

Freedom of Movement

"We strive to help control or rid you of your pain, but our goal is also to train/teach you how to manage your body independently," says Adam Lindsey, Fellow of Functional Manual Therapy™ at VARDAN, summing up FMT's approach not only to injuries, but total fitness and efficient living

Virender Sehwal 34

CRICKETER | Shoulder injury



I HAD A HAD TWO shoulder surgeries in 2005 and 2010, which led to restricted flexibility and limited range of motion in my shoulder. I went for rehab, but still sometimes experienced post-surgery stiffness.

I then learnt about FMT at VARDAN. The very first time I met the FMT therapists, they had a look at my shoulder and "released" it, which really helped. They re-established my range of motion. I realised that my injury resulted from the fact that I was throwing from the arm instead of throwing from the whole trunk and core mechanism. They worked on my core so that I was able to use my body more efficiently to throw. They had a special set of orthotics for me, which I wore during my running and muscle strengthening. VARDAN has one floor for physical therapy, an other for customised exercises programs and a third for Pilates. I use facilities on all three floors! My friends and a lot of other cricketers are going there for treatment too.

Cricket is a demanding sport but there are injuries in other sports as well. I would recommend FMT to all sportspeople to everyone, really. Even my mother, who suffers from migraine, slipped disc and severe arthritis, has started walking once again, thanks to FMT!

Going about their daily lives, people strive to avoid joint, restricted movement and, of course, the possibility of injury. Whether it is a top sporting event or a leisurely tennis game, a walk on a park or housework, both acute injury and single wear and tear of the body must be guarded against.

A body must be totally aligned and fit for it to perform optimally, and that is precisely what Functional Manual Therapy (FMT) aims for. "We understand the difference between average and truly great, efficient movement," says Adam Lindsey, one of just 16 Fellows of FMT worldwide, based at VARDAN, a joint initiative of The Times of India Group and the Institute of Physical Art, USA. "And we never say we are specialists in any one joint, we treat the whole body."

"This is why FMT—as practised by the American FMT therapists, Adam, Charles, Jovene and Ravi, and with their 13 Indian colleagues at VARDAN—makes such a difference. "It all comes down to approach," says Lindsey. "The big point for any person is efficiency. Small dysfunction over time can lead to pain and injury. But the body must be looked at as a whole unit; a patient with foot pain may have a dysfunction of the knee and/or pelvis that must be addressed. If ignored, pain is likely to return."

"Most people think if there is a pain, it will go away. Sometimes it seems to but it actually doesn't," he says. "They wait

longer and get worse. Why let it get worse? They don't go in for preventative dental care although teeth can be replaced. Our bodies should be viewed the same way, so they can be replaced."

As FMT therapists aim for whole body efficiency, they use their hands as well as exercise to correct dysfunctions in joints, muscles, tendons or other tissues in the body. "We make sure walking, running, throwing, lifting—every movement related to performance—drawn from the core muscles," he says, adding the "core" philosophy of FMT. "If posture is incorrect, the core will not fire as it should."

"We are trained to observe faulty movement patterns," he says. "We then use our hands to palpate the patient, feel the dysfunctions to confirm what we see." Once the root of the dysfunction is identified, they use techniques unique to FMT to mobilise the affected part.

"Typically the first dysfunction we treat is mechanical," says Lindsey. "This may be a joint, muscle, tendon, nerve or visceral tissue that is not moving well or stuck." These tissues may be directly linked to the pain or indirectly affect or contribute to pain and inefficient function in another area of the body. An FM therapist is trained to use these connections and treat what may not be obvious to the average observer, because the body tries to compensate for one malfunction

by pulling using another. After mechanical dysfunctions are mobilised with FMT's hands-on techniques, neuromuscular control has to be re-established.

"Once a joint, muscle or tendon has regained mobility, the muscles need to be retrained to utilize the motion gained," Lindsey explains. "A lot of people think that if they do an exercise, the right muscles will get stronger. What they don't always understand is that when there has been an injury, pain, or even just mechanical restrictions, muscles shut down and research shows that they may not just start working again, even with aggressive exercise. These muscles need to be very specifically facilitated.

Lately, a patient needs to regain motor control, which is mostly a functional issue. "For a cricketer this may be throwing a ball or swinging a bat," says Lindsey. "For a runner it may be the foot touch on the ground." More and more research is demonstrating the importance of "re-training the brain", not just the muscles, for lasting improvement in function and performance.

The second and third stages—neuromuscular re-education and motor control—are very important because without these gains made in treating the mechanical dysfunction would be lost.

