



BEYOND GLOBAL MOVEMENT CONTROL FOR PAIN AND RECURRENCE

COURSE INTRODUCTION:

Hip, shoulder and spine recurrence impacts performance and function across the board. Despite the use of hands-on and movement interventions combined, symptoms often return. The retraining of muscle synergists possessing a global and local role is considered essential in the management of recurrence and regaining the best function for the individual. Deciding whether to start with global or the local role synergist retraining to achieve the best outcome can be guided by assessment. Ultimately, in the presence of recurrence, a finer resolution of movement assessment can more efficiently guide bespoke movement retraining.

This course gives clinicians the ability to identify exactly why, when and how to assess and retrain the synergists that possesses a role in the management of translation deficits within their patients. It supplies targeted retraining strategies to manage episodes of recurrence at the neck, shoulder, hip and low back.

This course supplies contemporary clinical application of research, and questions many of long-held beliefs regarding the assessment, retraining and function of muscles possessing a ‘translation control’ role.

Practical skills will be gained in changing the impairments associated to muscle recruitment with a particular focus placed on the hip, shoulder, neck and low back so as to reduce recurrence and restore confident, sustained pain-free function.

COURSE OVERVIEW

The global movements we observe during function are accompanied by the translations of slide, glide and roll. These translations are managed through muscles synergists possessing a ‘local’ role. In the presence of pain or a history of pain, this system can suffer impairments leading to recurrence of symptoms. The assessment and subsequent retraining of this system can significantly reduce the high incidence of musculoskeletal pain recurrence.

This course harnesses the wealth of knowledge and clinical mileage amassed over decades to deliver contemporary clinical tests, evaluating the recruitment efficiency of local stabiliser role synergists, in addition to specific retraining strategies to recover their recruitment efficiency. The course identifies how individuals can be identified who will respond to local role synergist retraining, allowing for effective and time efficient rehab intervention. The course introduces specific cognitive retraining strategies to change local stabilizer role synergist recruitment, emphasising the need to progress into day to day function. Reducing recurrence and restoring confident, sustained pain-free function through targeted retraining of the local stabiliser role system is the underpinning aim of the course

KEY FEATURES

- Identifies individuals whose symptoms respond to local role synergist retraining, improving clinical decision-making processes regarding who should start with early or late with this specific intervention
- Supplies targeted retraining interventions, allowing clinicians to be increasingly time efficient in addressing patients' recurrence risk
- Supplies therapists with clinical reasoning and skillset to manage the complexities of deficits within local stabiliser muscle synergists
- Develops skills to successfully use clinical tools and a movement focussed framework to change the mechanisms of movement impairment associated to local stabiliser role synergists
- Allows for integration of translation control retraining alongside other movement interventions

LEARNING OUTCOMES

At the end of this course the participant should be able to:

- Demonstrate the ability to assess and retrain impairments in the local stabiliser role system related to a patient's risk of recurrence
- Demonstrate an ability to employ a clinical reasoning framework to identify which patients require this approach and when
- Demonstrate enhanced skills of cueing and recruitment facilitation
- Demonstrate an ability to critically appraise the current employment of local stabiliser role synergist assessment and retraining in light of the current body of evidence