

# **Tuina**

## **Weekend 3**

### **Conditions of the lower body**



# Introduction

## Conditions of The Lower Limb

Level 3 is a natural extension of Level 1. The back and lower abdomen are the beginning of the legs. The Ilio posts connects to the Femur and to the lumbar spine, just think of this one muscle that connects leg and back.

The back and lower abdomen (*Dan Tian*) also form the connecting link between the legs and the upper torso and arms, allowing us to access the power of the legs and transmit that power into the arms. For this reason, the *Tian Gan* exercises form the Qi Gong training for this part of the curriculum.

As in all tuina protocols, treatments always proceeds from big to small and from root to tip. In the leg, the hip is the root, the knee is the middle and ankle is the tip. Just as a problem in the hip can create a problem in the ankles and knees, similarly, a sprained ankle improperly treated or incompletely healed can easily affect the knees and hips.

Treatments for the lower limb should start with the Back Protocol. This is followed by techniques that free up the musculature and energy of the hip, thereby ensuring the free flow of Qi through the limb. It is particularly important to release any adhesions that exist between the different layers of the fasciae, and between the fasciae and the bone. This is achieved in part by separating the various packets of muscle fibers in the quadriceps, biceps femoris and abductor groups.

Next, the ilio-tibial band, on the side of the leg, is released or "ironed" out. This helps to balance the front and back of the leg, and the inner and outer compartments of the thigh. A second purpose of this phase is to relax the tendons of the muscles that attach at the knee joint so that the knee can be moved through its complete range of motion.

In Chinese medicine the knee is sometime referred to as "the house of tendons." Because of its position as the junction between the upper and lower leg, it is an important but vulnerable link, and is therefore prone to injury.

Injury to the knee is often due to an imbalance in the musculature above and below the knee, in the upper and lower leg. Many sports and exercise routines over-strengthen some muscles at the expense of others, or lead to incorrect habits in

walking and running.

The legs are made for walking and running, but even these basic primal actions must be done correctly. Incorrect use of the legs and uneven muscular development are two major causes of lower limb problems, and can be factors which prevent complete resolution of an injury.

These imbalances and unconscious habits must be corrected, not only by tuina therapy, but Qi Gong exercises in order to facilitate full recovery and prevent re-injury. Even if movement was correct before an injury, after injury the body begins to compensate for the injured part. Even minor changes in the tissue can have a profound effect on neuro-muscular functioning. For this reason, weight-bearing exercises that stress correct form and ensure that the muscles of the upper leg and lower leg are relaxed and freely moving must be an essential part of the rehabilitation process.

One should keep in mind that injury or dysfunction in one leg will have global effects on the body. Even if initially only the ankle or the big toe are affected, over time compensatory adjustments in the gait will cause changes in the musculature and alignment of the back and the other leg. While the treatments in this section are performed on the back and on the affected limb, it should be understood that the unaffected leg must also be examined and treated.

## **Intermediate Hand Techniques**

In Level 3 the hand techniques presented rely on the practitioner's ability to do more complex maneuvers with his hands, often combining two techniques in one. This further develops the ability to use the body in what might seem to those less skilled as contradictory movements. It allows the development of yin/yang hands (simultaneously using opposite hands for opposite purposes — giving/receiving, secure/moving, forceful/soft).

# 1. Shaking/ Traction

Hold the distal end of the patient's limb and generate a constant up and down shaking motion so that a wave-like motion is conducted through the limb to the body. The amplitude of the wave may vary.

- In light, sustained shaking, the limb is under slight traction and the amplitude of the wave is small and constant.
- In heavy shaking, more force is used and the wave has a larger amplitude, sometimes punctuated by quick forceful movements.

## **Areas of Use:**

- Limbs

## **Practice Areas:**

- Arm/shoulder • Leg/hip

## **Intention/Image:**

*Light and Sustained method*

## **Effects:**

*Light and sustained method*

- Realigns joints
- Stops pain

*Forced and quick method*

- Similar to the light and sustained method, but the action is more forceful and the waves have a larger amplitude. Rather than being a sustained motion, as one wave ends the next begins.

