ten sessions. Further x-rays taken at that pre-op' review indicated that the curve had not changed since the previous set of images, in contrast to the

continued dramatic increase up until then. The consultant therefore decided that the operation was not entirely necessary at that point. Ann and her parents attributed the stabilisation to the massage intervention she was receiving. It was therefore agreed to wait and reassess her when she turned eighteen, some eighteen months later.

Figure 1 shows the Cobb method of measuring the degree of scoliosis. Choosing the most tilted vertebrae above and below the apex of the curve, the angle between the intersecting lines drawn perpendicular to the top of the superior and the bottom of the inferior vertebrae is the Cobb angle.

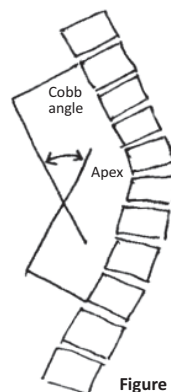


Figure 1

CPD opens up a new dimension – literally!

In the summer of 2004 I went on a course tutored by Sol Peterson (Hellerworker) and Robert Schleip (Rolfer). Part of this course explained the mechanics of scoliosis. My interpretation was that the vertebral rotations tend to occur in the same way as an aeroplane turns, but allow me to quote from the handout notes:

'As a group, the vertebrae in a right convex curvature are rotated (with their front) towards the left; and in a left convex curvature towards the right. Yet when looking at each vertebra individually in relation to its neighbour below, this is only true inferior of the apex of the curvature. Superior of the apex each vertebra is rotated more towards the concave side in relation to its neighbour below. The following spinal erectors are shortened: longitudinal fibres on the concave side of each curvature and the transverse fibres on the concave side of each curvature, yet only inferior of the apex. (Also the transverse fibres of the convex superior of the apex are geometrically short. Yet this can

be seen as 'useful' in terms of helping these vertebrae to rotate less away from the sagittal plane.'

This explains why, when a scoliosis patient flexes to touch their toes, you get the noticeable unilateral 'hump'.

Up until that workshop, I had pictured the scoliotic curve rather as a two-dimensional (2D) 'S' or 'C' line, but this new three-dimensional plane perspective, with the left and right 'turns', had highlighted the significance of rotation. However, with my initial treatments I still followed my 2D scoliosis model. Because Ann's thoracic curve was convex right (if you picture an archer's bow), then the shortened side of the curve – where the 'bow string' would be, was on the left. It therefore made sense to lengthen that (left) side of the arc, whilst work to shorten the convex (right) side. The distal half on the concave side was the primary area to work, as shown in Figure 2. The aim was to lift the left thoracic area up and encourage it laterally to the right. These early treatments also included some general massage both locally and globally to relieve tension and adhesions, thereby getting the tissues in better condition for later work.

Crucial success

I observed improvements throughout this eighteen month period of myofascial treatment, and the next assessment by the consultant indicated a decrease in the Cobb angle. So it was once again decided to defer surgery and review Ann when she turned twenty-one. Understandably she and her family were delighted with this outcome.



Figure 2

Discovering the power of 'distant connections'

After the second assessment (early 2005), I went on a four-day course taught by Thomas (Tom) Myers and found out about his Anatomy Trains and Structural Integration training. This course opened up a whole global view of how to change posture and movement. Because Ann's posture involved a left pelvic rotation and right thoracic shift, the Deep Front Line, Spiral Lines, and Lateral Lines would be major contributors to

creating change in her shifts and rotations. Once I started experimenting with these myofascial lines, I began to create changes from a distance. Her shoulder girdle protraction and scapular winging required particular attention, so I also incorporated specific work within our sessions to address this.

The Superficial Front and Back Lines

also played a significant role in the shifts and rotations (for information about all these lines, Tom Myers' Anatomy Trains Book and DVDs detailed in my Reference list below).

