

How Prior Injuries Contribute to Chronic Pain and Dysfunction – Part 2

Lisa Klein, PT



Rebekah Kelley: Welcome to the Humanized podcast, all about personalizing your health. I am your host, Rebekah Kelley. Here to share her knowledge today is Lisa Klein, a physical therapist, and the subject of the podcast is, how does manual therapy help to reset prior injuries to fix current pain and dysfunction. And before I introduce Lisa, I want to remind everyone to subscribe, to get all of our variety of casts in audio, video and transcription at HumanizedHealth.com. I'd also like to thank our lead sponsor, Village Green Apothecary, at MyVillageGreen.com.

Thank you, Lisa, for being here. So grateful to have you. A little bit about Lisa. She is a physical therapist, the founder and owner of Total Health Physical Therapy, a PT practice specializing in manual therapy and total body rehabilitation. Lisa has spent the entirety of her 30-year career pursuing excellence in manual medicine and total body-mind healing.

Welcome Lisa. Thanks for being here. So, if you know there's a prior injury contributing to your physical pain today, what can be done about it? Can it be fixed?

Lisa Klein: So this is what we do all day long – yes. So this is often the key to turning around somebody who's been in a chronic pain paradigm – finding out why. And the work that we do really parallels a lot of the research coming out that is backing up doctors using the PRP and the prolotherapy to release fascial binds. We do it with our hands, obviously, and we feel like we can go really deeply and comprehensively that way.

So, yes. Fascia is an important tissue that will bind and protect any tissue that's been injured. And often if it's a soft tissue, it's an artery or nerve or something very important to the body that's been injured and is locking down. So we take our hands and we go to those areas and we free them up using a variety of fascial techniques.

So we have about 20,000 fascial techniques that we use – 20,000 because we work on every different tissue differently. They all hold load differently. And then we work to reset them to where they were before the injury. So the goal is basically to make whatever happened to them unhappen. But every tissue has its own biomechanics, meaning how it moves, so we need techniques for every single tissue. So we work on nerves, arteries, veins, limbs, organs, whatever. We work on every type of tissue. And the goal is to free up whatever got stuck and then reset and help the patient go on their merry way without any more pain.

Rebekah Kelley: So how, I mean, you said you have 20,000, but can you give us a little bit of an idea of how the techniques work and does it stay fixed, or do people have to come back and see you again?

Lisa Klein: What we do is with the hands on, so using the hands in different ways to manipulate the tissue. It's not at all like massage, people think about, that "I love massage," but everything that we do is a little bit more gentle than that. Trying to get to that all important fascial tissue. And once we find the problem and work to fix it, it holds, because [we're] trying to find the why or the driver of the problem, which is usually an area that has been damaged and needs to be helped a little bit to heal. So if we're doing our jobs, then the problem should stay fixed. It's just a matter of how many layers are there, to fix the problem. We work with a lot of patients with ... we mostly work with patients who have failed regular PT. So we work with a lot of patients with fibromyalgia, chronic fatigue, vertigo, tinnitus, concussion, POTS, just all kinds of more complicated structural issues. And the goal is to treat enough so you hit critical mass so the body can then heal. But the longer it's been there, it can take some time.

Rebekah Kelley: Now, obviously something's being repeated, like if someone is, I don't know, carrying a really heavy shoulder bag on one side, right? Then it's going to, they're going to come back to see you.

Lisa Klein: Yeah, that's not great. But the more, the worse things are people... like I have had people who were [on] horseback, like they would jump horses, and I'm like, whatever you do, don't fall off your horse. And they fall off their horse. You know, if the trauma is worse, so if they're involved in a high-level sport, we'll often have them take a little bit of a break because they're just continuing to irritate the tissue, and yes, if they're doing something that's irritating it over and over again, that's not very helpful.

Rebekah Kelley: Typically, how much time do people spend? Like if they're coming in for something. I'm assuming it varies, but is there kind of a general perspective or range?

Lisa Klein: If they're coming in for headaches or radicular pain, it usually takes us about five visits to start to knock things down a little bit. So we have them come in once a week for about a month or month and a half, and they should have a nice move forward. We also give them things to do at home. And then from there, they either come in every week or every other week and we start to decrease the frequency.

Rebekah Kelley: I was wondering if you gave them homework, I assumed so.

Lisa Klein: We do. We give them what's called processing, which is holding different parts of the body to help the metabolism continue to change. And we're very big on ice. We love ice. So yeah, we have patients do ice programs, cause it's the easiest way to run a nerve off, is to ice the heck out of it. So we have them ice quite a bit.

Rebekah Kelley: Right. And you know, if someone's had an injury a while ago, right? I'm going to use myself as an example. I broke my wrist back in December of 2019, went through physical therapy. I lift weights. I use it all the time, but there's still certain things I can't do or that are very sensitive to [do]. Obviously, the bone is very strong. Is that something you can help with?

Lisa Klein: Sure. Often there are remnant bone bruises that need to be manually fixed and things like that, where you have to manually reset the tissue. Often – I'm sorry, was it broken or it was just sprained?

Rebekah Kelley: Oh no, all three bones. It was pointing in that direction.

Lisa Klein: Right. If you have enough force to break the bone, think about what happened to the ligament, the tendon, the artery, then there is all this stuff that's actually way more important than the bone, to be honest with you. The bone is like, who cares? It's just the bone. But the bigger issue is, how's the artery doing? How's the nerve doing? And all of those soft tissues will swell and then scar. And that's where the fascia comes in. It locks it down and then it just stays locked. So, yes, what we would do in that case, you're already doing the functional work. So we would work on the structure to get the structure back to where it was before the accident.

Rebekah Kelley: And I know also it took like 7 hours before I was seen, because I wasn't as important, you know, it's just a broken bone. So 7 hours of the tissue being probably damaged, or whatever. I'm sure it takes a little while for it to recover.

Thank you, Lisa, those are really important... and especially for me, I certainly learned something that could be very helpful. Lisa Klein can be found at www.TotalHealthPTDC.com. Let me remind you to subscribe and get access to all Humanized videos, podcasts and transcriptions from all of our thought leaders on personalized health at HumanizedHealth.com.