Realigns joints

Breaks stagnation

Like holding and shaking the end of a blanket to straighten or smooth it on the surface of a bed

Creates sustained, regularly spaced, small amplitude waves that travel in a specific direction through the target area and beyond

*Forceful and quick method*

Like forcefully shaking out a sheet or blanket. Can also be like cracking a whip



## 2. Compression/Traction and Separating/Joining

A slow, gradual manipulation in which a joint is first gently compressed and allowed to internally rotate and then guided into traction, allowing the tissues to realign.

**Areas of Use: Effects:**

- Joints of the limbs

**Practice Areas:**

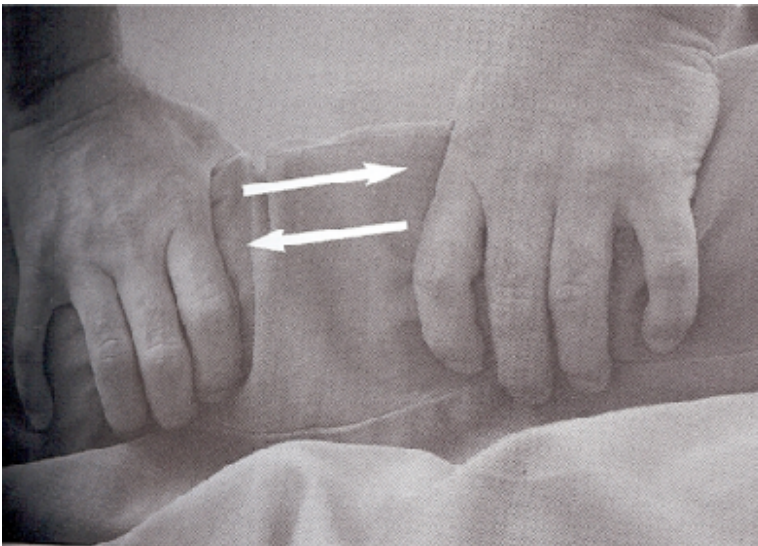
- Knee • Elbow • Wrist

**Intention/Image:**

- Disinhibits joints and connective tissue • Realigns muscle fibers
- Breaks adhesions
- Harmonizes Yin and Yang in

joints, muscles, tendons, connective tissue

- As though re-joining (lining up) two broken pieces



### 3. Pressing/Squeezing

A manipulation in which the thumb or palms are used to press and squeeze with the intention of directing local circulation to the treated area while simultaneously realigning muscles, tendons, ligaments and bones.

#### **Areas of Use:**

- Joints

#### **Practice Areas:**

*Using Thumbs*

- *Ming Men*

Wrist • Hand • Spine Ankle/foot

*Using Palms*

Knee Shoulder

#### **Effects:**

- Stimulates local circulation to draw Blood and Qi to local area
- Realigns muscles, bones, tendons

#### **Intention/Image:**

- Like molding clay, uses a squeezing motion to re-shape into a specific configuration



## 4. Oscillating

The palm is placed on the surface of the body letting the weight of the hand sink into the tissue. The palm then oscillates back and forth in loose relaxed manner producing a gentle internal kneading in the tissues.

### **Areas of Use:**

- Areas with large, thick muscle such as the shoulder, back and buttocks

### **Practice Areas:**

### **Effects:**

- Acts at the level of the skin and muscles
  - Moves Qi and Blood
- Relaxes spasms
- Disperses local stagnation • Realigns muscles
- Spreading ripples moving outward in one direction like a small stream coming into a lake

Rhomboids, Back muscles Trapezius, Buttocks **Intention/Image:**





## 5. Tweaking/Nipping

This method uses either the thumb and index finger or the middle knuckles of the first and second fingers to pull off the superficial layers of the skin and the subcutaneous tissues and release them, resulting in a snapping sound. It can be done to break adhesions, or activate the flow of Qi in the superficial layers of tissue. It can be done until the skin is red and blotchy. Nipping can also be done on the Jing Well joints at the tips of the fingers and toes in order to activate the flow of the Qi in the channels.

