



## **INTEGRATED NEUROMUSCULOSKELETAL RELEASE. CONCEPTIONS AND PRACTICES**

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### **Introduction**

Integrated neuromusculoskeletal release (INR) is an osteopathic manipulative treatment (OMT) technique that has been formalized by Robert C. Ward. INR using a segmental anterior/posterior approach is an osteopathic manipulative treatment technique that is easily learned and applied (Danto, 2003). This approach focuses on both the anterior and posterior connectivity of the body through the neuromusculoskeletal system and uses this connectivity to effectively treat somatic dysfunctions. The whole of OMT has been concerned, purposefully or not, with manipulation of the fascia.

### **Objectives**

The principles of INR are discussed, as well as the role of INR in the diagnosis and treatment of somatic dysfunctions.

### **Results and discussion**

The integrated balance which is applied to the body via the specialized moves is directed to areas where proprioceptors (spindle cells and Golgi tendon organs) abound. However, it is not just single stimulation of these points which elicits such a comprehensive and powerful response in each individual -- rather it is the configuration in which the moves are carried out. To fully understand the diverse role of fascia, it is necessary to explore the neuroanatomy of this structure. According to Beyers and Bonica (2001): It is clinically important that approximately 20% of cutaneous high-threshold mechanoreceptors supplying the skin also have receptive fields in the subcutaneous tissue, usually the fascia.... The stretch receptors of muscle comprise only approximately 25% of the sensory innervation, and the other 75% consists of free endings in fascia of the muscles, between muscle fibers, and in the walls of blood vessels and tendons.

The myofascial continuity of the body, it is important to add that the periosteum, joint capsule, ligaments, joint fat pads, and even blood vessels are innervated with polymodal nerve fibers. Furthermore, the joints are also innervated by "large (group I) and medium (group II.) A fibers that terminate in mechanoreceptive endings that detect the torque that develops as a joint is extended, flexed, or rotated to the extreme of its range. The following lists of symptoms frequently disappear in response to an NST session:

<b>acute and chronic pain</b>	<b>headaches</b>	<b>menstrual problems</b>
<b>back pain</b>	<b>migraines</b>	<b>prostate problems</b>
<b>neck pain</b>	<b>sinusitis</b>	<b>visual problems</b>
<b>shoulder pain</b>	<b>colitis</b>	<b>learning disorders</b>
<b>leg pain</b>	<b>constipation</b>	<b>emotional depression</b>
<b>facial pain</b>	<b>urinary disorders</b>	<b>digestive problems</b>
<b>infertility</b>		

## Conclusions

The Neurostructural Integration Technique is a very powerful and effective advanced Bowen Therapy which can be used to resolve a plethora of health problems, both acute and chronic, in a gentle, timely and safe manner. Results are consistently long lasting for even the most severe and chronic cases. Its place in the field of bodywork is well established, as evidenced by the many hundreds of practitioners around the world

## Bibliography

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