

THE UNCOMMON CURE FOR CARPAL TUNNEL PAIN



The Knowledge You Need to Overcome
Your Pain Forever!

By Kathryn Merrow

www.SimpleCarpalTunnelPainRelief.com

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INTRODUCTION

If you are reading this book, there's a good chance you are suffering pain in the wrist or hand.

Perhaps it's the area around your thumb that hurts or maybe it's a pain running down the side of your hand and into your wrist. Possibly your fingers feel numb or tingle uncomfortably, especially when you wake up in the morning.

Perhaps you use a computer often and regularly, or engage in some other activity that involves repetitive motion.

Likely, you've decided that you are suffering from carpal tunnel syndrome. Certainly there's lots and lots of information out there to help you come to that conclusion. Unfortunately, not all of it is correct, nor is all of it helpful.

There's also a lot of information available about treatments. You may even have tried some of them. If you have, you've probably been disappointed and found that the pain continues to come back over and over again.

Welcome to "*The Uncommon Cure for Carpal Tunnel Pain.*" This book will explain what carpal tunnel syndrome really is, what people with the syndrome feel and where they feel it. It will also review the most common treatments currently available and list some of the pros and cons of each.

But, more importantly, this book will open your eyes to a totally different path to overcoming carpal tunnel pain, as well as some other reoccurring or chronic aches and pains for which you thought there was no hope of relief.

What we would most like you to take away from this book is the wonderful news that there is hope. There is a cure. There is a way for you to live pain free!

Even if you were disappointed with the treatments a physician or physical therapist used before, please do not be discouraged. There is hope. There is another way.

Later in this book you will learn the truth about your condition and be given the answers you need to live pain free.

"*The Uncommon Cure for Carpal Tunnel Pain*" is based on the methods developed and used by Kathryn Merrow, a successful career neuromuscular

massage therapist who found the answers to pain relief while looking for effective ways to help herself and her patients.

Kathryn, who suffered from scoliosis and migraines, was unhappy with the treatments recommended to her. They didn't solve her problems. The treatments were geared to relieving symptoms. She wanted to get to the root of her problems, and to be rid of them. Kathryn did not want symptom relief – she wanted to eliminate the causes of her pain.

Additionally, many of her massage clients had lost hope. While the massages helped, Kathryn's patients felt there was nothing that could be done to actually free them from pain.

One of the things that upset Kathryn the most was finding out how little information the conventional medical community has about why we have pain. It infuriated her that people were being told that their pain was because of their age, or that "it's just arthritis".

Kathryn sought out new teachers and forward thinking professionals who follow a different path. What she discovered was simple yet profound.

What Kathryn learned is effective for almost all types of pain.

And it's something that is not taught in school – not even medical school. So, most doctors don't know it or don't grasp its importance in providing a real cure for pain.

Under the tutelage of Paul St. John, Kathryn learned neuromuscular massage techniques that are a major key to unlocking our bodies and freeing them from pain. She also found a significant wellness resource in Meir Schneider of the Center for Self Healing.

Kathryn came to see that touch and education combined is instrumental to wellness and to pain relief. She came to realize that the answer she sought could be found by combining what she learned from St. John, Schneider and others, and that this information could be passed onto others.

Kathryn was then able to integrate these answers into her work as well as in her own lifestyle. It changed her life and the life of her patients.

As an individual who helps people, Kathryn wanted to reach out to many more people than she could with her private practice. The Uncommon Method is Kathryn's way of sharing her important self-help discoveries with all of us.

ABOUT KATHRYN MERROW



A full-time practitioner since 1991, Kathryn Merrow established (1993) and directed a multi-practitioner therapeutic massage clinic in Trenton, Michigan. She primarily treats individuals with a variety of pain and postural dysfunctions.

Kathryn is nationally certified in Therapeutic Massage and Bodywork. She is a Professional member of the American Massage Therapy Association since

1990 and has had advanced training with the Kurashova Institute for Studies in Physical Medicine, the St. John Neuromuscular Institute of Pain Relief, the Center For Self-Healing and others.

In addition to her successful practice in neuromuscular massage, Kathryn Merrow enjoys sharing a wealth of knowledge about health, well-being and other topics through various media. Among her accomplishments she has been:

- Associate producer, personality and writer specializing in health related issues for a daily cable television program
- Guest faculty at the University of Michigan-Dearborn
- Guest faculty for Henry Ford Health Systems
- Instructor for Community Education Programs
- Lead many classes in self-help, massage and bodywork techniques, dealing with head pain, stress reduction, relaxation and aromatherapy.

Kathryn is also known as The Pain Relief Coach, and you can find her at

<http://www.SimplePainRelief.com>

A Word from Some of Her Clients

Kathryn's advanced knowledge of neuromuscular therapy and her professional commitment to improving the wellness of her clients is outstanding.

“She has brought me immense relief from spinal injuries due to a car accident.
– Kay C. Heil

“I am completely and utterly convinced about the philosophy behind this technique and the great success that it offers for countless medical conditions. In fact, I believe that Kathryn's technique and expertise are helping to save my life” – Lisa Carzon

“My arm is again much improved. Will continue exercises. I’m thrilled to find something that relaxes the shoulder and upper back muscles so well. Whenever I am the least bit stressed my muscles tense up terrible. Now I have an easy remedy.” – Pamela Morgan

ABOUT CARPAL TUNNEL SYNDROME

An Overview

Most simply put, Carpal Tunnel Syndrome, also known as CTS, is a painful, progressive condition in which a key nerve in the wrist becomes compressed and irritated to the point of being damaged. CTS is classified as a type of repetitive motion disorder although, as you'll see in the next section of this book, there are actually many possible causes for pain in the carpal tunnel area.

Often the medical community cannot provide a definitive cause for those who are diagnosed as suffering from CTS. Additionally, although CTS is a very specific disorder with relatively exact symptoms and physical findings, it is often used as a catchphrase for other hand problems. Therefore, pain which is not from CTS is often treated as CTS. People with that pain will also benefit from this book.

Most of the traditional treatments (with the exception of surgery for severe cases) apply equally to all hand pain. These remedies often tend to concentrate on the carpal tunnel area itself and are considered successful if they relieve symptoms at that spot. Sometimes they are successful, sometimes not.

Unfortunately, this thinking on the part of the medical community is a mistake. And, a bad mistake at that, since it keeps most doctors and physical therapists from really being of help to their patients.

This way of looking at the problem by treating the symptom does not take into account the *cause and effect* relationship that the various parts of our bodies experience. Often it doesn't account for the fact that what happens in the wrist may actually be your body's reaction to something wrong in your neck, shoulders or arms.

You can see, then, why focusing therapy solely on the wrist area is a problem — the pain and discomfort in the hand are bound to come back because the cause of the problem is still there, somewhere other than in the wrist.

What Carpal Tunnel Syndrome Is ... And What It Is Not

You are having pain.

I want you to have a deeper understanding of your hand and wrist area and what happens when someone has a carpal tunnel syndrome diagnosis. I want you to understand why your carpal tunnel pain started or what caused it. Knowing more about CTS will help you assess your own situation when using the self-help techniques and tips described later in this book.

So, let's take a few moments and become familiar with the basic anatomy of the hand and wrist area.

Carpal Tunnel:

A narrow passage on the palm side of the wrist, not much bigger than the diameter of a finger. It is comprised of soft tissue (which supports and connects the other parts of the body) and ligaments on the palm side, and is surrounded by eight (8) carpal bones on the other three sides.

Flexor Tendons:

Tendons are tough, inelastic fibrous tissues (a type of soft tissue) connecting muscles with bones. There are nine (9) flexor tendons running through the carpal tunnel. They are surrounded by a membrane filled with fluid and, importantly, help control finger movement.



Median Nerve:

The dictionary defines a body's nerves as one or more bundles of fibers forming part of a system that conveys impulses of sensation, motion, etc., between the brain or spinal cord and other parts of the body.

The Median nerve runs from the arm into the hand and delivers the sense of touch to the thumb and fingers. This is also usually the part of the hand that registers pain in sufferers of carpal tunnel syndrome.