### Areas of Use: Effects:

- Back, nape, arms, legs, finger and toe tips

### Practice Areas:

• • •

- Activates Qi at the levels of the skin and muscle • Activates Qi in the channels
- Draws evil Qi and stagnation to the surface
- Breaks adhesions • Clears heat
  - Creates a momentary vacuum that the Qi quickly fills

Lumbar spine, Back Nape, Jing Well points Achilles tendon



# TIAN GAN EXERCISES

1. SWORD HAND
2. DIAGONAL CHOP
3. COVERING PALM
4. COVERING PALM WITH CHICKEN HEAD 5. REVERSE  
COVERING PALM
6. DRILL & PULL • ACROSS THE BODY • STRAIGHT
7. ROLLING BACKFIST • TWO COUNT • CONTINUOUS
8. SHOULDER (RIB) ROLL
9. COBRA OUT OF THE BASKET
10. DRILL & CHOP
11. SPIRAL UPWARD & PRESS DOWNWARD 12. ROCKING  
HORSE WITH THREE ROOTS
- HORSE • PRESS • POKE

# Treatments

## ACUTE BACK PAIN

### *BASIC BACK SEQUENCE*

PRESS (AN) with thumbs under the edge of the tip of the tailbone. Hold and wait for the release.

Repeat decompression of the lumbar area several times – remember to release slowly. OCILLATE tight areas using the palm

BACK OF LEGS - From Basic Sequence

RUB ROLL (Foulage) the legs.

Pick Up the leg by holding it under the knee with your palm and rotate the leg as you ROLL (GUN) the hip, lumbar and buttock area.

STETCH (YIN SHEN) the oblique muscles and lumbar muscles by lifting the hip and pressing down on the lower ribs.

TRACTION & SHAKE (DOU) the legs

## CHRONIC BACK PAIN

### *BASIC BACK SEQUENCE*

PRESS (AN) with thumbs under the edge of the tip of the tailbone. Hold and wait for the release.

Repeat decompression of the lumbar area several times – remember to release slowly. OSCILLATE tight areas using the palm.

RUB ROLL (Foulage) the legs.

Pick Up the leg by holding it under the knee with your palm and rotate the leg as you ROLL (GUN) the hip, lumbar and buttock area.

STRETCH (YIN SHEN) the oblique muscles and lumbar muscles by lifting the hip and pressing down on the lower ribs.

TRACTION & SHAKE (DOU) the legs.

ROLL femur and open and close the sacro-iliac joint BACK OF LEGS -  
From Basic Sequence

FRONT OF LEGS - From Basic Sequence

If Torn Muscle:

Round rub torn area towards the bone.

If Twisted (scoliosis) but no compression:

PUSH (TUI) muscles away from bone with the palm and HAMMER  
(CHUI) on back of palm with other hand.

If One Twisted Vertebrae:

PRESS (AN) in opposite directions with thumbs in a pumping action.

If Compressed Disc:

-PRESS (AN) down into the psoas muscle and wait for it to release.

-With patient on back and knee raised. PRESS (AN) just inside the Ischium.  
Hold and wait for the release, 2-3 times, in order to release the pelvic floor. -  
If vertebrae is anterior, TWEAK the skin with TRACTION to pull vertebrae  
posterior.

-TRACTION & SHAKE (DOU) the legs

## **SUBLUXATED SACRO-ILIAC JOINT**

### ***BASIC BACK SEQUENCE***

PRESS (AN) with thumbs under the edge of the tip of the tailbone. Hold and wait for the release.

KNUCKLE ROLL (GUN) the hip and buttocks.

PRESS(AN)and HOLD GB29 & GB30 as lift and move leg.

Use elbow to PRESS ( AN) GB 30 and sacro-iliac joint area as you rock the leg. PRESS (AN) around the greater trochanter while holding the lower leg and moving the leg.

DIG (QIA) & ROUND RUB the sacro-iliac joint.

DIG (QIA) and ROUND RUB the area just inside BL 36 BACK OF LEGS -  
From basic sequence

## **PIRIFORMIS SYNDROME**

### ***BASIC BACK SEQUENCE***

PRESS (AN) with thumbs under the edge of the tip of the tailbone. Hold and wait for the release.

PRESS (AN) the point 1 inch below GB 30, and another point one inch below GB 30 and 2about 2/3 of the distance between the greater trochanter and the hiatus of the sacrum.

DREDGE (MA) the gallbladder channel.

ROLL (GUN), ROUND RUB, & PRESS (AN) at the attachments of the piriformis muscle.

PRESS (AN) ROUND RUB the sacral attachments of gluteus medius.

