

## Now that I can bench-press a Buick...

...And crack walnuts with my bare hands, it's time to reflect on the last year of my life using AquaStretch™. If you are not familiar with the current buzz, AquaStretch™ is a unique form of facilitated myofascial release that is done in warm water. Limbs are weighted for some procedures, and the person being stretched is prompted to use 'intuitive movement' to resolve fascial adhesions. The result is: better range of motion, reduced pain, a feeling of 'being loose' and relaxed. I have worked as a facilitator of human movement, including *stretching* for many years.

AquaStretch™ (AS) is not like anything I have previously encountered. Whether you are newly trained in AS, considering training, or using AS regularly, you may be interested in some insights I have to share. This is a story of 'practice based evidence'. I won't be quoting research papers, because they are being written. Use of AS is new... and exciting. It gets results!

AquaStretch™ was developed by George Eversaul in Nevada. His years of cranio-sacral training and bodywork evolved into the unique technique he calls AquaStretch™ ([www.aquastretch.com](http://www.aquastretch.com)). George uses AS with dancers and performers in Vegas, as well as the local hotel workers, UNLV athletes, and 'just plain folks'. If you are fortunate enough to meet and work with George, you will marvel at his creative genius, his 'great hands', and his Socratic teaching style. Since December 2010, I have had two training sessions with George, and look forward to the next. The first day of training, my head was buzzing with all the grips and holds. The next day, after hours in the pool, I had difficulty holding my fork as I slumped, exhausted, over my supper. My grip strength is strong, but I was not prepared for the muscle overload involved during a long day of AS with an unending stream of clients. I was AquaStretched to the limit!

When I got home from Vegas after that first AS training, I headed straight for the pool, and didn't want to get out. My 'new toy' was so interesting, and so effective, everyone in my path got AquaStretched! Previously, my pool therapy repertoire had involved traditional aquatic stretching, strength work, gentle cardio, and sometimes flotation work with a variety of soft tissue release and relaxation techniques. Patients made progress; goals were achieved. However, patience was required, because for some, progress was at a glacial pace. I discovered my favourite thing about AquaStretch™ was the immediacy of the result. The client and I could instantly feel a positive change. Pain, movement restriction, and ability to exercise were almost universally improved. Client participation in AS is another bonus. AquaStretch™ involves teamwork between the facilitator and the client.

Within my first week home from that first training with George, I began using AS with a patient named Jan S. With her permission, here is her story.

### **Jan S. DOB 1952**

"I was diagnosed with arthritis 3 years ago, in the neck, spine, hands and feet. It progressed very quickly and limited my mobility in a short period of time.

AquaStretch has had a profound effect on me both physically and mentally. I experienced pain relief at the very first treatment. AquaStretch has increased my range of motion, and cut my consumption of painkillers by 95%. Thanks to you, I have also learned home techniques for stretching and pain management to help prolong the effects of the AquaStretch session, and get back some of the activity I had lost. This has given me a much healthier outlook on dealing with this (arthritis), as well as being able to finally take a proactive approach to pain management. I can't thank you enough, Connie, for your ongoing care and support". Jan S.

### **Jan's Health Status Before Beginning AS**

- $\geq$  Eight 500 mg Tylenol / day – reduced but did not stop pain
- Poor sleep; 1 – 2 hrs max at a time
- Pain killers
- ROM,  $\leq$  50% in neck & shoulders
- Feet & ankles very painful, difficulty load bearing, antalgic gait
- Could not garden due to neck pain; able to do only 10% of activity level previous to onset of arthritis; used to ride 750 lb motorbike – had to sell this
- LB surgery in 2004; discectomy relieved bilateral sciatic pain radiating to feet
- Arthritis was now interfering with low back exercises, therefore, recurring LBP
- Had become much less active due to pain with movement, therefore, had become much more sedentary
- Grieving loss of strength, favourite activities, sense of self
- Muscle weakness & atrophy; systemic fatigue; lack of CV fitness
- Stomach pain from taking so many meds; weight gain
- “A little old lady had moved into my body and was taking over” – I had become matronly”.

### **Jan Began AquaStretch™ Dec 6 2010 – Her Observations:**

- Felt relief of pain the first session of AS – felt better that night
- Warmth & improved ROM in lower extremities, hips, low back, shoulders and neck
- Benefits of AS were extended by learning and doing stretches and soft tissue release (STR) at home as needed
- Decreased pain meds by first week
- By 3<sup>rd</sup> week, got membership to community warm pool to be able to access warm water more frequently
- Changes in ability to move: by 3<sup>rd</sup> week noticed being able to do things better due to knowledge of body mechanics, better posture
- Knowledge of pain-tension-pain mechanics; work-pacing strategies; understanding how to self-solve tension issues has had significant benefit in quality of life
- Pool exercise has replaced the motor bike; gardening is back on track
- Pain meds now: 2 Tylenol / MONTH (500 mg each). Occasionally take 1 at night if achy, to assist sleep
- Overall feeling of well-being

- Sense of self-control re: dealing with pain and movement – pool exercise, self-directed STR techniques at home as required
- AS is more powerful than self-directed STR for relieving pain
- The warm water & AS have changed thinking, attitude & ability to manage pain
- Ai Chi is now a regular, enjoyable part of warm water exercise (also learned in this past year)
- Acknowledges movement as powerful medicine.