Transverse Carpal Ligament:

A tough section of the soft tissues forming the carpal tunnel which holds the tendons and the median nerve in place. *(When severe CTS is treated by surgery, the transverse carpal ligament is cut so that the median nerve is exposed.)*

These are the parts of the hand most involved in carpal tunnel syndrome. What occurs is, basically, a pinched nerve condition in that, for whatever reason, the membrane surrounding the tendons becomes inflamed or swells. This makes the carpal tunnel even narrower than it already is so that the space becomes too small for all the blood vessels, ligaments, soft tissue and nerves to fit inside comfortably.

Significant pressure is placed on the median nerve which, in the beginning, can handle it. However, over time the median nerve becomes less able to cope with the pressure and it begins to give you signals to let you know there is a problem which will cause more discomfort and, ultimately, pain.

Our whole body works in that way. For a while we can get away with doing just about anything we want to do. Then, one day, the body part or parts we have abused - deliberately or not - give us a pain message. The pain means that part is not happy. And we had better do something to help it.

The Symptoms of Carpal Tunnel Syndrome

Pain, although one of the most significant symptoms of CTS, is not usually the one people experience first.

Often, the initial indication that someone may have carpal tunnel syndrome is the feeling that parts of the hand have "fallen asleep." Specifically, the CTS sufferer

experiences a tingling sensation in the thumb and forefinger (often referred to as “pins and needles”). He or she may also feel numbness.

Since the body is usually standing or sitting during the day, these symptoms may be merely annoying at first. However, when they occur at night, the tingling sensation or pain can be significant enough to interrupt sleep. This may be due to the fact that many people sleep with their wrist flexed. Additionally, fluid may accumulate around the wrist and hand while the body is lying flat.

As carpal tunnel syndrome worsens, weakness can occur, especially in the ability to grip. There may be trouble with coordination (whether real or perceived). Chronic CTS can actually cause atrophy, which is when the muscles waste away. This atrophy usually occurs among those muscles near the base of thumb and the palm.

Regardless of which symptoms you may be experiencing, it is important to remember that this is a soft tissue problem and soft tissue problems can be fixed! (Soft tissue is everything which is not bone.)

In the next section, we will review the many treatment methods recommended by regular medical professionals, like your own doctor. Some of these do bring short term relief and might work for you, especially if you are just beginning to feel the symptoms of carpal tunnel syndrome.

We will also discuss the more serious treatments, like surgery, that might provide longer-term relief but are very dramatic steps and offer no guarantee that the condition won't return.

As a carpal tunnel syndrome sufferer you should not lose hope, however, as this book will provide a wealth of information you really need to identify and treat the cause of your problem.

The Causes of Carpal Tunnel Syndrome

There are many causes for carpal tunnel syndrome and hand pain in general. We will review what the medical community knows about this subject below, but first need to discuss the one cause doctors almost always fail to mention.

Often muscles harbor “trigger points” which refer pain to other parts of the body. When we use the same muscles day after day, our bodies get out of balance and they tell us so by registering pain and discomfort. The problem is, physicians and most physical therapists generally still believe that the area which hurts must be the area that needs treatment. Well, sometimes it is, but often that is not the case.

Repetitive Movement

There are many conditions that exert pressure on the median nerve but the most common is uninterrupted, repetitive motion, especially of the fingers and arms – as when someone uses a computer keyboard all day long or plays lots of video games or does a lot of repetitive reaching or twisting.

Interestingly, although most people think that typing or using the keyboard is the main movement responsible for carpal tunnel syndrome, there are many other professions and some hobbies (*see below*) that are more likely to be the reason someone develops carpal tunnel syndrome.



You'll see that, in addition to intense use of hand movements, these jobs often call for repetitive motion of the arms, shoulder or neck. This is a perfect example of how the cause of the problem could be somewhere far away from where the pain is felt.

Working in cold weather conditions or refrigerated areas can make the problem worse. There is at least one study which shows that people who work in the meat and fish packing industries are at a much higher risk of developing carpal tunnel syndrome (*medical history reports meat packers complaining of symptoms as far back as the 1860s*). People who assemble airplanes for a living are also more likely to suffer from carpal tunnel pain.

Carpal tunnel pain can be so severe as to impact the ability to do one's work and, by looking at the number of sick days taken because of hand pain, we can get a good idea of which professions seem to suffer the most from CTS. In 2002, The Bureau of Labor Statistics rated workers by the highest and lowest number of CTS-related lost days from work. Their list follows:

- Assemblers
- Cashiers
- Secretaries
- General office clerks
- Laborers, non-construction

- Bookkeeping, accounting and auditing clerks
- Welders and cutters
- Data-entry employees
- Textile sewing machine operators
- Order clerks
- Supervisors and proprietors, sales occupations
- Machine operators (unspecified)
- Truck drivers
- Investigators and adjusters (not insurance)
- Insurance adjusters, examiners and investigators
- Electrical and electronic equipment assemblers
- Packaging and filling machine operators
- Janitors and cleaners
- Bank Tellers
- Production inspectors, checkers and examiners

Even activities done at home can be a cause of carpal tunnel syndrome. For example, people are more at risk if they:

- Cook often
- Knit
- Sew
- Do needlepoint or embroidery
- Play computer games
- Do carpentry or use power tools repeatedly

These lists show that typing is not the main cause of carpal tunnel syndrome. There are several reasons why people think it is. Today office workers far outnumber those who perform other types of repetitive motion on a regular basis.

Also, there are now whole generations that have grown up using a computer or a cell phone so the number of people with typing-related CTS must be rising significantly faster than it is for the other professions.

In fact, when you think about it, almost everyone types these days. It has become such a part of our daily routine that it comes easily to mind when people think about pain in their hands. And, when you couple this with the high level of CTS misdiagnosis, typing and the computer become the likely suspect.

Regardless of which professions are most likely to develop carpal tunnel syndrome, it is extremely important to remember that CTS is a much more widespread condition than most people realize. You might say that carpal tunnel pain is becoming an epidemic of sorts. This is especially critical as it affects not just the individual sufferer, but the community as a whole.

During 1998, it was estimated that three of every 10,000 people lost time from work because of carpal tunnel syndrome. One-half of them called in sick for more than 10 days over the course of the year. At that time, the average lifetime cost of CTS, including medical bills and lost time from work, was estimated at about \$30,000 per person.

Further, looking at all work-related injuries over a three-year period (from 1997 to 2000) The National Center for Health Statistics determined that carpal tunnel syndrome was responsible for more sick days than any other work related injury.

It is interesting to note here that, on the other hand, some of the most current medical thinking (*readily available through an internet search*) is mixed on the importance of repetitive hand movement to the development of carpal tunnel syndrome.

Specifically, some physicians believe that there isn't sufficient, hard evidence to prove that repetitive action causes CTS. When reading the results of medical studies, professionals like to account for a margin of error. Several of the more recent medical studies done on CTS show it is a problem but the numbers do not meet the allowed for margin of error.

In addition, a Mayo Clinic study conducted in 2001 found that heavy computer use (defined as 7 hours a day) did not increase a person's risk of developing CTS. How could this be? And, why not? Why some people and not others? I love to ask questions. Ask enough questions, and we can get answers.

Unfortunately, the scientific community is off-track in terms of understanding what this new information means. Instead of looking for physical causes elsewhere in the body, they are questioning whether movement factors in significantly at all. What they're saying is confusing at best and, at its' worst, detrimental to actually curing individuals with carpal tunnel syndrome.

There are also members of the medical community who believe that genetics are a more important part of creating the problem than had been otherwise supposed. This may be possibly useful but it is of little help to a person already suffering from carpal tunnel pain.

In terms of predicting whether someone will develop carpal tunnel syndrome it might be of importance but, while a predisposition to CTS can only make a worker who performs continuous repetitions of specific movements more susceptible to suffering, the lack of such a genetic link does not guarantee that another worker won't develop carpal tunnel syndrome.

Again, this information from the traditional medical community may cause more confusion than help for you and the other people currently in pain.

Research is an interesting thing. It starts as someone's thought and supposition. That thought may be accurate and logical, or it may *seem* to be.

Existing Medical Ailments

There are several common medical conditions that can contribute to carpal tunnel syndrome, either by reducing the size of the carpal tunnel or increasing the amount of tissue that lines it. Other medical problems make the median nerve less able to tolerate the compression without complaining or more sensitive in general.