Injuries are not always acute but can

build up through years of misuse or long periods of rest. Lindsey looks at both differently. "Acute injury needs to be addressed promptly. We try to help normalise tissues and joints as quickly as possible and restore motion when it is appropriate," he says.

When it comes to wear-and-tear injuries, FMT's focus is an efficiency and someone's habits over time and how that affects them. "If someone is very efficient, they will have smooth movements and maintain control over the core muscles that stabilize the trunk," Lindsey says. "A person who is inefficient may not have a problem today or tomorrow, but over time he may."

Surgery is always an option—sometimes an inevitability—but in many cases FMT offers an alternative. "Physical therapists are part of the total healthcare framework that includes physicians and surgeons, but often FMT can delay or totally avoid surgery. As an example unique to FMT is a revolutionary neuromuscle repositioning technique developed by FMT co-founder Gregory Johnson, which reduces swelling and irritation in the knee so that mobility can be regained without surgery."

To schedule your appointment, SMS VMT to 98888 or email varden@vardenindia.com or visit www.varden.in

VARDAN is Times Group Initiative

Aditya Kanoria 54

BUSINESSMAN | Cervical Stiffness

I SUFFERED A STROKE 10 years ago to which my left side was partially paralysed. I was undergoing treatment in Kolkata when I heard about FMT and decided to try it. I have had six sessions and now I am back again after a break. I like many Indians feel pressure on my neck wrongly. FMT is not that. The initial sessions were exhausting and sometimes painful but definitely made a difference to my condition. And I must say that the FMT therapists work harder than their patients! Thanks to their efforts and specific FMT techniques I can now walk with ease and even climb stairs. My neck stiffness is no longer in my face. Now it will be a long while before I am certain that I will not continue to improve with FMT. It is FMT's hands-only practice that makes all the difference. After all, they are looking at my brain and being and you can only feel their pain if you touch them with your hands...

Gaurav Singh 54

BUSINESSMAN | Hamstring injury

(As Recounted by his FMT Therapist)

HIS VERY ACTIVE BEING, his runs, plays tennis, does yoga and works out. It is been a year since he had a hamstring avulsion (Hamstring is one of the major muscles at the back of the thigh). He had surgery in the US and returned to India for rehab, where VARDAN helped him recover.

"I came very early on in that program and started by showing him how to move without pain, so that would not put strain on the injury. Once his pain was off and he was able to move, I worked on his core, so that getting his joints to move normally again. Hamstrings are big, and each muscle must move independently, but when the tissues have been subjected to injury, they get stuck. And that needs very specific hands-on work, not on the surgical site which is still healing, but on the areas affected as a secondary result of immobilisation.

Habitual movement patterns don't mean automatically go back to the correct way after immobilisation. So we had to work to retrain his gait pattern. We had full functional strength training. But it is not enough to go back to training and do it, just do it once over and over and do not, give me an idea session with FMT!"

Arjun Sharma 47

TRAVEL & RETAIL | Herniated Disc

I CAME TO VARDAN WITH A SLIPPED disc and a long history of lower back pain. I was trying various physiotherapy, cycling, eight hours of my school days. But for the past 4-5 years I have been getting muscle spasms in my neck, shoulders, back and hips. In the US, and followed their advice of rest and physiotherapy. I had to limit many of my activities for the last one year, because the spasms became more frequent. Then I heard about FMT. The FM therapists at VARDAN explained why I was getting this pain—it was postural. I had an over-arched body, but my core was weak. If the muscles close are strong and fire properly, other parts of the body will work

Partha Bose 50

BUSINESSMAN | Back Pain

JAM INTO HIGH INTENSITY sports activities like my tennis. I was struggling with my cycling, eight hours of my school days. But for the past 4-5 years I have been getting muscle spasms in my neck, shoulders, back and hips. In the US, and followed their advice of rest and physiotherapy. I had to limit many of my activities for the last one year, because the spasms became more frequent. Then I heard about FMT. The FM therapists at VARDAN explained why I was getting this pain—it was postural. I had an over-arched body, but my core was weak. If the muscles close are strong and fire properly, other parts of the body will work

properly! To. There were large segments of my spine that were stiff, not moving, so when I cycled, neck, so much neck loss was occurring at one or two segments. This resulted in excessive shearing on the discs, which led to my low grade pain, and resultant muscle spasms of the large muscles attempting to stabilize these segments against the excessive motion. As I hoarse, very often, the problem is not where the pain is—the pain is the secondary manifestation of a problem somewhere else. The spasms are in response now, but even if they occur I know what to do. I am back to my running and plan to be active for the next 15 years with FMT!"