

A NEW HARBINGER SELF-HELP WORKBOOK

The Trigger Point Therapy Workbook

THIRD EDITION

YOUR SELF-TREATMENT GUIDE FOR PAIN RELIEF

Clair Davies, NCTMB
Amber Davies, CMTPT, LMT

Foreword by David G. Simons, MD,
coauthor of *Travell & Simons'*
Myofascial Pain and Dysfunction:
The Trigger Point Manual

The proven method for overcoming soft-tissue pain,
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**Fully Revised
& Updated**

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There are many cross references in the print edition of this workbook that are intended to help you locate the information you're looking for quickly and easily. We've included these references in the ebook edition as well. But because page numbering isn't consistent across reading devices, the cross references may not work exactly as intended. If you click on a page-number cross reference in your ebook, it will take you to the text or image that is at the *top* of page with that number in the print edition. You may need to click ahead a few screens on your device, though, to find the term or topic you're looking for.

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“I have long been a believer in and practitioner of trigger point therapy. I certainly recommend this book to the general public and health care practitioners. It is truly an excellent resource and provides the tools that induce self-healing and empowerment.”

—**Bernie S. Siegel, MD**, author of *Love, Medicine, and Miracles* and *Prescriptions for Living* and former student of Janet Travell, MD, author of *Travell and Simons’ Myofascial Pain and Dysfunction: The Trigger Point Manual*

“This is ... a well-organized, easy-to-use handbook that will indeed help sufferers of myofascial pain learn to treat themselves with effective self-massage techniques. The detail and clarity of the book’s format will also make it invaluable to pain physicians who want to be able to teach their patients useful, simple strategies to manage soft tissue pain problems.”

—**Joseph F. Audette, MD**, instructor at Harvard Medical School and director of Outpatient Pain Services at Spaulding Rehabilitation Hospital in Medford, MA

“This is a useful book for anyone in chronic pain. There are few resources like this one, which empowers the reader to understand the problem and offers the tools to manage it. The approach to managing pain described in this book will help many take control of a significant part of their health and will become a valuable lifelong reference.”

—**Scott M. Fishman, MD**, chief of the Division of Pain Medicine in the Department of Anesthesiology and Pain Medicine at the University of California, Davis and author of *The War on Pain*

“As a medical doctor who has been challenged by patients experiencing chronic pain, including those suffering from long-standing cases of fibromyalgia, I appreciate a safe solution for their problem. I believe this book, revealing that trigger point

therapy may safely relieve chronic pain, should be in the hands of every doctor.”

—**Terry Shepherd Friedmann, MD**, author of *Freedom Through Health*

“Trigger point massage therapy may be the most effective treatment known for a wide variety of pain problems, including fibromyalgia and myofascial pain syndrome.”

—**C. Norman Shealy, MD, PhD**, founding president of the American Holistic Medical Association and author of *The Illustrated Encyclopedia of Healing Remedies*

“This must-have book gives practical methods for dealing with chronic pain in a format that is easy to use, and it works! I’m a believer!”

—**Jo Ann Gillaspy, MS, RN**, editor of *The Nephrology Resource Directory*

“Properly used, the information in the Davies’s book should enable many people with myofascial trigger point disorders to participate effectively in treating their conditions. The book should be especially useful to those who do not have ready access to a practitioner familiar with the diagnosis and treatment of these common muscular problems.”

—**Michael D. Reynolds, MD**, rheumatologist

“*The Trigger Point Therapy Workbook* is a welcome and timely addition to the worlds of personal wellness, pain relief, and self-care. The author creates a highly effective form of pain therapy that anyone can learn. This book is a valuable contribution to the field of self-applied therapeutic bodywork.”

—**Robert K. King**, founder and president of the Chicago School of Massage Therapy

“I have personally benefited from the therapeutic effects of trigger point massage and I believe it deserves official recognition in the medical world. I hope physicians will study these self-treatment techniques and recommend them to their patients.”