Specifically, the common medical conditions that can lead to CTS include:

- Obesity (which is also actually a contributing factor to the discomfort and pain of other medical ailments, like osteoarthritis)
- Hypothyroidism
- Rheumatoid Arthritis or bone spurs from Osteoarthritis
- Diabetes (which makes the nerves more sensitive)
- Trauma to the area, like fractures, which can leave the wrist imperfectly aligned and thus can narrow the tunnel diameter.

In these cases treatment is always required but, remember, it is important to identify the cause actually affecting the body (not just focusing on the fact that the pain is in the wrist, fingers or palm) in order to attain long-term relief.

Additionally, there are some rare diseases, like the cancers multiple myeloma and leukemia, that cause irritation when abnormal substances are deposited in or around the carpal tunnel.

Pregnancy can also cause carpal tunnel syndrome but the condition usually clears up on its' own after the baby is born as the cause of the wrist tissue swelling has been eliminated.

Elevated Genetic Risk

As mentioned earlier, some people have a genetic profile that may make them more likely to develop CTS. And a few of us have naturally narrow tunnels.

This may help explain why women are three times more likely to develop carpal tunnel syndrome than men. Another reason may be that menopause can also trigger carpal tunnel syndrome. Strength may also come into play here, as men usually have more upper body muscle strength than women.

Middle-aged people, i.e. those between 40 and 60, are also more at risk than the general population and smokers have an increased chance of developing CTS (because it may affect blood flow to the median nerve).

Diagnosis Techniques

Not all hand pain and discomfort is caused by carpal tunnel syndrome. CTS involves a distinct area within the hand and a specific nerve. If you have some or all of the symptoms discussed earlier in this book, there is a good chance that you have developed either CTS or another repetitive motion/strain condition or syndrome.

Since carpal tunnel syndrome can get worse over time, you should take steps now to determine the cause of your pain and correct it. You might wish to have a diagnosis of CTS confirmed by a physician. Despite the fact that an exact diagnosis might not be possible or even correct (*and you might question whether one is necessary since most of the traditional treatments are the same regardless of the cause of one's hand pain*) there are very valid reasons for seeing a physician.

For example, it could help uncover a much more serious condition like diabetes. Also, if a person has been experiencing pain for only a relatively short period of time, and the problem is truly CTS, treating the exact area on the hand might be enough to cure the problem.

Usually a doctor will begin with a physical examination of the hands, arms, shoulders and neck (*they are trying to helping you heal*). An x-ray and blood tests

may be taken and, of course, your personal and family medical history will probably be reviewed.

A physician may also ask you to perform one or more of the physical activities that are apt to bring on symptoms of carpal tunnel syndrome. Taken together, these steps should provide a good indication of whether the problem seems to be related to your daily activities.

There are also physical tests that the doctor may use, at least two of which are simple enough for you to try yourself before going for a formal diagnosis.

- The Tinel test is probably the easiest to perform on your own – tap on or press on the median nerve in the wrist area. If there is a tingling sensation in the fingers or a shock-like feeling throughout the area, you are most likely “positive” for CTS.
- Phalen’s maneuver is also one that can be used to self-diagnose carpal tunnel syndrome. Written explanations of the test suggest it can be conducted two different ways:
 - Flex your elbows on something sturdy, like a table, allowing your hands to hang freely from the wrists.
 - You can also hold your hands out, pointing your fingers downward (similar to the above position but your elbows need not be flexed). Then, bring your hands together with the backs touching.

In either case, if you experience symptoms within one minute, your problem is probably CTS.

Even if you test negative for carpal tunnel on your own, you might still want to see a physician or physical therapist just to be certain and to rule out any of the medical ailments (like diabetes and rheumatoid arthritis) that might actually be causing your hand pain.

Some physicians may also have you take a nerve conduction test, which uses electrodes to help measure whether the electric impulses slow down as they travel along the median nerve through the carpal tunnel. An electromyogram (EMG) is used less often but it can be helpful in identifying or excluding other conditions that mimic CTS.

TREATMENTS FOR CARPAL TUNNEL SYNDROME

The severity of symptoms plays a huge part in determining which therapy you try first and, if this is not your first flare up, so should the results of prior treatment.

Where an illness has been identified as the underlying condition, it will need to be treated separately. For example, obese people will strongly be advised to diet, smokers to stop and diabetics to undergo appropriate medical treatment as quickly as possible.

This Chapter will review each of the more commonly prescribed remedies for CTS (and, often, for general hand pain as well). Most are conventional, medically endorsed options. The others are based on what the traditional, conservative therapeutic community considers alternative medicine.

As you'll see when the pros and cons of each of these treatments are analyzed, none are perfect and, again, they mostly focus on treating the discomfort rather than eliminating the cause of the condition. Because it's *your* body, I want you to know how to fix the cause.

Avoidance and Immobilization

The doctor or therapist will almost always suggest a combination of avoidance and immobilization. Usually, you will be told to give your hand a rest for two weeks or more and to avoid the repetitive hand or finger motion that seemingly sparked the onset of symptoms.

You will probably also be advised to immobilize your wrist in a splint and apply ice to reduce swelling.

As a first measure or in the early stages of carpal tunnel syndrome this combination can be quite effective and often necessary for the short term.

However, when it comes to long-term, few people can simply totally stop doing what they were doing – especially as the activity involved is most likely related to his or her job or something they loved to do.



Immobilization has drawbacks as well. If overused it can cause the muscles to waste away. If at all possible, the use of a wrist splint should be limited to nighttime and only if necessary.

When typing is determined to be the repetitive activity causing CTS, ergonomic chairs, special keyboards and cushioned wrist rests and mouse pads may be recommended as well. Unfortunately, while these tools can be helpful, they are only really effective if there are no other causes for the pain in your wrist and arm area (and there usually are.)

Additionally, once your wrist is compromised, it is likely to become irritated or swollen when you perform other motions that involve the hand, neck, arms and shoulders.

Since most people don't learn the real cause of their hand pain, you may be constantly trying to anticipate when a brace or splint might be needed again. So, either your symptoms will return or you will end up walking around in a hand splint all the time, which would cause more dysfunction.

Exercise and Physical Therapy

Exercise and physical therapy are commonly recommended for carpal tunnel syndrome as well. Here the medical community is actually on the right road but unless you can find the original cause of the pain and work on that area as well, exercise will not be of long-lasting help.

There are some therapists who do understand that the cause must be found and treated as well but, all too often, they are pressured by insurance companies and physicians who insist that only the immediate area in pain be treated.

Drug Therapy

Both over-the-counter and prescription medicines are often taken to help alleviate symptoms. While they do help reduce inflammation and lessen pain, they have unpleasant side-effects.

Further, long-term use of these drugs can cause other medical ailments that are quite serious in nature. For example, many of these products contain aspirin or ingredients that are similar to it. Using those drugs long-term can affect the gastric area, creating heartburn and, ultimately, causing bleeding or a wearing away of the esophagus.

Long-term use of the aspirin-free pain medicines, like Tylenol, has been linked to kidney problems.

Both of these types of anti-inflammatories have been known to cause severe liver problems.

Even putting these side-effects aside for the moment, it is always better to take less medicine rather than more. Plus, covering up the pain once it starts is definitely not enough of an answer, especially when finding and fixing the cause of the problem can actually help you live pain-free.

When the wrist area is especially inflamed, cortisone may be injected directly into the area. Although cortisone does a good job of relieving the swelling, the shot may be quite uncomfortable in itself. Also, cortisone has significant side-effects. The side-effects are serious enough for the medical community to recommend that only a very limited number of shots be given anywhere on your body within a year. Surgeons, in fact, have been known to say that if the second or third shot doesn't work, your only option is to have an operation.

Thank goodness an operation is not your only option! Getting and understanding the right information is!

Surgery

This is a serious option that even the medical community usually saves for late-stage cases or those that do not respond to other therapies.

Carpal tunnel-related surgery is an invasive operation during which the transverse carpal ligament is cut and the median nerve actually exposed. This is meant to help relieve the compression on the nerve.

Like any type of surgery, infection is possible and complications can occur. With carpal tunnel surgery, side-effects can actually include nerve damage.

Additionally, with surgery there is a significant recovery period. First, there is sure to be pain for some time after the operation. Hand and wrist activities are limited and extensive physical therapy may be necessary. This recovery period can take months!