BACK OF LEGS - From basic sequence

Note: A tight piriformis can press on the sciatic nerve causing sciatic pain that is often misdiagnosed as the result of herniated discs.

## **PULLED GROIN MUSCLE**

### *BASIC BACK SEQUENCE*

PRESS (AN) with thumbs under the edge of the tip of the tailbone. Hold and wait for the release.

BACK OF LEGS - from basic sequence.

Bend the patient's knee. Move the leg as you PRESS (AN) the painful area in the groin.

FOULAGE/ RUB ROLL (CUO) the leg.

ROTATE (YAO) the knee and hip

TRACTION & SHAKE (DOU) the leg.

PRESS (AN) and ROUND RUB LIV 5 or LIV 8 as you lightly PRESS (AN) the REN 3 and REN 4 area in the lower abdomen.

PRESS (AN) and DIG (QIA) the opposite side LIV 1.

Note: The slow walk exercise is important in order to rehabilitate this injury.

## **NON-SPECIFIC HIP PAIN**

### *BASIC BACK SEQUENCE*

PRESS (AN) with thumbs under the edge of the tip of the tailbone. Hold and wait for the release.

BACK OF LEGS - from basic sequence.

PRESS (AN) around the greater trochanter while holding the lower leg and moving the leg.

PRESS (AN) down into the psoas muscles and wait for it to release. FRONT OF LEGS - from basic sequence

BEND/EXTEND (QU/SHEN) the hip and knee.

ROTATE (YAO) the hip and knee.

TRACTION & SHAKE (DOU) the leg.

For Arthritic Pain:

PRESS (AN) and course the Qi from GB 39 to GB 34. PRESS (AN) and course the Qi from GB 34 to GB 30 PRESS ST 31

Use more shaking with gentle traction -repeat several times throughout the treatment.

## **ILIO-TIBIAL BAND(ITB) SYNDROME**

### **BASIC BACK SEQUENCE**

PRESS (AN) with thumbs under the edge of the tip of the tailbone. Hold and wait for the release.

BACK OF LEGS - from Basic Sequence. FRONT OF LEGS – from Basic Sequence PRESS (AN) ST 31

PRESS (AN) GB 29

ROTATE (YAO) hip and knee

DREDGE (MA) Gallbladder channel with forearm or palm.

PRESS (AN) the ITB with the thumb by rolling the leg into your thumb.

DIG (QIA) at GB 40 and around the lateral malleolus.

## **CHONDROMALACIA OF THE KNEE**

Bend the patients knee.

PRESS (AN) and hold the psoas muscle until it releases.

FRONT OF LEGS - Basic sequence

PRESS (AN) & DIG (QIA) ST 34

PUSH (AN) and ROUND RUB around the edges of the patella LIFT the patella with 5 fingers

Gently CHAFE around the edges of the patella.

BEND & EXTEND (QU/SHEN) the knee and hip

ROTATE (YAO) the knee and hip

## **TORN MENISCUS & TORN ACL**

Bend the patients knee. PRESS (AN) and hold the psoas muscle until it releases.

FRONT OF LEGS - Basic sequence

PRESS (AN) ST 31 & ST 36 and course the Qi between the two points. PRESS (AN) and ROUND RUB GB 33 and GB 34

PRESS (AN) and ROUND RUB SP 9 and SP 10

PRESS, and gently PLUCK (BO) into the three tendons behind the knee. Gently hold and PRESS (AN) any cartilage bulging behind the knee. BEND & EXTEND (QU/ SHEN) the knee and hip

ROTATE (YAO) the knee and hip.



## **TORN LIGAMENTS (Med. Collateral & Lat. Collateral Ligaments)**

Bend the patients knee. PRESS (AN) and hold the psoas muscle until it releases.

FRONT OF LEGS - Basic sequence

DIG(QIA) AND ROUND RUB in the depression between the femur and the tibia.

DIG (QIA) & ROUND RUB the attachments of the ligaments.

PUSH (TUI) & ROUND RUB attachments, with the idea of joining torn fibers together.

Gentle WRINGING with hands above and below the knee with the idea of joining together.

ROTATION (YAO) of the knee and hip.

## **SHIN SPLINTS**

FRONT OF LEGS - Basic sequence

Repeat SINEW DIVIDING of the inter-osseous membrane between the tibia and the fibula.