Having become familiar with these myofascial lines, I tried to simplify my approach by thinking of them as tent guy ropes. So for instance, if I wanted to encourage Ann's right thoracic shift to the left, then it made sense to try and lengthen the right side by taking the tissue up on that (right) side of the body, and shorten the left by working downwards along that (left) side. What I found was that areas of restriction were not necessarily where I had anticipated, and quite often changes were created by working further away along the relevant line. I found that it was important to lengthen the right lower thoracic and lumbar region upwards, to provide enough 'slack' to enable the head and right shoulder to ease back towards the midline. This was also assisted by working the Deep Front Line and Lateral Line in an upward direction on the right, and downwards on the left, as illustrated in Figure 3. Furthermore, treating the distal Deep Front Line through the tibialis posterior and adductor septum helped reduce both the right thoracic shift and some of the left pelvic rotation, due to their association with the deeper anterior spinal and psoas muscles. To try and release some of the vertebral rotations, I applied a Tom Myers technique consisting in taking the erector spinae muscles in the desired direction. Drawing the lateral border of the right erector spinae medially and down, and the medial border of the left erector spinae laterally and up, would help drop the right side and lift the left side. So, we also incorporated this technique to our sessions ('piling up the peaks and digging out the valleys'), thereby helping to unwind the vertebrae, as illustrated in Figure 4. During these treatments I frequently asked Ann

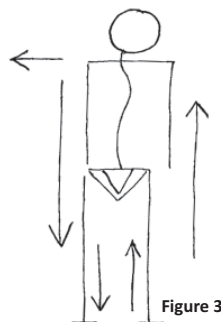


Figure 3

to stand so I could reassess the changes made before proceeding to the next myofascial line. These re-assessments taught me that I didn't always need to treat every inch of tissue to create change.

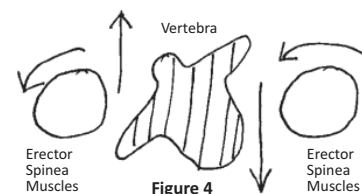


Figure 4

Managing adverse occupational stresses with movement

During the three years leading up to what was to become Ann's final appointment, she was at university studying for her degree. That time obviously included prolonged periods sitting at a computer and reading. This was also reinforcing her right shoulder protraction due to her right handedness in writing and using a mouse. Because of this, the frequency of the treatments was increased. However despite the fact that her postural habits were in many ways worsened, her pain was significantly reduced, which was attributed to the myofascial treatment.

In June 2007, Judith Aston (Aston Patterning) came over from the USA to teach a five-day workshop in postural assessment. Judith had worked with Dr Ida Rolf, and had designed and taught the movement component to Rolfing in the 1970's. Again on this course we looked at shifts, tilts, and rotations, but also at anterior and posterior body volumes, which also helped indicate the direction our postures were taking. The treatment was movement-based rather than hands-on. We worked to find our own structural restrictions and then, with gentle movements jointly performed by therapist and client, we worked together to gain new postural and movement freedom and efficiency.

One particular exercise we were shown used walking poles to strengthen the abdominal muscles whilst standing. These exercises not only engaged all the core muscles, but also helped to lengthen the spine and lift the thoracic area up and out of the pelvis.

Hence I was yet again prepared with some new methods to try and help Ann with her scoliosis and posture on her next appointment. Because of her spinal curves and rotations, we worked within her ranges of trunk flexion, extension, and rotation to try and mobilise joints and enhance spinal lift and length.

Over this period of treatment, Ann was experiencing less and less thoracic pain from prolonged sitting, though it would return in milder form after extensive study periods.

As a new idea I showed her the walking pole exercises briefly mentioned earlier. These consisted of standing with feet hip width apart and the pole height at the level of the umbilicus. Both hands are then placed on top of the pole, before the client gently pushes down with them. In this position the pole is then pushed away, brought back, and moved laterally left and right in a figure of eight. We began with ten of these moves in each direction. All this was done whilst concentrating on keeping the hips stationary, so that the movement only came from the trunk. Ann found that these exercises relieved her spinal pain. We also modified this exercise by placing her right hand and elbow on a wall whilst standing in a neutral position side-on to the wall. Maintaining neutral alignment, she was to push away from the wall, whilst also pushing down on a walking pole with her left hand. This encouraged length and straightening of the thoracic scoliotic curve. Ann found this exercise her 'instant get out of pain manoeuvre'.

Another major landmark success

Finishing college coincided with Ann's final review by the consultant, where she was informed that she would not need to be seen until she decided to start a family. The reason for such subsequent checkups was due to the potential for weight gain and the hormonal release of relaxin during pregnancy to accentuate the scoliosis, up to 1 or 2 degrees per annum or up to 5-8 degrees per pregnancy. On graduating from university in 2008, Ann started full-time employment as a teaching assistant and dance teacher. Spending most of her time on her feet meant that she was much less aware of her 'problem'. Any prolonged period of study however seemed to trigger a return to adverse old postural habits, which would in turn bring back her symptoms, albeit in a lesser form.

