



Derek Metzler of Church Hill's Restore-PT demonstrates the similarity between orange pith and the body's fascial system

ASH DANIEL

HEALTH

Soft Power

For those in pain, the gentle practice of myofascial release therapy could be an effective alternative treatment

By Emma Coates

Explaining the type of physical therapy he practices, Derek Metzler has a rather unusual way of visualizing the body: as an orange without its peel. “Look at that white tissue called the pith; you can see that it sort of wraps around the fruit and then dives in and connects each wedge,” he says. “If you cut a wedge open and look inside, it’s what creates all the little juice pockets that hold in the water of the fruit.”

This, Metzler says, is remarkably similar to a system in the body called the fascia — a three-dimensional web of connective tissue that covers us from head to toe, wrapping around muscles, blood vessels, nerves, ligaments and joints — which is gradually gaining more attention for its

apparent ability to relieve a number of common ailments.

Metzler is, to the best of his knowledge, the only physical therapist in Richmond who focuses on myofascial release therapy (MFR) to treat patients suffering from back, neck, knee, hip or jaw pain, as well as migraines, fibromyalgia, chronic fatigue syndrome and women’s health issues. There are other disciplines that use MFR, but massage therapists, for example, typically see less complicated, less serious cases, while sports medicine specialists tend to incorporate some of the principles of the therapy alongside myriad other techniques.

But at Restore-PT in Church Hill, MFR has been so effective that Metzler has made it about 90 percent of his →

← **HEALTH** | treatment offering. “It was really just results,” he says of his belief in the therapy. “I was making progress with people that I couldn’t before, or they were getting better faster.”

Many patients who come to him have tried other treatment options, from surgery to acupuncture, to no avail. Dan Kohler is one such patient. After a chiropractor told him there was not much he could do for the pain that his herniated L5 vertebra and spinal stenosis was causing him, his wife suggested he try MFR. “I was very skeptical,” Kohler says. “But when you’ve got this kind of pain, you get desperate.”

GENTLE BUT EFFECTIVE

When fascia becomes “restricted” — thickened, hardened or shortened — by injury, trauma, disease, poor posture or repetitive actions, it can create pressure on everything from nerves and blood vessels to intervertebral discs and ligaments. This can cause any number of previously unexplainable symptoms, including pain, numbness, tingling, aching or burning.

MFR begins with a postural evaluation to identify fascia that has been restricted. This is followed up by a hands-on palpation exam, where the therapist begins to “feel into” the tissue. “We look for areas where the tissue feels dense and stiff and it’s not as pliable,” Metzler says. Then, with gentle but firm sustained pressure that is held on the body for up to seven minutes, the therapist can start to “release” the restriction.

The subtlety of the treatment surprises a lot of people when they first try it, Metzler says, but the results put any skepticism to rest. This was certainly the case for Kohler. “I got on the table, and he takes my left arm, and puts some pressure on it, and just holds it there,” Kohler says of his first meeting with Metzler. “And maybe three, four minutes go by, and I’m beginning to think, ‘This is ridiculous.’”

Then, suddenly, Kohler says, “my right hip dropped, and the relief was remarkable.” The 61-year-old estimates that his pain rating dropped that day from about nine and a half (with 10 being the worst pain) to about seven. “That’s a big change.”

For some people, a couple of treatments is enough, and they don’t need to come back, Metzler says. For others,

it’s a process that has to be worked through, and the release of one restriction can reveal others — which was the case for Kohler, who found that previous shoulder and neck injuries began flaring up as his back and herniated disc was improving.

Working backward through each injury is part of the healing process. “Healing is not always comfortable, so when you sprain your ankle and it swells up, that’s the body’s way of healing it,” Metzler says. “Sometimes things feel like they’re getting worse before they get better.”

MARKED IMPROVEMENT

Starting out with twice-a-week visits to Restore-PT, with the odd “intensive” here and there (a four-hour session one day, followed by four hours the next day, “to sort of break you through to the next level”), Kohler now sees Metzler about every two weeks. His pain level is down to between 1 and 2.5, which he philosophically accepts as a fact of life for a stenosis sufferer. He sees his relationship with MFR continuing, but more on the basis of physical maintenance than a need to deal with pain and dysfunction.

Given its apparent successes, why is MFR not better known as a pain treatment? “We never really studied [the fascial system],” Metzler says of his physical therapy education back in early 2000. “All that tissue we just sort of pulled apart so that we could see the muscles.” Another reason is that most of the information out there so far is anecdotal — although Metzler says that gradually, more research is being done on fascia and how it operates.

Dr. Maged Hamza, director of the VCU Spine Center, acknowledges the therapy’s effectiveness as a complement to specific exercise programs for patients with chronic low back pain. “Myofascial release should be considered a useful adjunct,” he says. “[There’s] some question if the therapy yields a placebo effect, but it’s noteworthy that there are no serious side effects.”

For Kohler, his own evidence is all he needs. “I am not privy to the research on it, or what anybody said; I can just give it to you anecdotally: a really marked improvement. It’s pretty amazing.” ■