Imagine going through all that only to find out that the success rates are miserable. Only about 50% of patients feel better after. Worst of all, even this extreme form of treatment does not guarantee that you've been cured. In fact, about one-half of those sufferers who were helped by this surgery saw a reoccurrence of the original pain within the next two years.

As unacceptable as they are, these statistics make a great deal of sense since surgery is most likely to be successful only when the cause and the site of the pain are the same. As you now know, if we don't address the true cause of the problem, carpal tunnel syndrome will reoccur once normal activity is resumed.

Alternative Medicine

There are indications that taking Vitamin B therapy over a period of months may be therapeutic but one cannot continue this regime indefinitely and one of the key components, Vitamin B6, can be toxic at extremely high levels.

Acupuncture and acupressure (without needles) are supposed to open the channels, or the meridians of energy, if there are "blockages." By stimulating these blocked areas, there may, in fact, be some relief.

Chiropractic measures can also be used to treat hand and wrist pain but must be continued over a long period of time in order to "retrain" your body. It is also important to keep in mind that chiropractors work with bones more than muscles and, as was established earlier, your problem is in the soft tissue (muscles, nerves, etc.) rather than the bones. The exception to this might be a break or dislocation following an injury.

Massage therapy has great potential to help people who suffer from carpal tunnel syndrome and other hand problems. It is a great tool for keeping tissues pliable (healthy and flexible) but, like physical therapy, unless the therapist is knowledgeable about cause and effect it will not result in long-term relief.

Another failing of most massage and physical therapy is that the professionals often don't know the right self-help movements that carpal tunnel sufferers should use on their own. Go to <http://www.SimpleStrengthening.com>

There is no scientific proof that herbal medicine and homeopathy are effective at all.

Medical Research Underway

The good news is that, as carpal tunnel syndrome and other conditions of the hand have become more common, the medical community has finally begun to research the physical causes of these conditions in greater detail.

Currently, The National Institute of Neurological Disorders and Stroke (NINDS) is the leading supporter of biomedical research in this area. Scientists are

hoping to learn more about the distinct biomechanical factors involved, like joint angles, force and progression over time.

As for the bad news, some of this research is unnecessary and some of it is going along the wrong path. The shame lies with the medical community itself. It does not understand that most of the answers to their questions are already available!

Since the medical professors and specialists don't know that the answers exist, they can't teach them. And, since the doctors are not learning the answers, they can't really help the majority of people with hand and wrist pain.

Fortunately, the answers are logical and are available to those who look for them. The next chapter will share the most helpful ones with you.

THE UNCOMMON METHOD

Overview

Kathryn Mellow is a neuromuscular massage therapist specializing in pain relief who found the fundamental truth – our bodies are not just a collection of individual parts.

Rather, a body is one interacting unit ruled by cause and effect. For every action there is an equal and opposite reaction.

Kathryn has used this information to help herself and many, many clients find a cure for their pain. Most physicians don't know about this basic truth and, therefore, many of their attempts to help you may have been unsuccessful: they were not knowledgeable about natural laws.

Your doctor is oriented to treat your symptoms directly where you experience them because the assumption has been that the site of your pain must also be the cause – and probably the only cause – of your pain. Even though this supposition is just plain wrong, it has been taught and spread throughout much of the conventional medical and therapeutic community.

Insurance companies also bear part of the blame. They treat us like our bodies are car bodies – fix the part that's broken and leave the rest alone until another part breaks. Only pay for parts and labor as you need to.

But, our bodies are not cars.

A Life Changing Philosophy

"I believe in the ability of the human body to heal itself. Our body is changing all the time, repairing itself. Sometimes it needs a little assistance. When we understand how our body works, we understand why we have pain. And when we know why we have pain, we can undertake the steps necessary to heal ourselves, naturally.

I also believe that our minds, like our bodies, need retraining. We need repetition in order to fully integrate a new way of looking at and doing things into our daily lives."

..... Kathryn Mellow, The Pain Relief Coach

It Starts With Natural Laws

There are natural laws which govern how our bodies work. They state that if something is occurring in one part of your body, something must happen elsewhere to in response to the first occurrence.

For example, when we stand or sit normally, most of us start with our shoulders in a neutral position – that is, at the same level. They are in balance.

If one shoulder is put in the high position, the other cannot and does not stay in the neutral position. It automatically goes lower. Try it. Also, try putting one hip forward and you'll see that the other goes towards the rear. It has to. It's a law.

Another Look at Carpal Tunnel Syndrome

Knowing what you now know, let's talk more about carpal tunnel pain.

CTS does not happen without a reason and that reason is not the same for everyone. Sometimes the cause is in the hand itself but many other times it is a muscle contraction in a distant part of the body. What's happening in a connected area, like your neck or your arm, is referring pain to your wrist.

There are several clues that can help you determine if the cause of your pain is local or originating elsewhere.

First off, think about how long you've been experiencing symptoms. If it's a matter of days, then your problem may really be all in the hand and wrist.

However, if your suffering is long-standing, or has been getting worse gradually, it is likely that the cause of the pain is in a connected part of the body.

Here's a simple test you can take to help determine if the cause of your pain is local:

1. Rub the painful area (someone else can do this for you if you like). If the pain eases up and remains at the lessened level of discomfort, the cause of the pain is where you felt it.
2. If rubbing the painful area helps while you are rubbing it but you find that the pain goes back to the level it originally was once you stop rubbing, it means that you are having *symptoms* in your hand but the *cause* of your pain is elsewhere.

The Causes of Carpal Tunnel Syndrome That Doctors Don't Think About

Daily living patterns have a profound effect on our muscles and other soft tissue. So does gravity, which pulls us forward rather than backward. It does this because forward is the path of least resistance. We don't have a network of bones over our abdomen to prevent forward collapse. And, once our heavy heads start moving in front of our body, instead of over it, the law of gravity kicks in.



Our model shows what a forward head and forward-rounded shoulders position looks like from the front. Note that the backs of her hands are showing. That indicates tight chest, or pectoral, muscles. A forward head and shoulders compress nerves in the neck and front of the shoulder and causes arm, wrist and hand pain.

Back pain is also a result of this posture, due to the muscles in back of the body being overstretched and complaining. Trigger points also result from this posture, and trigger points in the muscles will also cause pain in your arms, hands, and wrists.

Now our model demonstrates good posture, with her chest lifted, her head over her shoulders instead of in front, and her arms at her sides, with thumbs pointing forward.

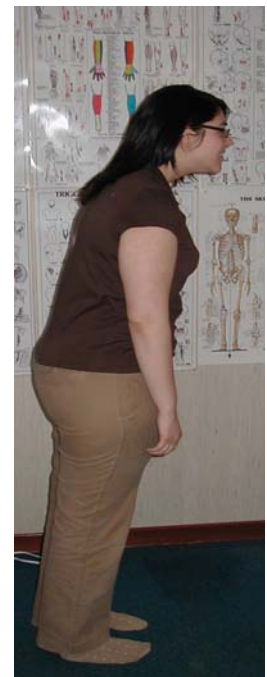




Here is a sideways view of the same good posture, with ears directly over shoulders. The breastbone (sternum) is lifted, as though a hook is attached to the breastbone and pulling up to the sky. There is a curve in the low back, behind the waist, which also lifts the sternum and helps move the head into the correct position.



(Left) This side view shows an exaggerated forward head pose, but many people carry their head this far forward. The model's shoulders are also rounded forward. You can imagine what a strain it is for a body to carry the weight of a head far forward like this.



(Right) My model demonstrates another possibility for forward head posture, which causes a great deal of dysfunction. The problems with this posture range from toes to head, literally.

In fact, approximately 90% of the time our heads and hands are in front of us. As a result, the muscles in the front of our bodies contract and get shorter. On its own this is not painful. You could say that the shortened muscles “have no need to complain.” They just get short and stay short.

On the other hand, when the front muscles contract, they pull on the back muscles. As a result the back, neck and shoulder muscles get overstretched. They go into their own type of contraction. That is cause for complaint so those back muscles radiate pain to let you know just how unhappy they are.

You feel the symptom at the back of your body even though the cause of that pain is the shortening of the body’s front muscles.

In addition, some of those muscles harbor “trigger points” which, when pressed, refer pain to other parts of the body. These trigger points cause pain even when no one is pressing on them.

These muscles also push and pull on bones and nerves. Since nerves run to one part of the body through another, the shortened and overstretched muscles around your shoulders, neck and back can also cause pain in your arms and hands.