Reflecting on inner and outer changes...

Over the years of treating Ann, I have noticed both emotional and psychological changes in her. On my asking her about this, she agreed that she has become more accepting of her condition, and more body-aware both negatively and positively. At times she would look at other people's backs and compare them

with herself, but when out socially or when exercising, she would wear her hair down to cover her back. She also reported being more aware of her posture and that she thought about it constantly when sitting and standing. Having recently attended a yoga class, she felt relieved that the new instructor had never mentioned her scoliosis, which had given her the hope that perhaps it was not as obvious as she might have thought. I found this interesting because it showed how we can become subject to 'labels', whether attributed by others, or adopted by ourselves.

Ann has also come to understand how she can help herself in those times of need, rather than rely on therapeutic support and treatment etc. With renewed confidence, she has now completed a four-month trip to New Zealand, the South Pacific, and Australia. As a precaution, we did arrange treatments just before and immediately after her journey.

After arriving home in August 2009, she returned to college on a teaching training (PGCE). We introduced more regular treatment sessions to help her through this study period. Now working full-time as a teacher, Ann is completely free of pain and we meet on a two-monthly rota for maintenance. She is also continuing with her dance. Throughout the years of working together, I have always found her a willing, compliant participant utilising any new exercise or postural advice that I might have offered.

More learning... and consolidation

In June 2010 I attended a workshop on Integrative Fascial Release led by Steven Goldstein. With this new information and the techniques learned, I am now working towards a better position for Ann's right shoulder. While it is unlikely that it will ever mirror the left, more or less 'normal' girdle alignment, the work is certainly making the shoulders look more balanced, and more importantly she is now reporting very little pain after computing or writing work.

Having nearly finished writing this article, I have just completed a repeat of Robert Schleip's Fascial Release Work around the thorax with special emphasis on dealing with Idiopathic Scoliosis. Although this was supposedly a 'repeat' of the 2004 workshop, it was not all the same, and I therefore acquired further skills, knowledge, and understanding of this condition along with further exercises to help proprioception.

Reflective conclusion

As an experienced therapist, I am constantly surprised to find new techniques that enhance my methods of working – as my experience with Ann illustrates. By approaching her problem with an open mind and using my knowledge gained from inspirational CPD, I was able to help her considerably and increase my own professional expertise. I am proud to have been able to help her in so many ways. The experience also demonstrates how myofascial release techniques can replace more drastic procedures such as surgery.

CPD Workshops attended

Thomas Myers	4-day Introduction to The Anatomy Trains 1 day Myofascial master class
Robert Schleip	Fascial Release around the thorax with special emphasis on dealing with idiopathic scoliosis www.somatics.de
Judith Aston	Aston Postural Assessment www.astonenterprises.com
Steven Goldstein	Integrative Fascial Release www.fascialrelease.com

CPD providers

www.ultimatemassagesolutions.co.uk
www.bodyworkcpd.com

References

Myers T. W. (2009)	Anatomy Trains. Edinburgh: Churchill Livingstone (2nd ed.) www.anatomytrains.com
Judith Aston	Aston Postural Assessment Workbook. Pro.ed

The diagrams are my interpretation of information received except the Harrington Rods which are from www.spineuniverse.com

Expand your knowledge, enhance your skills

Kinesis UK short Workshops and KMI Training in Structural Integration

For further information on any of the courses listed, please email/contact as per details below – thank you for noting that these are NOT ISRM courses.

Short Workshops

- 28/29 January 2012 **FRSB Tensegrity Spine** James Earls Exmouth, UK
info@massage-clinic.co.uk
- 17/18 March 2012 **Anatomy Trains** Mike Doxey Exmouth, UK TBC
- 28/29 April 2012 **Anatomy Trains for Movement Therapists**
Mike Doxey Bristol, UK
Pilatesmoves@hotmail.co.uk
- 29/30 May 2012 **Anatomy Trains** James Earls Bangor, Wales
Phil.brown@muscleandmovementhealth.com
- 02/03 June 2012 **Anatomy Trains for Movement Therapists**
Mike Doxey Chippenham, UK
info@santoshastudio.co.uk
- 29/30 September **Anatomy Trains** Mike Doxey Birmingham, UK

Contact details for the above workshops:

E-mail workshops@anatomytrains.co.uk
Tel. +44 (0) 28 9058 0764
Website: www.anatomytrains.co.uk

KMI Training, UK

Attention all ISRM Members! Opportunity to receive KMI Structural Integration... for FREE!

