

What is Manual Therapy?

Lisa Klein, PT



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Rebekah Kelley: Welcome to the Humanized podcast, all about personalizing your health. I'm your host, Rebekah Kelley, and today we'll be discussing What is Manual Therapy, with Lisa Klein. Lisa, thanks for being back with us, veteran podcaster. Lisa's a physical therapist. And before I introduce Lisa, though, I want to remind everyone to subscribe and receive all the 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.

A little bit about Lisa. She is the founder and owner of Total Health Physical Therapy, a physical therapy 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.

Lisa, thanks so much for being with us again. It's always a pleasure.

Lisa Klein: My pleasure.

Rebekah Kelley: So I'm going to just jump right in there. What is manual therapy? Please educate us. Let us know what you spent this past 30 years doing.

Lisa Klein: [Laughs] Seriously. So most people, when they think of physical therapy, when they hear those words, they think of exercises, ultrasound modalities, heat-cold packs, e-stim [electrical stimulation], which is all great stuff. But my interest was always more in doing hands-on care. I'm not sure why. I mean, people kind of gravitate towards different modes of treatment. So from the beginning of my career, I was always really interested in hands-on. So I had taken some massage training, I'd mess around with classmates during labs and I'm like, oh, you know, the hands-on stuff really is kind of effective. So it really piqued my interest. So throughout the course of my career, I started to take manual therapy classes in terms of trying to figure out, okay, what does this do, and is it something I could specialize in? My first several classes were with the Upledger Institute in Florida. John Upledger was a really brilliant osteopath, and he popularized craniosacral therapy. He also did a lot of myofascial release and he was kind of like the Grand Buba of manual therapy for a long time, in terms of taking it into more of a craniosacral direction. We can talk about it, as well. But I started going to the classes and it was so different from what I learned in PT school. But I was really intrigued by what the hands could do. And I think one of the things that, it's on my homepage of my website, it's like the whole concept of putting your hands on someone and helping them to feel better is kind of basic. You know, it's been around for thousands of years, like before we had any type of medical care, we always had our hands. And I feel like in a lot of ways, to go back to some of those ways of healing that actually are really effective is kind of a good idea.

Rebekah Kelley: It's a very good idea. Yes, yes.

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Lisa Klein: Thank you. So what we noticed was that a lot of patients who come in have issues and not everything shows up on an x-ray. I had a patient bring in her MRI today and the MRI and the labs and the patient presentation may or may not line up. And one thing that I was learning during all of my training was that sometimes the manual diagnostics and assessments are actually more accurate in terms of figuring out what's happening in the body. So I can't tell you how many times patients come in and the MRI is clean, the labs can be clean, and we find all kinds of stuff to treat. Because the hands are actually very sensitive and they can be trained. So throughout my training, I started with Upledger craniosacral myofascial release, I did a ton of St. John neuromuscular training, which is like a very pointed massage kind of technique. And then I started studying with the lady who became my mentor, and what I'm continually surprised about every day is how much the hands can do, and how they can be trained to not only find problems, but also fix problems. And so yeah, it's kind of an interesting situation there.

Rebekah Kelley: So, I want to go back to this hands healing concept. Because I think I had that experience, but differently, not in physical therapy, but I had actually broken a wrist and it was being reduced, and I wasn't on any painkillers, they just did a local, which was still painful. And the nurse just came in and held my hand and I went from almost like screaming pain to sudden peace, despite... Just the touch of her hand was amazing.

Lisa Klein: Yeah. I have patients, I think, who keep seeing see me just because we provide hands-on care, because everybody's so touch starved. So, in this country, we've moved away from a lot of those more primal and kind of intuitive ways of treating patients. We're very pharmaceutical based, which there's a time and a place for, a very surgical place. There's a trauma, a time and a place for, but those are not the only games in town. And traditional medicine, hundreds of, maybe 120 or 30 years ago, there were a lot of other modalities around osteopathic medicine, chiropractic, naturopathic medicine. There were other modalities that were being used. And so what we do in terms of the hands-on care is most similar to traditional osteopathic medicine, especially European osteopathy, where we put our hands on, we feel what's going on. And one of the things that is really interesting is that when you train your hands, like everybody's familiar with how comforting it is to touch someone, hold somebody's hand and just be touched. Right? The up-step from that is massage, which is fabulous and feels amazing.

Rebekah Kelley: Amazing.