**Note:**

- Jan's hands are still affected by arthritis. Acupuncture gives relief from swelling, but is not slowing progress of arthritis into new joints.
- Jan's hands did not respond favorably to AS. Pain was increased; ROM decreased, so AS is not being used on her hands.
- Fortunately, Jan's feet respond very well to AS Procedures. ROM is immediately increased; spasm and pain decreased. Gait is dramatically improved by AS.

Jan is a 'super responder' to AS. She gets better results than many of my other patients. I believe this is at least partially due to the fact that her body has learned to relax and accept AS willingly. Jan has the luxury of unlimited, insurance funded access to this pool program. Therefore, she has had AS once or twice per week since December 2010. Though Jan responded instantly to AS, and continues to have excellent results, some people I have worked with are non-responders to AS, or are too sensitive to tolerate even the lightest touch.

For patients with neuropathic pain, I proceed very slowly and cautiously. In some cases, I will not touch them, but instead (for the appropriate AS procedures), have them move intuitively from AS starting positions, applying their own pressure (if possible) on their areas of tenderness. For a number of patients, this has worked well. Results are not as dramatic, but we are much less likely to flare their pain. 80 - 90% of my clients have a good-to-excellent response to AS (reduction of  $\geq 2 - 5$  points on VAS pain scale) pre / post AquaStretch™.

If you are a newly-trained facilitator, I recommend you chart specific progress with the people you AquaStretch™. The AS manual has suggested materials for data collection. You can develop your own tools, specific to the populations with which you work. Consider collecting pre / post information regarding:

- VAS – pain scale
- ROM measurements
- Pictures / videos of gait or typical movement patterns of concern to this person
- Ask about sleep following the AS session
- Monitor use of pain medications
- Ask about performance of daily activities (ADL), work and recreation

### **Other Thoughts about AS:**

The more I facilitate and teach AquaStretch™, the more I observe the differences in the characteristics of facilitators, clients, and the pools in which we work. I have relatively small hands. Large people present challenges for some grips and holds. The four-step AquaStretch™ technique stays the same: Play – Freeze – Pressure – Move, but the way I grip / hold to apply pressure has to be adapted with some large or very muscular clients. If you are not sure what I mean, try to hold onto an athlete's size 14 foot, plantarflex and invert the foot, and keep your grip while this large, powerful person moves intuitively! In clinics where there are several AquaStretch™ facilitators, I think it is ideal to assign clients to facilitators based on client body characteristics that match facilitator strengths.

The warm pool I use is nearly shoulder deep for me. This depth of water necessitates a heavy weight belt (20 lb) to keep my body anchored for AS procedures. **One Leg Standing** is very challenging, since I must follow unpredictable limb movement quickly, in shoulder-deep water! I have moved **Against the Wall** to the pool stairs. I have a small plastic step stool that gives me a height boost where needed. Even "**move if you feel the need to move**" has been adapted to, "**move how you want to, and I will follow**". The point is, no pool environment is ideal. Each AquaStretch™ facilitator will have his or her own challenges when working with clients. I believe we all have to adapt to create the best possible result for our clients, while honoring our own strengths and abilities.

AquaStretch™ sessions don't end at the pool. I always teach patients the AS four-step technique for use on their tender spots at home. We discuss how they can apply the pressure (tennis balls, their own hand, a hand from a friend...), then move until the tenderness or restriction is resolved. Jan, and many other patients have found this extremely useful. For most clients, treatment is finite. Their pain is not. It is empowering for people to learn simple ways to resolve their own pain, tension, and movement restriction.

Instructor self-care is an issue dear to my arthritic thumbs. From experience, I know that hands, shoulders, neck, low back, and feet (on abrasive surfaces) can suffer from fatigue or over-use. Ideally, you will work with someone who can AquaStretch™ you! Where needed, I modify grips and holds, and find ways of pacing my workload, while optimizing body mechanics. I don't know how many years of AquaStretch™ are left in my hands, but I intend to continue providing pain relief and improved movement as long as possible. Training new AquaStretch™ facilitators is also a passion. I look forward to meeting and working with other AquaStretch™ enthusiasts in the pool!