Connecting Tissue and Medicine

A Conference and Workshop led by Tom Findley, M.D., Ph.D., and Robert Schleip, M.A.

August 12th and 13th, 2005

Reported by Jason DeFilippis, Certified Rolfer

On August 12th and 13th, Robert Schleip and Dr. Tom Findley brought together structural integration and medicine in a ground-breaking conference and workshop. These events were specifically designed for healthcare givers and structural body workers to learn more about the role of fascia and structural integration in the biological functioning of the human being. These events were created in order to raise attention and funds for structural integration research. Tom, Robert and others need funding to continue researching structural integration and fascia. Some very promising results have been documented. Support is what is needed now in order to bring some of these research projects to fruition.

Robert Schleip is Director of the Somatics Academy, Munich, Germany. He is also a Certified Advanced Rolfer, a faculty member of The Rolf Institute®, Feldenkrais practitioner and faculty member of The European Rolfing® Association. As an instructor, research scientist and host of www.somatics.de, Robert is an extremely valuable member of the international scientific, structural integration, and bodywork communities. His work as a scientist is at the forefront of what we know about fascia today, (see www.fasciaresearch.com). Thomas W. Findley is Co-Director of the Center for Healthcare Knowledge Management at the East Orange Veterans' Administration Medical Center, and Director of Research for The Rolf Institute. Dr. Findley's approach to patients combines his training and interest in many areas of medicine and healthcare. He uses his knowledge and skills as a Rolfer and physician to treat patients. His current research focus is on the treatment of veterans with medically unexplained conditions (learn more about Dr. Tom Findley at: http://www.njpainandrehab.com/bios/tfindley_bio.htm).

ROBERT SCHLEIP'S PRESENTATION: **Neurofascial Dynamics In Structural Integration**

Robert Schleip presented on the relationship between therapeutic stimulation of four different kinds of fascial mechanoreceptors and the regulation of fascial tonus. Rather than working like a sculptor with a plastic medium, the practitioner is therefore seen as communicating with an actively self-regulating, living organism. This has significant applications for the location, timing, and working direction of manual manipulation of tissue. Sustainability of tissue deformation and how long effects last were addressed.

Robert discussed his findings on a scientific basis for the phenomenon of fascial responsiveness. Recent studies suggest that fascia is able to contract in a smooth-muscle-like manner and thereby influence musculoskeletal dynamics. Immediate fascial responsiveness to manipulation cannot be explained by its mechanical properties alone. Fascia is densely innervated by mechanoreceptors, which are responsive to myofascial manipulation. They are intimately connected with the central nervous system, and especially with the autonomic nervous system. Robert discussed how stimulation of these receptors can trigger changes in ground substance viscosity, in gamma motor tonus, and in autonomics. The discovery and implications of the existence of intrafascial cells with smooth muscle-like contractile properties are of special interest in relation to fibromyalgia, amongst other conditions. An attitudinal shift was suggested, from a mechanical body concept towards a cybernetic model, in which the practitioner's intervention is seen as stimulation for self-regulatory processes within the client's organism. Go to www.somatics.de under the link for "new articles" to look at Robert's two most recent papers on fascial plasticity

TOM FINDLEY'S PRESENTATION: **The Effects of Structural Integration on Balance**

Dr. Findley presented case studies utilizing structural integration in the treatment of persons with medical conditions, including chronic fatigue, fibromyalgia, anxiety, stroke, and peripheral neuropathy. In these pilot cases, persons with below normal balance experienced demonstrable improvement in standing balance after receiving manual therapy.

There is a convergence at the raphe nucleus of information processing about balance and bodily position from the vestibular, somatic, and visceral sensory pathways. These same pathways are also involved in avoidance conditioning, anxiety, and conditioned fear. Correction of balance in patients with certain anxiety disorders also may improve the condition of anxiety. This poses some interesting questions regarding the relationship between structure and function. Dr. Ida Rolf has said that if someone is not able (through his body) to adjust to his environment, insecurity will be the state of his body and thus the state of his mind. Dr. Findley's approach to the fundamental principles of structural integration is both scientific and intuitive. He discussed balance as an in-depth issue susceptible to scientific inquiry.

In addition to his position as a research scientist at the Veterans Administration, Dr. Findley has also instituted a structural integration program there. He has been using structural integration successfully in the treatment of patients with unexplained symptoms, as well as with spinal cord injury patients. Having started the structural integration program at Kessler Institute for Rehabilitation, Dr. Findley is familiar with what it takes to begin and maintain such a program. He is confident that in the near future, structural integration will become widely available in the Veterans Administration healthcare system. Part of Dr. Findley's presentation focused on teaching some of the medical practitioners at the conference about structural integration and the importance of working with structure.

DR. HANS CHAUDHRY'S PRESENTATION (Ph.D., Mathematician, New Jersey Institute of Technology):

Connective Tissue Deformation With Pressure

Structural integration works in part by re-adjusting the body's fascial layers in order to allow it to function better and to adapt to outside forces, particularly to the effects of gravity, environment, and psychological stresses. Dr. Chaudhry and his team are measuring the change in fascia when pressure and shear forces from structural integration are applied to it. They are making some interesting discoveries. They have mathematically modeled a significant relationship between pressure and shear. This relationship could account for what we as structural integrators experience as "sinking into the tissue" and the subtle relationships that are involved in the right kind of touch needed in order to effect change in tissue.

WORKSHOP

The day following the conference, Tom and Robert hosted a workshop, the intention of which was to give a more practical, hands-on approach to the previous day's lectures. There was even fresh fascia on hand for us to play with. The response from the attendees was so positive that another workshop is being considered. $2,000.00 was raised. This money will go toward structural integration research.

RESEARCH MEETINGS

In conjunction with the conference and workshop, meetings were held, the purpose of which was to begin to define potential directions for structural integration research. Some very important members of our community were there, either in person or by phone. Many excellent ideas were discussed and the general goals of the meetings were met. Some topics include:

What ought to be the current purpose of research? Should research be directed toward gaining publicity and ultimately funding for learning more about structural integration, or should research be more for the purposes of the procurement and dissemination of knowledge within the structural integration community? How do we engage with one, the other, or both?

What are the various and potential mechanisms of fascial responsiveness?

The further exploration of the relationship between balance, structure and common diseases and syndromes such as anxiety, chronic fatigue syndrome and fibromyalgia.

The accounting for autonomic tone in both the practitioner and in the client/patient and the relationship between the two vis-à-vis the proliferation of change in fascia.

A common protocol for the Ten Series. As an attempt to standardize the ten sessions of structural integration for research purposes, a list of contacts and observations was adapted from Ed Maupin's book *A Dynamic Relation to Gravity*. We have been talking with certain members of the structural integration community regarding the future of this document or the creation of a new one.

What equipment is available to the structural integration community with which to conduct and participate in scientific research? ❑

On behalf of the Rolf Institute Research Committee we thank all who contributed to the success of these events. We would especially like to thank Robert Schleip, the supportive staff and faculty at the Rolf Institute, and Marilyn Beech and Michael Vilain of the IASI. Special appreciation is given to Bethany Ward for invaluable assistance in conference planning. And we would like to thank the director of the East Orange VA Medical Center and staff of the War-Related Injury and Illness Study Center for making facilities available for the conference.

For questions regarding The Rolf Institute Research Committee or structural integration research, please contact:

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