Every time we move, or don’t move, a reaction occurs somewhere in our bodies.

When we’re young, our instincts are to do things that keep our body flexible and balanced. As toddlers we ran, jumped, climbed and did all kinds of movement that is actually good for us.

Then, we went to school and learned to sit for hours at a time, often in a chair that didn’t fit us. When our movement became restricted, our bodies began to get out of neutral. Our heads began to move forward.

Then gravity began to pull us down, that is, even more forward. And, because the human head is heavy, many of us became stuck in a forward head posture. This causes pain in the neck, at the back of the head and in our backs. Eventually, it may even cause pain in the arms, hands, legs and feet.

Obviously, finding the actual cause of our pain is like trying to solve a complicated jigsaw puzzle. No wonder doctors are taught to treat the symptoms and be done with it.

And remember, pharmaceutical companies play very prominent roles in the support of medical schools and research. Drugs are easy and quick to prescribe and to take. They are very beneficial for the pharmaceutical companies, too.

There is a Cure

Once you have an even deeper understanding of how our muscles are interconnected, and the types of soft tissue actions and reactions you need to address, you can become pain free.

This next section explains in greater detail how gravity affects the body and the types of chain reactions that result from its forward pull.

Some of what you will read may seem daunting, but it is not. Remember that your body wants to be well; its natural instinct is to repair itself. It just needs your help.

In this section we will also start sharing some of the healing movements you can use to give your body that help.

How Gravity Causes Pain in the Neck, Wrist and Elsewhere

All too much of the time, we equate what's wrong with our bodies to growing older. However, most of what we call old age is really the consequence of losing the fight to gravity. The movements at <http://SimpleStrengthening.com> will help.

Sometimes we become upset, sometimes depressed, thinking that we will have to live with the associated aches and pains for the rest of our lives. We either don't know, or forget, that we have options.

As we said in the beginning of this book, we are working under the assumption that you are in pain. So, let's go back to discussing what happens while your front and back muscles are conducting their tug of war.

We know that the front muscles are contracting and the back ones are being overstretched. The front ones are probably not hurting but there's a good chance that your back muscles are in pain.

In this war, it cannot be said that either side of your body is winning. All it wants is to find a way to return to its' neutral position but, instead, your body's being pulled down and forward by gravity while it's fighting with itself.

Your body looks to its core for support but, unfortunately, the soft abdomen has no bones to shore it up and prevent this forward collapse. Further, since the human head is heavy, you may become stuck in what is called a forward head posture. This causes pain in the neck, at the back of head and in your back as the muscles there get overstretched.

In turn, these overstretched muscles compensate by developing knots and pain, trying to call attention to the problem. Frequently, we have no way of interpreting what's they're saying so they say it louder and longer. "Listen to me!" they cry.

Trigger points radiate even more pain. Finally, the forward head posture is causing pain all the way into the arms, hands, legs and feet. Remember, your body is one unit, not a bunch of parts. Everything is attached to everything else.

At the same time, the muscles in the front of our bodies shorten. They usually don't complain, they just get short.

Since we don't extend or stretch them fully anymore, these front muscles tighten up. Unless someone presses on them, they don't hurt but they do keep us from moving properly and they keep our head stuck in a forward position.

Remember that the tight short muscles in the front of the body are attached to the arms, and the arms are attached to our hands. So, when the muscles get tight, they entrap nerves and we get pain. This pain can exhibit itself anywhere along the connected line.

All of this means that carpal tunnel pain may really be a symptom of postural distortion. Obviously, just treating the hand and wrist area won't have the curative results that we need to be pain free.

Also, when our head is being pulled forward and down, our lower back starts to lose its natural curve. It starts complaining, too!

And when we lose our low back curve, it allows our head to fall even farther forward. This leads to more pain, more often.

As you see now, this all makes for a vicious cycle. The more our neck and shoulders are out of alignment, the more the muscles tighten or get overstretched and the more pain signals travel to the parts of our bodies closest to the ground.

The nerves start talking to each other back and forth. We move one way or the other trying to relieve the various symptoms and the muscles compensate even more, either tightening or overstressing. As a result, the cycle continues and the symptoms become more frequent and more severe.

A number of other things happen when someone gets stuck in the forward head posture – and none of them are good:

- Our abdomen is compressed, so we become constipated
- There is more pressure on our blood vessels
- Our lungs are compressed, so we can't breathe as well
- Our heart is squashed, so it cannot function as well
- We get pain!

Help! How Do We Get Out Of This Mess?

The solution is simple, but requires action and dedication.

Even if the muscles of the chest, abdomen and front of the neck and shoulders may have shortened so much that they make it hard to regain the neutral posture you had when you were a toddler, most of us can do it!

If you strengthen the muscles from the back of your thighs up to the back of your neck, those muscles will help you stay upright.

It is also very helpful to do or have muscle release therapy or massage on the shortened muscles of the front of your body. Please note: I said the *shortened* muscles, not just the knotty ones in your back that are complaining. They are the *symptom*. The short muscles in front are the *problem*.

Here is an easy way for most people to start strengthening the muscles between their shoulder blades: (from <http://www.SimpleStrengthening.com>)

1. Lay on the floor, flat on your back. When you lay on your back it always puts you in a neutral position, because it takes the gravity off. If you absolutely cannot lie on the floor, you may use your bed or couch.
2. If you feel you need to support your head or neck, use the smallest support possible. A folded hand towel may work. Or a very small pillow.
3. Place a pillow under your knees, if you need one, to avoid back discomfort. When your front muscles are short, sometimes they pull on your lower back when you lay down. The pillow helps.

4. Move your shoulders down slightly toward your hips. To do this, slide your shoulders and arms along the floor toward your hipbones, just a bit, not to the point of discomfort. If you are having trouble, imagine that someone is gently pushing down on your shoulders.
5. Squeeze your shoulder blades toward your spine and hold for five to ten seconds. This should cause your chest to move toward the ceiling. This movement has two benefits; it opens and stretches the chest and strengthens the muscles between the spine and shoulder blades.
6. Repeat, but only about three times.

Do this strengthening movement two or three times a day to start. Since your muscles are not used to the position, if you do too many repetitions at first, they will ache. You will find more information at <http://www.SimplePainRelief.com>

However, your muscles will adjust soon and, after several days, you may begin to increase the number of repetitions, and/or the times per day.

It is also possible to bring your shoulder blades toward your spine while you are standing or sitting, but you must pay close attention to where your head is positioned. It should be over your shoulders, not sticking out in front of you. Often, we are so busy thinking about the movement we are doing, we forget to make sure our head is properly positioned.

As your head and spine are not used to this position anymore you may have difficulty aligning yourself correctly, especially at first. *(The benefit of doing this movement when you are lying down is that you don't have to pay attention to your head. It is in neutral, already.)*

As your back becomes stronger it will be better able to fight off the pull of gravity and hold you upright.

Here's another simple healthful movement to try.

1. Drop your hands down and stretch your arms backward.
2. Try to squeeze your shoulder blades together.

If it feels uncomfortable, it's because you aren't used to the movement yet and/or something is out of balance.

Try it a few times a day for a week, unless it immediately makes your symptoms worse. As with the prior movement, unless you are experiencing

worsened pain during or immediately after, you can gradually increase the number of times a day you repeat this procedure.

Note: It is important to keep in mind that, sometimes, we are so busy thinking about our body from the neck down that we forget to pay attention to where our head is. When it is the forward position during a movement, we are much more likely to get a headache or neck ache.

As you go through your day, take some time to focus on your posture. Feel if your head is over your shoulders. If need be, try to adjust yourself and lift your chest ... but remember to be gentle on your body as this is new behavior.

Also, as you go through your normal routine, remember that we have several hundred muscles in our bodies. Most of us use only the same fifty or so over and over. We get out of balance because the muscles we do use are constricting or overstretching while the rest are weakening through inactivity.

Therefore, a good goal is to use different muscles in different ways each day. Don't be timid about trying out different parts of your body and different movements. Pretend you are a cat or a dog or a preschooler.

When you move or experiment with one part of your body, remember to be aware of any sensations you experience elsewhere. Then, if need be, back off a little to ease the pain or tingling where you feel it and keep the focus on the part of the body you were moving. Also remember that you are your own best physical therapist. Find more movements at <http://www.SimpleStrengthening.com>

By the way, did you hear about the man who named his dog Physician? He wanted to be able to say: Physician, heel thyself.