—**Rose Marie Hackett, DO**, osteopathic physician and radiologist

“As a chiropractor for twelve years and an instructor of trigger point therapy at the Utah College of Massage Therapy for ten years, I found the Davies’ book very accurate and complete. The graphics and illustrations make it easy to show patients and clients ways to improve quality of life. I believe the book will be a valuable asset to all health care practitioners who use trigger point therapy.”

—**David B. Thomson, DC**, instructor at the Utah College of Massage Therapy

“Professional bodyworkers can use this book to sharpen their skills and to help improve the treatment of their clients. This self-treatment method will enable any motivated person to take personal responsibility for his or her own health to a whole new level.”

—**Stephen Yates, NCTMB**

“This well-written book makes it easy to locate muscles and trigger points. Massage therapists and physical therapists will appreciate the ingenious techniques the author has devised to prevent injury and discomfort to the hands while treating the source of pain.”

—**Ann Luray Hatton**, neuromuscular therapist

“Literally millions of people will be helped—and billions of dollars saved in unnecessary treatments and medications—as people and professionals finally begin to understand the role of

muscles, referred pain, and trigger points in eliminating pain. The Davies have provided an important bridge between the many helping professions that deal with people in pain and their patients.”

—**Robert Uppgaard, DDS**, author of *Taking Control of TMJ*

“Myofascial trigger points have become a primary focus for any clinician addressing musculoskeletal pain complaints. In this third edition of *The Trigger Point Therapy Workbook*, Amber Davies has compiled an excellent resource that covers theoretical concepts and practical applications in a clear and concise manner. The hallmark of any clinical treatment guide is whether or not individuals can easily access information and put it directly into practice for successful outcomes. Ms. Davies provides excellent examples and helpful illustrations woven with clinical experience that make this text a highly valuable resource. It is far from a dry academic text, but in fact is packed with useful information for any clinical practitioner or individual who wants to learn more about effectively treating myofascial pain.”

—**Whitney Lowe**, director of the Orthopedic Massage Education & Research Institute

“I recommend *The Trigger Point Therapy Workbook* to all of my clients no matter what age or background. It is a powerful tool for anyone who wants relief from muscular pain. Clair and Amber Davies have taken some very complex science and made it user-friendly. With some reading and practice, you’ll become your own best therapist.”

—**Elliott Bell**, personal trainer and coach

“In this third edition, Amber Davies has taken her father’s book, an excellent book in its own right, and done a wonderful job of improving it. She has filled in more of the science and general guidelines of trigger point treatment so that the readers have a

better understanding of their conditions. But what I particularly like is the addition of textboxes along the way that help readers to better understand the content as they go along. For anyone who wants to learn how to work on his or her own trigger points, I recommend this book highly.”

—**Joseph E. Muscolino, DC**

“Following in her father’s footsteps, Amber Davies has prepared a timely update of *The Trigger Point Therapy Workbook*. Not only does this book provide the most comprehensive review of self-treatment strategies, the author has included an excellent update of the current scientific understanding of the causes and mechanisms of trigger points, referred pain, and other important aspects of myofascial pain. Doctors, physical therapists, chiropractors, massage therapists, and other healthcare providers should recommend this book to all their patients suffering from myofascial pain. The methods described in this book can be used for acute, subacute, and chronic pain problems. *The Trigger Point Therapy Workbook* is the book I recommend to my patients!”

—**Jan Dommerholt, PT, DPT, MPS, DAAPM**, president of Bethesda Physiocare®

“Amber Davies has actually done it. She has stood on the shoulders of her father and other luminaries in the world of muscle pain and has produced a reference for the average person. ... This third edition takes on new material and brings the reader up to date with new information combined with easy-to-understand and perform treatment techniques. You will learn about things that might be causing your pain and what to do about it. This is a book I can highly endorse. I know. I keep giving mine away.”