ROUND RUB along the tibialis anterior muscle, pressing the muscle toward the bone.

Lift and separate the gastrocnemius away from the soleus muscle and DIG (QIA)

ROUND RUB the soleus from the side.

Separate the heads of the gastrocnemius with the fingertips and press into the soleus. PLUCK (BO) & ROUND RUB the Achilles tendon.

ROUND RUB & DIG (QIA) around the ankle joint.

Use thumbs and knuckles to DIG & KNEAD the plantar fascia ROUND RUB between the metatarsal bones.

## **ANKLE SPRAIN**

ACUTE:

Gently PLUCK (BO) the tendons behind the knee.

PRESS (AN) GB 34 and GB 34

SINEW DIVIDE the inter-osseus membrane between the tibia and fibula.

PRESS around the edge of the swollen area, then press inwards toward the swelling. PUSH (TUI) with the thumbs away from the swelling – both upward towards the torso and downwards toward the toes.

CHRONIC: add

PRESS (AN) and DIG (QIA) around the medial and lateral malleoli. PRESS (AN) & DIG (QIA) at KID 4

PLUCK (BO) the Achilles tendon.

TRACTION – stabilize and traction the heel and talus

KNEAD (ROU) and FOULAGE (CUO) the toes. NIP the tips of the toes.

ROTATE (YAO) the hip and the knee.

### **PLANTAR FASCITIS**

Same as the treatments for shin splints, but add the following: DIG (QIA) KID 4

KUCKLE ROLL & KNEAD (with knuckles) the plantar fascia Spread the plantar fascia and DIG (QIA) with the thumbs. FOULAGE & KNEAD the metatarsals. PRESS (AN) on the underside of the heel (where the tears in the fascia are most commonly located) to reconnect the fascia)

## **MORTON'S NEUROMA**

Same treatment as Plantar Fascitis. TRACTION, DIG(QIA) and ROTATE(YAO) to loosen ST4/1 area. ROTATE (YAO) and FOULAGE the 2nd Metatarsal.

## **ACHILLES TENDONITIS & HEEL SPUR**

FRONT OF LEG - Basic Treatment

Gently PLUCK (BO) the tendons behind the knee.

ROTATE (YAO) the knee

Lift and separate the gastrocnemius away from the soleus muscle and DIG (QIA)

ROUND RUB the soleus from the side.

Separate the heads of the gastrocnemius with the fingertips and press into the soleus. PLUCK (BO) & ROUND RUB the Achilles tendon.

PRESS (AN) and CHAFE/SCRAPE the area with the spur. Take a pencil with an eraser and break up the spur.

ROUND RUB & DIG (QIA) around the ankle joint.

Use thumbs and knuckles to DIG & KNEAD the plantar fascia ROUND RUB between the metatarsal bones.

NOTE:

-Use 701 Plasters in conjunction with Osteophyte powder to break up the spur.

-Use the tendon relaxing soak to soften the spur and relax the Achilles tendon.

## **FULL BODY TUI NA SEQUENCE**

### **BACK**

Patient prone

**PALM PUSHING:** Three rounds of Palm Pushing on each side down the Bladder Meridian from shoulders to feet.

**ROLLING** along the back, buttocks and the back of the legs

### **ASSESSING AND TREATING SPINE**

Step I – Compression

Thoracic Spine:

Lumbar Spine:

Note: Make one pass down the spine with three compressions at each position and several compressions at the sacral area. Alternatively perform one compression at each position and make three passes down the spine

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Hands on top of each other, press down the spine, the hands simultaneously cupping and pressing.

As you press accent or emphasize the thoracic kyphotic curve

Time compression with patient's exhalation.

Heat the spine with the palm.

Move slowly, one vertebrae at a time. 3 compressions at each position.

Continue as above, but press the hand flatter on the lumbar curve in order to accent the lordotic lumbar curve.

Avoid pressing straight into the deepest part of the curve (usually around MING MEN (DU 4).

Move slowly, one vertebrae at a time. 3 compressions at each position. Sacrum:

Continue as above again emphasizing the sacrum's natural lordotic curve.