You are your own best physician, too. I'm not saying your doctor isn't valuable and good. I am saying that no one cares as much about your body as you should. I am glad you are here, learning how to take care of your pain.

HEALING MOVEMENTS AND TIPS FOR RELIEVING HAND PAIN

While you must find and fix the cause of your carpal tunnel syndrome (or any other hand pain) if you want to be pain free, you also need to help relieve the symptoms you're feeling. After all, even if the problem didn't start in the hand, it has traumatized the median nerve and inflamed the surrounding soft tissue.

Here are a lot of suggestions for you. Some involve changing the layout of your work environment and, in addition to helping alleviate your pain, can actually help you prevent carpal tunnel pain!

I go into much more detail about the why and how of these and additional suggestions in my booklet *99 Tips for Relief and Prevention of Carpal Tunnel Pain* available at <http://www.SimpleCarpalTunnelPainRelief.com>

With respect to the healing movements themselves, as you try each one, do it in a thoughtful manner. Again, take the time to actually feel what is occurring. Observe your body. Pay attention.

If something involves a stretch or movement that you are not familiar with, only do two or three repetitions for the first few days. If you do too many too soon, you may ache from overused, newly re-discovered muscles.

Then, after you become used to the new movement, you can increase your repetitions.

These first suggestions are for those who [work with computers](#):

- If working at a keyboard, keep your elbows as close to your waist as possible.
- If you use a mouse, pull a tray table or something similar next to your body and place the computer mouse on that.
- Adjust your chair so your ankles, knees and hips are all at 90 degree angles.
- Keep your wrists straight, as though they are extensions of your arms.
- Keep your elbows at about a 90 degree angle.
- Let your arms drop straight down from your shoulders, at your sides, rather than holding or stretching your arms forward

- Let your fingers do the work. Your arm muscles should not be involved in keyboard work.
- Squeeze your shoulder blades together.
- Rotate your shoulders, especially up and back
- With your elbows at a 90 degree angle, place your hands with straight wrists in front of you. Backs of hands facing the ceiling, “wave goodbye”, upward and downward, slowly, several times.
- With your elbows at a 90 degree angle, and hands with straight wrists in front of you, let the palms of your hands face the ceiling. “Wave goodbye”, flexing your wrists upward and downward, in slow motion.
- Place your elbows at 90 degrees, thumbs up, and “wave goodbye” from side to side. Repeat slowly, several times.
- Imagine a large hook hooked into your sternum, or breastbone. The hook is pulling you up to the sky. This raises your chest and corrects posture, moving your head back naturally.
- Tuck a lumbar support pillow at your waist, to help you sit upright.
- Take frequent breaks, and do something different.
- Switch positions and switch the project or task you’re doing (this applies to any job that requires uninterrupted repetitive motion).

If you drive:

- Use a lumbar support when you are in the car.
- Position your car seat in a closer to upright position.
- Position your car seat so that you do not have to stretch to reach the wheel.
- Professional car drivers hold the wheel at the 4 o’clock and 8 o’clock positions to avoid arm strain.
- Drive with your wrists straight rather than flexed.
- Allow your shoulders to be relaxed when you drive.

Some more healthful movements and suggestions are:

- When you walk, do so with your thumbs up, as though you are going to shake hands with someone. If you walk with the backs of your hands facing

forward, you are shortening the muscles in front of your body and you now know how that can cause pain and discomfort.

- When you walk, let your arms swing back and forth from the shoulder. Neither arm should pass in front of your body when you walk. If you are uncertain that you are doing this correctly, ask someone to watch you.
- Move in the opposite direction of the movement you usually make. For instance, since your arms are almost always in front of your body, let them move back, over or behind your body.
- Do the opposite movements of any you usually do.
- Sit in a different position than the one you usually choose.
- Lift your elbows behind you, and swing your lower arms back into a straight line with your upper arm. Keep your head over your shoulders when you do this. (Remember the hook pulling you up to the sky.)
- Get into a swimming pool or hot tub with water up to your neck. “Wave” your arms back and forth, below the water, behind and in front of you. The resistance of the water is like a massage for your arms, and it will help balance and strengthen your muscles.
- Walk backward. (Make sure your path is clear first.)
- Stretch your chest muscles by leaning through a doorway, with your hands on the sides of the doorway. Try this with your hands over your head, at shoulder height and at hip height.
- Lay on your back at the edge of your bed. Let your arm gently and slowly drop off the bed. This is a great stretch for chest muscles. “Fly” with that arm. Make movements as though you are a butterfly, moving from closer to your feet to over your head, and back.
- Lay on your back and stretch your arms over your head.
- Face the wall, as close as you can, and place your arms and hands over your head. Point your thumbs behind you. Move your arms to 10 and 2 o’clock. Move your arms to 9 and 3 o’clock, and then 7 and 5 o’clock.
- Wear arch supports if you are on your feet all day, or if you have flat feet or fallen arches. When our feet feel good, our posture is better. Get used to your new arch supports gradually.
- Make a long, rolled up bath towel into a tight tube. Place it on the floor. Lay on the tube so that it is behind your head, directly behind your spine, and behind your tailbone, lengthwise. Position your arms at your sides, with your palms facing the ceiling. Lay there for five minutes to open your chest. Let gravity work. (If you want, start with just one minute and work up.)

- In the same position, squeeze your shoulder blades toward the tube. This massages your back and strengthens it at the same time.
- Sleep on your back, so you don't squash your shoulders forward.
- Sleep with a small neck roll to keep the curve in your neck when you sleep on your back.
- Make your own custom neck roll inexpensively from a fiberfill batt. Go to a fabric store and tell them you want fiberfill batting. Place a long section into a pillowcase. Roll it into different thicknesses to find the one which is best for you.
- If your head is very far forward, you may not be comfortable right away without some additional thickness behind your head. The excess fiberfill in the pillowcase can provide that bit of lift for you.
- Press your shoulders gently but firmly into the floor or bed.
- Lay on your back in bed. Tilt your chin up and down slightly and find the most neutral place for your head to be. Press your head gently but firmly into the bed.
- Press your upper arms firmly and gently into the floor or bed, with your thumbs pointed to the ceiling.
- Press your lower arms firmly and gently into the bed or floor.
- Press the edge of your hands into the bed or floor, with thumbs pointed to the ceiling.
- Lay on your back, arms at your sides, thumbs toward the ceiling. Breathe in and stretch your arms overhead. Place them back at your sides. Breathe out and stretch your arms overhead. Feel the difference.
- Stretch your fingers, one at a time, toward the back of your wrist.
- Rotate each finger on one hand with your opposite hand. Rotate in both directions, two times per finger. Then do the other hand.
- Sit up as straight as you can, with a hook pulling from your breastbone to the ceiling. Place your arms straight up in the air. Inhale. Breathe out and stretch your arms higher, trying to touch the ceiling. This strengthens your torso.
- Drink lots of water. Hydrated muscles work better.
- Place your arms close to your body, thumbs pointing to the ceiling, wrists straight. Spread your fingers and open your hands as far as you can.
- Have a massage by a great massage therapist. Ask him or her to focus on your pectoral muscles, ribs, back, shoulders, neck, arms and hands. Ask

friends for a referral to someone who does good work for them. You want more work on the front of your body than on the back, to take release the muscles which cause hand pain.

- Sleep with your wrists straight, not curled. Doctors sometimes prescribe a wrist brace.
- Sleep on your back, with your arms at your sides.
- Boost your nutrition to support your muscles.

HEALING MOVEMENTS AND TIPS FOR RELIEVING BACK PAIN

Earlier, we established the connection between the various parts of your body and how back, neck, chest and shoulder problems can cause carpal tunnel pain or make it worse. The same is true for other hand and wrist pains.

Prior chapters also helped start you on your way to living pain free by learning how to be your own best therapist using some of the tools of the *Uncommon Cure for Carpal Tunnel Pain*.

This section of the book outlines some healing movements that can be of remarkable help in relieving your back problems as well.

If you're experiencing back pain it may well be muscle strain. Strain is the result of overstretching your muscles and you now know that your back muscles are being overstretched most of the time.