—**Richard Finn LMT, CMTPT, MCSTT**, lead instructor and therapist at the Institute of Medical Careers, Pittsburgh, PA

“Amber has continued her father’s legacy of delivering information on trigger points in a way that the skilled practitioner and layman alike can understand and apply. This is a must-read for anyone dealing with issues of chronic pain and tension. I will continue to recommend this book to my clients and friends as an owner’s manual for rehabilitation and health maintenance.”

—**Ann E. Boone, LMT**, trigger point practitioner and instructor in Lexington, KY

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Clair Davies, NCTMB
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Figure 2.6, "A Knot of Contracted Sarcomeres," and Figure 2.10, "Integrated Hypothesis," from Simons, D.G., J. G Travell, and L. S. Simons, MYOFASCIAL PAIN AND DYSFUNCTION: THE TRIGGER POINT MANUAL. VOL 1, UPPER BODY, 2nd ed. (1999). Copyright © 1999 by Wolters Kluwer. Reprinted with permission.

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Figure 7.1, "Referred Pain Patterns from Internal Organs," adapted from Roy, S.H., S.L. Wolf, and D.A. Scalzitti, THE REHABILITATION SPECIALIST'S HANDBOOK, 4th ed. (2013). Copyright © 2013 F.A. Davis Company. Used with permission conveyed through Copyright Clearance Center, Inc.

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Summary: "This new edition of the bestselling Trigger Point Therapy Workbook outlines user-friendly and updated methods of self-massage to help relieve pain. This edition also contains new techniques, drawings, and tips to help readers find and treat trigger points"-- Provided by publisher.

Includes bibliographical references and index.

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This book is dedicated to my daughter Amber Davies. I could not have written it without her steady faith in me. Her patience, constant encouragement, tactful criticism, and undying enthusiasm for trigger point therapy continually renewed my faith in myself and in the value of this project.

Amber has been my number one disciple. As a longtime sufferer of debilitating chronic pain, she was highly motivated to test and validate every new idea regarding self-treatment. My greatest reward has been in seeing her become relatively pain free and self-reliant due to our combined efforts. Amber has gone on to become a skilled massage therapist and is now devoted to helping bring the benefits of trigger point therapy to others.

—C. D., from the second edition

Dedicated to my Pop.

—Ab

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Foreword to the Second Edition

By David G. Simons, M.D.

Clair Davies possesses a fortunate combination of attributes: he is a skilled practitioner, has good writing skills, and shows a remarkable determination to help relieve mankind of unnecessary suffering. The message of this book is a voice in a wilderness of neglect. Muscle is an orphan organ. No medical specialty claims it. As a consequence, no medical specialty is concerned with promoting funded research into the muscular causes of pain, and medical students and physical therapists rarely receive adequate primary training in how to recognize and treat myofascial trigger points. Fortunately, massage therapists, although rarely well trained medically, are trained in how to find myofascial trigger points and frequently become skilled in their treatment.

Since there is no well-established body of research on this subject, there is no well-recognized etiology. Nevertheless, a credible hypothesis based on solid scientific research is available to serve as a model for further research to clarify the nature of myofascial trigger points. Much research needs to be done on this neglected subject.

It is becoming increasingly clear that nearly all fibromyalgia patients have myofascial trigger points that are contributing significantly to their total pain problem. Some patients are diagnosed as having fibromyalgia when in fact they only have much more treatable multiple trigger points. Inactivation of the trigger points of fibromyalgia patients requires especially delicate and skilled treatment.

Skilled clinicians recognize myofascial trigger points as the most common cause of ubiquitous enigmatic musculoskeletal pain, but finding a truly skilled practitioner can be frustratingly difficult. The guidance in this book can serve practitioners who have yet to understand the nature of their own musculoskeletal pain and can also benefit patients who are unable to find a practitioner adequately skilled in this neglected subject.

There is no substitute for learning how to control your own musculoskeletal pain. Treating myofascial trigger points yourself addresses the *source* of that kind of common pain and is not just a way of temporarily relieving it.

Acknowledgments

I am deeply grateful to my late father, Clair Davies, whose original vision still shines on in this book. He poured all of himself into the first two editions, and I am honored to have the opportunity to build on that work. I am thankful, too, for the many people who supported him along the way.