Kinesis UK are again looking for 'outside models' who would be interested in receiving the KMI 12 session series of Structural Integration bodywork.

KMI is a wonderful 'tonic' for your posture and movement, and can be remarkably effective for chronic aches and pains that have their origins in our habit and posture. KMI work is performed on a massage table, or for certain moves on a stool or bench. The practitioner will use their fingers, hands, or arm to contact certain tissues, and then ask the client to move in specific ways while they open and reposition those tissues.

The sessions will take place between April and June 2012 at Kinesis UK's Oxfordshire venue (Weston-on-the-Green Memorial Village Hall, Mill Lane, Weston-on-the-Green, Oxfordshire OX25 3QR). As there are limited public transport options to the location, it is strongly recommended that volunteers ensure they have independent motorised transport.

Models will be required on twelve specified afternoons within the following periods:

- 16-27 April 2012
- 14-25 May 2012
- 19-30 June 2012.

PLEASE NOTE THAT you will imperatively need to be able to commit to all 12 dates. Kinesis UK are happy to provide these sessions for free (the normal cost would be £600 to £1200). All course delegates are professional bodywork practitioners expanding their skills.

Kinesis UK are looking for people of both genders, over the age of 18, who are basically healthy, and who think they would benefit from receiving KMI sessions. If you are considering enrolling on the KMI training, this would be an excellent opportunity to familiarize yourself with the tutors, the teaching style, classroom atmosphere, and nature of the work being taught. If you are interested in signing up, then please get in touch with Kathy Green on 028 9058 0764 or atkathy.green@anatomytrains.co.uk,

Please note that places will be filled on a first-come, first-served basis. Please feel free to pass on these dates and contact details to anyone you think might be interested in these free sessions. Thank you! – Kinesis UK

Advance notice: Kinesis UK are also just finalising an UK-based workshop series with Til Luchau, and a Russian Massage course with Oleg Bouimer in 2012:

UK-based workshop series with Til Luchau

This Advanced Myofascial Techniques workshop series presents a comprehensive system for working with the body in its entirety, encompassing over 20 session sequences and more than 200 techniques, tests, and procedures. Completion of the five principal courses in the series leads to optional Certification in Advanced Myofascial Techniques (CAMT). Three courses will be offered in the summer of 2012 with James Earls Workshops:

- **Pelvis, Hips & Sacrum I & II plus Sciatica I** - Oxford June 15-17th
- **Neck, Jaw & Head I & II plus TMJ I** - London June 22-24th
- **Spine, Ribs & Low Back I & II plus Headaches I** - London June 29th - July 1st

Co-sponsored by **James Earls Workshops**, this very popular series of seminars presents practicing somatic therapists and qualified students with advanced and little-known myofascial techniques which can be easily incorporated into existing personal styles. Drawing on a wide range of disciplines, the focus is on unusual, interesting, and fresh approaches that will both expand technique repertoire and inspire creativity and innovation. Please note that there is a brief list of anatomical structures to review prior to the course (available at www.Advanced-Trainings.com).

Russian Massage course with Oleg Bouimer

Two full days' intensive workshop – Newcastle 5th - 6th May 2012
'Charge Your Life by Super Charging your Massage' – Take Advantage of this Special Event: £230

- Utilise the Science of Massage Therapy in your practice.
- Flow with the easy to follow protocol for a 90 min training massage.
- Efficiently use your hands with the wide range of new kneading techniques.
- Stand out from the competition by using 15 main concepts of Massage Therapy.
- Work deeper with less effort.

The wide range of kneading techniques is explored as your main tool in working with muscle while the biomechanics of the therapist are addressed also. This will be an invigorating hands-on course with emphasis on working deeper with less effort. It presents scientifically developed tools of massage therapy as an integrative part of the training process in sports. This will give you an edge when working with professional athletes as well as fitness enthusiasts. **SuperCharge Your Massage NOW.**

Oleg Bouimer, Director of Advanced Studies at Southern California Health Institute and a former professional athlete from the Ukraine, has been a researcher & educator for over two decades.

This intensive workshop is based on decades of scientific studies of the effects of massage on athletic performance in the former USSR. It offers a blend of scientific facts, presented in understandable terms, and their practical application. It covers pre-event, post-event and training variations of sports massage.