Lisa Klein: I'm totally for massage. Yeah, totally for massage. When the goal is to turn around a child with cerebral palsy or autism or someone who has two failed spinal fusions, massage is good, but it may not really get into the tissue in the way that you really need to, to turn around a neurological paradigm. And that was always my interest. So massage is one of my first trainings, in craniosacral, which is great. The thing that's really interesting is that our bodies are not solid. Our bodies are made of thousands of layers of tissue, all of which is moving, all of

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which is connected, and all of which is communicating and trying to keep you alive and healthy and well.

And what we found over the years is that when you put your hands on and the hands are trained to feel these different layers, you can pick up in the patient's body, what's the problem. You can feel all kinds of physical issues. You can feel emotional issues. You can feel all kinds of things that are set in the body. We're going to talk in the next segment about more specifics of myofascial release. But the hands can be trained to pick up all manner of things. And it's really interesting. The body, in some ways, it's like a big cocktail party where every cell is doing its own little thing and everybody should be happy, and they're in their little space and doing their own little metabolism, and it shouldn't be like, I can't do my work because of the liver or the adrenals or because somebody poked me in the eye or something. So what we are trained to feel manually is, okay, who is not okay, who is unhappy? And also, why are they unhappy?

So we have many patients who come in with all kinds of spinal issues, all kinds of hip pain, back pain, knee pain, headaches and stuff. But what we're looking for is where's the root of the problem. And often the root of a chronic, annoying, painful, function-limiting issue may not be something that's going to show up on an MRI or a CT scan. There's a whole world of tissue disruption that is not bad enough to show up on imaging. So imaging is great, do it to rule out things that are very severe, but just because you have a clean MRI or CT scan doesn't mean you have nothing going on. And we see that every day.

Rebekah Kelley: So, the way you describe it, it's this beautiful symphony, right? That there's some things that are maybe out of alignment or maybe the oboes, not in playing the right key or something. You've got to kind of really understand what's happening with that music and you have to put your hands on it to kind of discover it. Can you give us an example of something that you... Are there any successes, if that's the right word, that pop to mind that you could share with us?

Lisa Klein: 8 million. So, yeah. [Laughs]. One is, we had a patient who came in originally, who had had years of foot pain, just all kinds of issues in her feet. Both feet. She'd had some surgery, but still the pain. And in my experience, often chronic foot pain is actually coming from the spine because the nerves that come out of the spine that go down to the feet are very long, which sounds like kind of a silly thing to say, but there are many opportunities for those nerves to get clipped. And we call that a crush. So you can have single crushes, double crushes, that the actual symptom that you feel is not going to be at the area of the problem. So again, how we're trained through – I mean, I've had thousands of hours of training and practice – is to put our hands on and say, okay, what's the problem. So we put our hands on the feet. Are you good? What's happening here? Is there inflammation? Is there scar tissue? Like, what is in the feet? And then we work our way up, like what's going on in the knees and in the hips and in the pelvis and the spine, and then the head. So with this patient, the problems actually were further up the chain, more like in her head and neck. And we've been treating that and it took six visits and her foot pain is like, gone.

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Rebekah Kelley: That's amazing. What a wonderful thing for her to have you help solve, right? Because, I mean, your feet are so important to you, where you're walking, you're moving, you're living your life and if it's hard to move your feet around... wow.

Lisa Klein: Yup, yup.

Rebekah Kelley: I love this story. Is there anything else that you'd like to share with us today that perhaps I didn't ask about that you think might help someone who's potentially considering physical therapy and particularly your hands-on modality?

Lisa Klein: I think the thing would be, don't get discouraged. You know your body, if you're in pain, if you're having a hard time, so what if the MRI is clean, or if the labs are clean. That means nothing. That doesn't mean you don't have a problem. So I think for a lot of people, they put too much emphasis on the imaging and on the labs and like, look, I know my body, I know I'm not well. So if that's how you feel, get to a practitioner who has some different ways of assessing what's happening. Acupuncture can do great diagnostics, maybe it's physiology. So it's kind of like, don't stop, keep looking for someone who could really look at you and really look to see what is happening there in a more subtle way. You don't have a tumor, you don't have terrible things happening, but that doesn't mean you don't have problems. And again, we do the manual diagnostics because we find them to be pretty accurate, which is awesome.

Rebekah Kelley: Thanks, Lisa. That's very valuable information. Lisa Klein can be found at Total Health PTDC. I'm going to spell that for you. T O T A L H E A L T H P T D C.com. And also 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. Thanks so much for being with us. Lisa it's always a pleasure.

Lisa Klein: It's my pleasure. Thank you.