Here's a simple back pain relief tip you can do on your own

1. Roll a long towel into a tube, or get a swim noodle – one of those long, firm, colorful foam objects that kids love to take into the pool.
2. Put the roll on the floor.
3. Lay down directly on top of the tube (the long way), preferably on your back. Support your head, spine and tailbone on the tube.
4. When you get situated, roll your thumbs outward, as much as possible
5. Just lay there. Let gravity do all the work.

In about five minutes, you will notice that your shoulders are much closer to the floor. This is happening because the muscles in the front of your body are stretching and opening up; they're pulling less on your back muscles, too.

Although it is good to stretch and relax your chest muscles, it is even more important to strengthen your back muscles, or your body will go right back into the same position that strained your back in the first place.

To begin to strengthen your back, you can use a similar healing movement with the same tube, while you are still on the floor.

1. As you lay there, *squeeze* your shoulder blades toward your spine. Your chest should rise toward the ceiling.
2. Make sure that you are only moving your shoulders; the head, neck and lower back are not involved in this movement and should remain still.
3. Importantly, don't give up if you have trouble making your shoulders move. Gravity is a powerful force. Put it to work for you. And if you haven't used your powerful back muscles in a while, it may take them a bit to remember how to move again.

As with the other healing movements you've read about, do this only two or three times for the first few days until your muscles get used to it. Then you can increase your repetitions or, if you'd like, get down on the floor two or more times a day.

Breathing to Reduce Pain and Stress

We all know that we need to breathe to live. Many of us even kind of understand the part breathing plays in terms of fueling our bodies.

However, most of us don't have a clue how important breathing properly is for our posture, our muscles and our ability to handle stress and pain.

Worse still, most of us don't breathe properly, at least not all the time. Since breathing is usually done automatically, we don't know that we could be doing a better job at it.

This chapter will provide some enlightenment on the true importance of breathing and will walk you through how breathing can be used for pain relief.

As we grow into adulthood we often develop habits that, as you've seen, cause many of our body's problems. We throw our posture and structural alignment off. We cave in to gravity and fall even further forward.

Sometimes the structural misalignments (poor postures) we develop as a result of these bad habits lead us to breathe either with the upper part of our chest or with our abdomen (the belly). Sometimes we have had faulty training about using only our upper chest or belly as the correct way to breathe. Neither way of breathing is right for us.

Focus on your own body for a moment.

Perhaps you have a strained upright posture that causes you to try and gasp air into the upper chest. Or maybe you have a collapsed posture and cannot use your chest to breathe at all.

It's also possible that you believe breathing with your belly is correct and, so, you concentrate on that part of your body instead of making sure that your chest is also moving when you inhale and exhale.

You may even be one of the people who hold their breath periodically without realizing that they're doing so.

Any of these methods of breathing restricts our natural movement and reduces the amount of air we can inhale. This is very bad for us.

We need sufficient oxygen to function properly and feel our best. Without it, we feel tired and lack energy. Of course, any pain we're feeling wears us out even more so.

So, the first thing you need to do is find out what your breathing style is.

1. Place one hand on your chest and the other at your waist, near your belly button.
2. Do this in both the standing and sitting positions. Remember to try and breathe the way you normally do. Don't try to compensate or do anything differently.

When we stop and pay attention to our breathing we can alter the way we use our lungs, like practitioners of yoga, or Feldenkrais or Alexander movement therapies do. We have the ability to use our breathing in a powerful way that can relax our minds and our muscles.

Here are some healing movements that are exceptionally effective at helping your body relax:

1. Find a comfortable surface in a quiet place.
2. Lie down in neutral position — this is especially good for beginners — and keep your head as flat as you comfortably can.

3. Place one hand on your abdomen (belly) and the other on the center of your chest.
4. Inhale. You should feel both of your hands moving.
5. If only one hand moved, practice breathing through your full chest and abdomen until both hands rise with your inhalation. This will probably require some concentration as you will be working on new movement.
6. When you feel comfortable that your breathing is actually balanced between the abdomen and the upper chest, you will be able to expand your breathing ability.
7. Try controlling the parts of the body that you are using to breathe. First inhale using your chest. Exhale, then try breathing in with your belly. Exhale again and breathe through both chest and belly at the same time.
8. Place your hands lightly on both sides of your ribs.
9. Move your ribs outward toward your hands with your breath. Even though this will be difficult at first, keep trying. You can make it happen. Notice that now you are not moving your chest to the front, rather you are making the chest expand to both sides. This may take practice, but it's really fun when you realize that you can do it.
10. Inhale into your sides, keeping the front surface of your chest flat. When you have accomplished this, exhale.
11. When you exhale, let everything go. All your stress, tension, cares and concerns – exhale them with your breath.

If you can, give yourself the gift of doing this at least once a day, just so you become truly aware of your breathing.

Remember to focus solely on your breathing, ignoring as much of the world around you as you can. See how many different ways you can move your chest while you lie down. When you concentrate on your breath, nothing else will be in your mind.

A PERSONAL WORD ABOUT THERAPEUTIC MASSAGE & BODYWORK

Hopefully you have already tried some of the healing movements in this book and found them very helpful.

You are beginning to see that there is a way to lead a pain free life.

And, that you can play a huge part in your own recovery from pain.

You don't have to settle for the options a doctor may have discussed with you in the past. In fact, you can now be less dependent on a health care practitioner.

You can also help friends and family feel better.

Sometimes, however, you can't work on yourself very effectively. For instance, although you've learned some movements for helping with your own back problems, you've also found that you can affect only certain ones on your own.

If you decide that you do want or need more help in correcting the alignment and muscle compensation problems you've developed, it is important to remember that there are many more options than you thought you originally had.

I feel the most important of these is therapeutic massage. I am a huge proponent of this type of therapy because a really effective massage therapist who has a good working knowledge of the body can make a big difference. I am an even bigger proponent of St. John Neuromuscular Massage. I have seen it make physical miracles happen. Literally, miracles.

Massage may be used by almost every individual, for almost every medical condition involving soft tissue pain.

Most pain, especially the kind for which no cause can be found by your doctor's tests, is attributable to soft tissue distortion or dysfunction. That is actually good news because soft tissue can be manipulated and corrected by skilled massage therapists.

Massage can improve movement of blood and lymph, eliminate muscle contraction, correct postural distortion, increase range of motion, and reduce pain.

Massage also reduces central nervous system overload by relieving muscle tension and releasing endorphins and serotonin – the feel-good hormones. This results in feelings of wellness, relaxation and stress reduction. And, reduction of stress can lead to a lessening of pain.

There are massage therapists who specialize in pain elimination and enhancement of function. They have learned and use specific rehabilitation techniques such as those developed by Paul St. John – Neuromuscular (NMT) or his newer training, St. John Integrative Neurosomatic Therapy. This is very logical work and can be pretty intense. It is extremely beneficial in relieving pain and dysfunction. If I sound biased, it's just because I am. It straightened me out.

Rolfing, Hellerwork and sports massage are also advanced specialties offered by some massage therapists and body workers.

Feldenkrais is another technique. It is an extremely subtle way of correcting distortions. The Feldenkrais practitioner doesn't "work" on a body the way a massage therapist does. Rather, the practitioner guides or suggests movements which allow your body to normalize itself. It must be practiced over and over to maintain corrections, and it does take time. It is much different than NMT, and they can be used together. I like it a lot. Alexander Technique is similar.

All of these techniques work to eliminate soft tissue distortion and pain and restore body balance. They are frequently used for carpal tunnel pain, headaches and migraines, scoliosis, tendonitis, TMJD, back, neck and shoulder pain. Reflex sympathetic dystrophy and other soft tissue dysfunctions also can benefit.

(Scoliosis, by the way, is best treated with the St. John methods, which address physical asymmetries.)

Particularly the Paul St. John methods address the body as a unit, rather than as isolated parts, because it is. Practitioners treat the problem, not the symptoms. But they determine the problem based on the symptoms.

Muscles in contraction are tender to the touch. The discomfort is often referred to as "good pain." It is uncomfortable, but feels as though that is just what was needed.

Massage is an integral part of European medical community. It is inexpensive and effective, and so is used instead of drugs and surgeries.

Massage is “old medicine.” Hippocrates, the father of modern medicine, said, “A physician must be skilled in many things, but most assuredly in the art of rubbing.”

