

Fascia, Fascial Restriction, and Myofascial Release

Myofascial Release is a burgeoning modality for treatment of soft tissue dysfunction. It has gained in popularity due to the efficacy of myofascial techniques to reduce pain and discomfort at various levels of tissue and provide lasting relief of structural deviations in posture. So what is fascia? How does it become restricted? And how can myofascial techniques be employed to release fascia?

Fascia is a mesh-like connective tissue that permeates the body. It can be imagined as layers of connective tissue acting like shrink wrap for the body. Like cartilage between joints, fascia reduces friction between muscles that would otherwise work against muscular force.

At the deepest levels these layers of connective tissue are responsible for suspending our organs and keeping them in place. These structures are known as **Visceral Fascia**. The median and most common fascia that is treated with bodywork is **Deep Fascia**. Deep fascia are the structures that encase bone, muscle, nerves, and blood vessels. Close to the surface, **Superficial Fascia** lies within the skin at the reticular layer of the dermis. Though they are identified differently at these different layers, the Visceral, Deep, and Superficial fascia form a single complex network that is unbroken in the body.

The presence of the fascia system is what gives us our ability to know where we are in space, also known as **proprioception**. With the data that fascia provides to our brain, we are able to infer how our body is moving through space as well as the relationship of different limbs and parts of the body to one another. Through proprioception, the dancer has grace, the athlete has poise, and the martial artist has power. Restrictions in the system can distort the information that we are processing, giving us false sense of where we are in motion and potentially leading to greater injury.

Fascial Restrictions can occur during stress, overuse, trauma, infection, and inactivity. The result is tightening, tearing, and bunching of the regular structure of the fascia. Restriction is generally accompanied by pain and muscle tension with locally reduced blood flow. Prolonged fascia restriction becomes inflamed. Recurring inflammation from repetitive stress results in thickening of the connective tissue, also known as **fibrosis**. The thickening causes more pain and irritation and this cycle can create a positive feedback loop leading to more serious somatic dysfunction. This cycle eventually leads to scarring, which replaces the regular matrix of the tissue with a jumble of connective tissue fibers.

Myofascial release techniques can be employed at any point in the cycle of restriction, thickening, and scarring. However, it takes less time and effort to release restrictions when the sub-acute stage of healing has matured (3-14 days after an injury). Most techniques work by engaging a stretch of the fascia without engaging the muscular stretch response which would otherwise pull back. A “release” is when adhesion of the fascia is loosened and the fascial structure returns to its original matrix and position.

There are many techniques to promote release. Skin rolling, J-strokes, S-strokes, arm pulls, leg pulls, and opposing tension can all be used by a competent therapist in a myofascial treatment plan. The work is surprisingly light and has an added benefit of calming the nervous system and encouraging relaxation at the same time.

As with all massage and bodywork, myofascial release should only be used as part of a comprehensive treatment plan between you, your primary care physician, and your massage therapist. Always consult your physician before engaging in massage or bodywork and be sure to fill out intake forms honestly so that your massage therapist can develop a safe and concise treatment plan.