

I was drawn to this article, published online in October 2016 in the *Journal of Chiropractic Medicine*, after a recent conversation with a patient regarding the benefits of chiropractic care that includes myofascial therapy vs. adjustment alone. Throughout my own history as a chiropractic patient (my first treatment was after a car accident when I was 13) and later as a student and now provider, I have seen first-hand the benefits offered by soft tissue therapy. Our joints are supported and moved by the muscles, ligaments, tendons and fascia, collectively known as the soft tissues. When trigger points or knots, tightness or injury occur in these tissues, how can the joints *not* be affected?

The results of this study demonstrate the benefits of both passive and active soft tissue therapies. While details are not provided on specific interventions, I suspect the passive therapies included some form of MRT (myofascial release technique), which is part of most chiropractic treatments I administer. I imagine the active therapies to be something similar to a Grade 5 MRT, in which a patient moves through a range of motion while the trigger point is stripped or compressed. I also perform this type of treatment when indicated.

Interestingly, another conclusion of this study that no changes in ACLF (the lateral flexion or side bend) range of motion were identified after the 1 week trial leaves me questioning whether a longer trial would demonstrate a different result. In the majority of patients I examine after 3-4 weeks of therapy, an improved ROM, often significant, results.

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