Massage enhances medical treatment. There is a growing body of research which documents the benefits of massage. It is still not common enough, but massage is increasingly prescribed by American doctors for illness, injury and pain.

Who Uses Massage?

Athletes, week-end warriors, housewives, retirees, children, people with immune deficiencies, medical professionals, white collar workers, blue collar workers, students, individuals suffering from pain and without pain.

Massage is appropriate for all ages and occupations. A good therapist will gear the technique and pressure to the health and needs of an individual client.

In addition to the specialized types of massage I mentioned earlier, commonly used types include Swedish, deep tissue, pressure point or trigger point (often confused) and sports massage. There are specific techniques for infant and pregnancy massage, and for manual lymph drainage. (My colleague in Poland has even developed a program of massage for cosmetic purposes and it is often used in conjunction with plastic surgery.)

Depth of pressure depends on the practitioner’s training and philosophy and sensitivity to his or her client. There is wide variance in technique among practitioners of massage, and overlap between named techniques.

If massage therapy is not the answer to all of the body’s ailments, it clearly is beneficial regardless - either as an adjunct to conventional medical treatment or in and of itself.

Kathryn Merrow, as adjunct faculty, notes and additional comments, from presentation at in-house alternative therapy symposium at Henry Ford Hospital in Detroit in 1998.

A Look at Massage Therapy in Practice

The therapist is warming the inner lower arm with compression techniques. Apply a gliding motion to a lightly lubricated (to prevent drag on skin) arm.



The pressing movements move from hand to elbow. It is easy to remember: always move toward the heart. When the muscles are warmed first, it is then appropriate to treat with deeper pressure.

Continue compression strokes on the inside (bicep) and backside (tricep) of your upper arm, and on the outside of your upper arm.



This outside area may be the most uncomfortable. Warming strokes (above) should start with light pressure and, as your muscles relax, may become deeper to affect more muscle.



The therapist is warming the outer lower arm by lifting and pinching the soft tissue. The muscles on this side of your arm are more likely to cause wrist and hand pain



Self-treatment using a tennis ball as a therapy tool.

As the therapist did, begin on the lower arm...



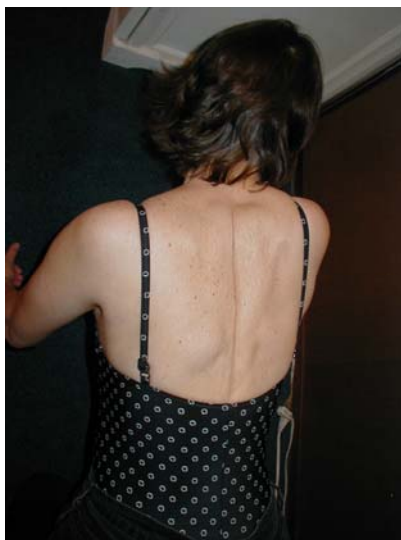
... and work upward toward the shoulder.



Building Back Muscles



Squeezing your shoulder blades (scapulae) together in the back will help strengthen your back muscles and stretch, or open, your chest muscles. Try to keep your head over your shoulders when you do this. Watch that your head does not move forward. Note the crease in the model's back caused by squeezing her shoulder blades together while "walking like a lion" on the floor.

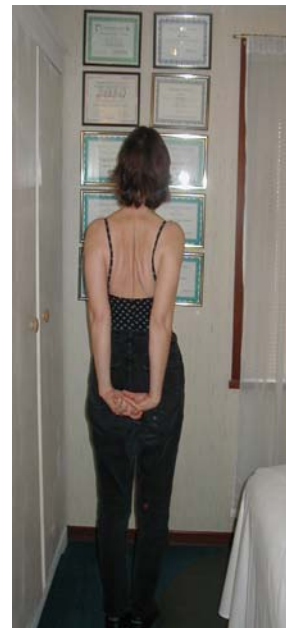


Here are directions for another way to squeeze your shoulder blades together. Place your hands behind yourself and lift them upward a bit. You will feel your shoulder blades move toward your spine. When you start doing these scapular squeezes, only do two or three for the first few days, then build to more. If you do more right away, your newly awakened muscles will ache, due to overwork.

The variation on the right of the scapular squeeze exercise may be easier for beginners.



Squeezing shoulder blades while standing.



Clasp hands mid-back and squeeze shoulders back. Press your hands as far back as you can while you roll your shoulders backward.



This is a "swim noodle." Made of firm foam, they come in many colors and cost only a few dollars. They are readily available in the summer and beginning of the swimming season. If you cannot find one, you may roll a long towel tightly into a tube, and secure it with ties to prevent unrolling, and use that the same way as a noodle.

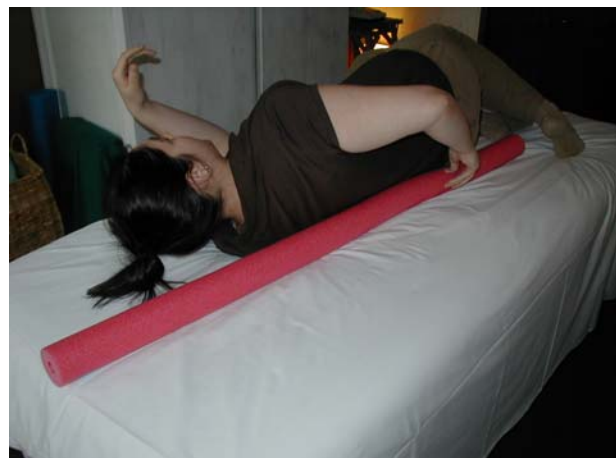


Here, the model is laying on the noodle. It's a great tool for passively stretching your chest muscles.

Lay with your head, spine and tailbone all on the noodle (or rolled towel.) While you lay there, gravity will work for you and will pull your shoulders closer to the floor. If you wish, start with only one minute. But, then work up to 5 minutes of relaxing on the noodle. Place your palms up, with backs of hands on the floor, if you can. If you can't, keep trying.

After 5 minutes, you will be able to tell that your shoulders are closer to the floor. When you have done this for several days (once or twice a day), you may squeeze your shoulder blades toward the noodle. This has the added benefit of strengthening your back.

The model is demonstrating how to roll onto a noodle.



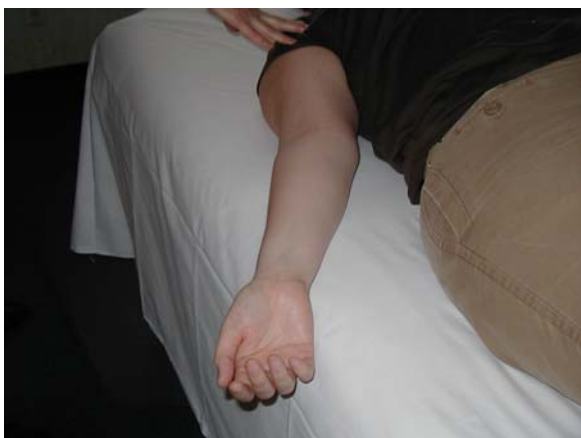
Hand placement while laying on the noodle is very important.



Here, the model is demonstrating incorrect hand position on the noodle. This common, back of hand position is caused by shortened chest muscles. This hand position perpetuates short, tight chest muscles.



Your thumb should be pointed toward the ceiling when you are laying on the noodle. The position is like shaking hands: thumb forward. Thumb forward is also the correct hand position to use when walking. This hand position helps open the chest muscles.



This is an exaggeration of neutral hand position, but this palm up position allows even more movement in your shoulder and an even greater stretch for your chest muscles.

LINKS AND OTHER INFORMATION

If you would like to know more about the massage methods and self-help techniques that Kathryn Merrow and her clients have used to become pain free, please visit <http://www.CarpalTunnelPainReliefNow.com> <http://www.SimpleStrengthening.com> and <http://www.SimplePainRelief.com>

Please remember: I give this information to you so that you can be informed. It is important that you understand how your body works and why you hurt. An informed patient, or person, is one who understands what it takes to have a successful recovery.

Is it ever important to see your doctor for treatment? You bet! There are many conditions which absolutely require the services of a physician, including carpal tunnel syndrome, and I would not be here today if it were not for skilled surgeons.

But, there is so very much we can do for ourselves when we understand natural laws and take control of our own bodies.

I wish you success in your recovery from pain and the best of health!

Kathryn Merrow, The Pain Relief Coach