This course is about having **FUN** while learning how to boost your existing practice **NOW**

To join us on this unique opportunity – contact our office for more information: workshops@anatomytrains.co.uk



Expand your knowledge, enhance your skills

Details of all other CPD workshops can be found on the ISRM website

**Hampshire-based CPD & tailored under-/post-graduate
tuition programme with Tanya Ball**

A wide range of high quality courses and workshops are available for all levels throughout the academic year in Kempshott (M3 J7 just South of Basingstoke).

The winter/spring 2012 CPD/Tutorial Programme is now available to view and download at www.tmb-src.co.uk, or can be requested by e-mailing Tanya@tmb-src.co.uk

Please note the 'Early Bird Discount' applicable to any courses booked and paid for by Friday 27th January 2012

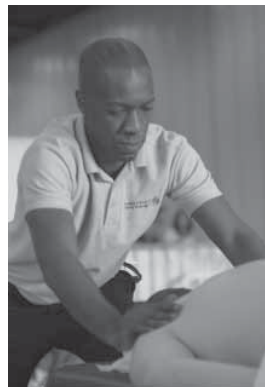
Thank you in advance for your interest.

Tanya Ball MSc BA BCSI LSSM MISRM MCNHC MIASI

Sports Massage & Remedial Therapist – Board Certified Structural Integrator

For further ISRM-accredited CPD workshops and courses, visit www.theism.com

London Triathlon unforgettable moments - Peter Storry





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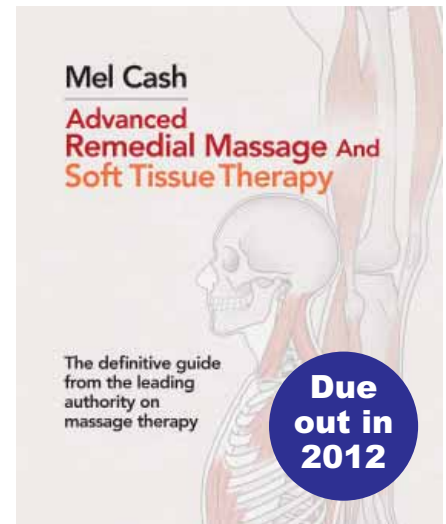
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Movement Therapies (JBMT).



Journal of Bodywork and Movement Therapies

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Associate Editors: **John Hannon, DC, USA; Glenn M Hymel, EdD, USA;**

Dimitrios Kostopoulos, PhD, USA; Craig Liebenson, DC, USA;

Prevention & Rehabilitation: **Warrick McNeill, MSCP, UK; Matt Wallden, DO, UK**



Journal of Bodywork and Movement Therapies brings you the latest therapeutic techniques and current professional debate. Publishing highly illustrated articles on a wide range of subjects this journal is immediately relevant to everyday clinical practice in private, community and primary health care settings.

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Below are a selection of websites that might be of interest to you. If you have discovered some others that you would like to share, please send them along to admin@theism.com Thanks

www.acupressure-training.co.uk

www.news.bbc.co.uk/1/hi/business

www.getbodysmart.com/ap/muscularsystem/quizzes/upperextremities/menu/menu.html

www.brasschecktv.com/page/57.html

www.thepagerankchecker.com

www.youtube.com/watch?v=25LUX3lgtFU#comment

www.youtube.com/watch?v=eJC9GOZblgk&feature=related

www.youtube.com/watch?v=QZh3NdVP0g8&feature=related

www.youtube.com/watch?v=-3lUJ2Q7hp0

www.youtube.com/watch?v=0R4zRSE_-40



ISRM is on the Sport and Remedial Therapies Council, which is recognised by CNHC as the lead body for Sport and Remedial Therapies.



Complementary & Natural Healthcare Council

ISRM Therapists can register with the Complementary and Natural Healthcare Council which is backed by the Department of Health

VALIDATED SCHOOLS



LONDON SCHOOL OF SPORTS MASSAGE
Central London & Southampton
www.lssm.com



Oxford School of Sports Massage
Oxford
www.ossm.co.uk



ACTIVE SCHOOL OF COMPLEMENTARY THERAPY
Loughborough
www.activerecovery.co.uk



ACTIVE HEALTH GROUP Manchester
www.activehealthgroup.org.uk



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