Compress the sacrum as a whole several times

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## Step II - Traction/Decompression

Thoracic Spine:

Sacrum:

## .Step III - Lateral Decompression

Thoracic Spine:

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On the thoracic area, use the 2nd and 3rd fingers and the thumb to stretch apart and separate the vertebrae.

The hand will stretch to span several vertebrae.

Move slowly and lean in with patient's breathing. Start light and work deeper.

Move down one vertebrae at a time, 3 decompressions at each position.

Alternatively perform one decompressions at each position and make three passes down the spine

Lean forward to create the pressure, rather than using finger strength. Lumbar Spine:

On lumbar area, cross the arms - one on lower thoracic and one at the top of the sacrum: lean in to decompress lumbar spine. Time with the patient's breath and release slowly. Repeat several times.

Press in the hollows just above the sacrum on either side of the spine. Hold and wait for a release. One side may release first. Wait for both to release. The sacrum will feel as if it drifts toward the feet. This releases ligaments like the ilio-lumbar ligament which attach the sacrum to the lumbar spine.

On sacrum, cup hands as in step one.

Traction the sacrum towards the feet and rotate the sacrum several times while

holding the traction.

Note which side of sacrum is more restricted

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With the thumbs in the groove on either side of the spine and fingertips on the sides of the body, push out with thumbs away from the spine in a small semi-circular motion, following the line of the ribs.

Force is applied only on the outward movement away from the spine not on the inward returning movement.

Pull up with muscles in palm as you lean forward to achieve the push. Perform 3x at each vertebrae moving slowly down the spine one vertebrae at a time.

Lumbar Spine:

Sacrum:

Finishing Techniques

Continue as above pushing outward from the spine in a small semi-circular motion, following the line of the transverse processes of the vertebrae. Perform lateral decompression 3x at each vertebrae moving slowly down the spine one vertebrae at a time. Alternatively perform the thumb pressing movement one time at each vertebrae from the top of the thorax to the 5<sup>th</sup> lumbar vertebrae and make three passes in total.

Push out from the sacrum with the thumb in small circular motion in order to loosen sacral attachments.

Work slowly from top of sacrum to tip of tailbone.

Find the tip of the tailbone, move your thumbs to the sides of the tailbone and press upward and underneath the edges of the tailbone in the direction of the navel. This releases the sacro-tuberal ligament. Hold until you feel the tissue soften and release.

Digital pressing of the BA LIAO points (BL31-34)

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Rocking Areas of Restriction

Palm Press Shaking on Bladder Meridian Goldfish Areas of Restriction

- 1) Goldfish by holding spine: to release specific areas of restriction.
- 2) Goldfish with palms on ribs, hips and sacrum: to release soft tissue and bony restrictions over larger back segments.
- 3) Goldfish the whole body from feet: to consolidate and integrate the previous by globally activating the back and spine.

## **BACK OF LEGS**

Patient Prone

ROLLING

Simple Rolling of the Buttock Area

PRESS and hold GB 30 (HUAN TIAO) with Thumb PINCHING from the crease of the buttocks BL 36(CHENG FU)

to the foot

DIGITAL PRESSING from BL 36 to BL 60 (KUN LUN) BENDING – knee

PINCH and PLUCK the Achilles Tendon BENDING/EXTENSION/ ROTATION of Ankle FOULAGE of Leg

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## **FRONT OF LEGS**

Patient Supine

PINCH/KNEAD the 3 compartments of the

thigh from the inguinal area to the knee.

FOREARM or PALM PUSHING on the lateral side of the thigh to dredge the

gallbladder channel

PALM-EDGE RUB ROLL patellar ligament above and below

patella. Use sawing motion.

HAMMER over the Patella

Move the patella gently side to side (note restrictions)

PINCH/KNEAD lower leg

SINEW DIVIDING of the inter- osseous membrane between tibia and fibula

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THUMB PRESSING & ROUND RUBBING around the

head of the fibula and along the lateral compartment of the lower leg THUMB PRESSING & ROUND RUBBING between the

calf and the tibia.

With Leg bent and foot flat on floor, SQUEEZE the calf with clasped hands

PRESS/KNEAD/ROUND RUB with the

thumb around the medial malleolus and the lateral malleolus of the ankle.

PRESS/ KNEAD/ ROUND RUB along the sides of the calcaneous and in between the metatarsal bones

Finishing Technique: Foulage of Legs



Til noter: