



Figure 5-13. CPR technique of erector spinae.

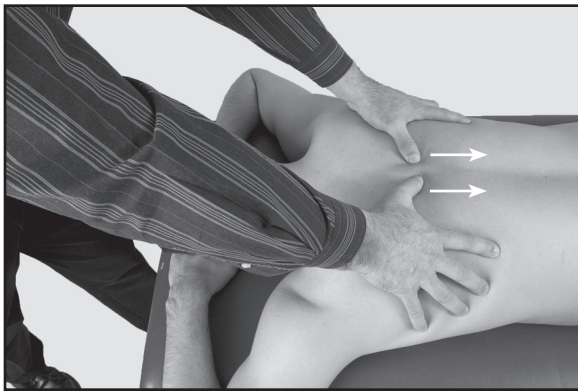


Figure 5-15a. Paraspinal sweep.

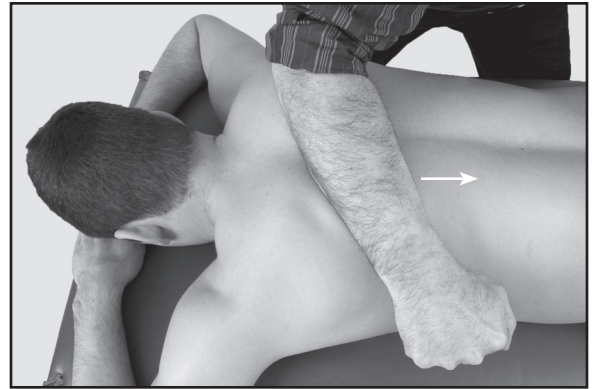


Figure 5-14. Forearm sweeping technique.



Figure 5-15b. Steamroller of transversospinalis.

Erector Spinae Fascial Technique

The myofascial treatment of the erector spinae muscles is accomplished with a variety of techniques, including strumming and muscle play. Another useful treatment method is termed the CPR technique because of how it resembles the manual method used during cardiopulmonary resuscitation (Figure 5-13).

The heel of the therapist's hand is placed in the medial groove of the longissimus thoracis and continues in a lateral direction, imparting a perpendicular stretch on all aspects of the erector spinae. A small amount of Deep Prep II is used to lessen skin friction. The therapist is encouraged to begin at the AGR and proceed from there. To reduce resting tension in the erector spinae, a neuromuscular technique,³⁴ referred to as forearm sweeping (Figure 5-14), is employed. Unlike direct fascial techniques, which are applied perpendicular to the orientation of the myofascial tissues, forearm sweeping, a form of stripping³¹ massage, is

applied parallel to the muscle fibers for the purpose of neuromuscular relaxation.

Transversospinalis Fascial Techniques

There are several techniques that address the deep spinal musculature found between the spinous and transverse processes (ie, the medial groove of longissimus). These techniques apply manipulative contacts in a direction that is caudal or cranial and thus at an oblique angle or at times perpendicular to the fiber orientation of the transversospinalis muscles (eg, semispinalis, multifidus, and rotatores). Such techniques include the paraspinal sweep, steamroller, and bilateral thumb oscillations (Figures 5-15a to 5-15c).

These fascial techniques are useful in detecting and treating hypertonicity and myofascial trigger points of the transversospinalis muscles. These areas of myofascial