I am also grateful to my husband, James, and my children, Sophia and Nora, for their love and support, and for giving me the freedom to work on this book. Thank you to Maria and Wayne, my sister and brother-in-law, for having their bright eyes on; to my brother, Clay, for cheering me on; to my gram, Ruth Smith, for listening and giving advice; and to my mother-in-law, Jeanne Melchior, for enthusiasm and child-care help. I am also grateful to my late mother, Jan Lipuma, for her love, acceptance, and gentle guidance.

Thank you to Nancy Fuller for modeling for the new illustrations; to Keen Martin for being the worker bee, the filter, and my friend; to my good friends Rebecca Elliott, Jenny Claire Hoffman, Myra Evans, Faye Houser, and many others for helping me retain my tenuous grip on sanity; and to countless clients for the encouragement and the learning experiences they brought to me. Thank you to my workshop students for helping me to grow as a therapist and teacher.

Special thanks to Judith DeLany, Jan Dommerholt, Stew Wild, Sharon Sauer, Debbie Brodzick, Bjorn and Melady Svae, Rebecca Cohen, Katherine Marmor, and Martha Graziano for offering their professional expertise and helping me to get the content right. Thanks to Bear Decatur and Julie Harper for always being available to share their insights and knowledge. Copy editor Jean Blomquist did an excellent job of gracefully correcting my mistakes and clarifying the mysteries, thank you. My sincere gratitude to Jess O'Brien, acquisitions editor at New Harbinger Publications, for his consistent encouragement, levelheadedness, and guidance. Thank you to everyone at New Harbinger who worked so hard on this project and were so patient with me.

Chapter 1

Why Try Trigger Point Therapy?

Jennifer, twenty-eight, loved to run for her health every day in the fresh morning air, but she's stopped running and hesitates to walk even a short distance because of relentless pain in her knees and heels.

Larry, fifty-two, can think of little else but the constant pain in his back. He struggles to get in and out of bed. His back hurts whether he's sitting, standing, or lying down. The pain makes him hate his job and has ruined his love life.

Melanie, thirty-six, spends her days at a computer keyboard and her nights worrying about her future because of the unremitting pain and numbness in her arms and hands. As a single mother, she has to keep working no matter what.

Jack, forty-five, has shoulder pain that wakes him up at night. He can't raise his arm to comb his hair. Reaching up to scratch his back is impossible. A sudden movement brings a jolt of pain that feels like an electric shock and doubles him over, grimacing and breathless. Is this the start of the inevitable decline into old age and disability?

Howard, twenty-three, is a gifted violin student. After years of hard work under some of the best teachers in the country, he now fears a professional career is out of reach because of constant pain and an unexplained, increasing stiffness in his fingers.

Do you know anyone like Jennifer, Larry, Melanie, Jack, or Howard? They're everywhere—on every job, in every office, in every town. The thing all these people have in common, other than chronic pain, is that they aren't getting the help they need. It's not that they haven't looked. They've gone the rounds. They've seen doctors, had tests, done physical therapy,

and filled out insurance forms or—sick at heart—have paid the exorbitant bills themselves.

They've tried chiropractic, acupuncture, magnets, pain diets, and herbal therapy. They take their pain medicine and dutifully do their stretching exercises. Sometimes they feel better for a while, but the pain always comes back. Nothing really seems to get to the bottom of the problem. They fear surgery may be the only solution, despite being told there are no guarantees of success. They're beginning to wonder if anybody really knows anything about pain.

If this describes your own situation or that of someone you care about, this book may provide the help you've been seeking. In it, I propose to give you a sensible explanation of what's wrong and to help you find the real cause of your pain. Even better, I'll show you a hands-on way to get rid of the pain yourself: No pills. No bills. No appointments.

The daily clinical experience of thousands of massage therapists, physical therapists, and physicians strongly indicates that most of our common aches and pains—and many other puzzling physical complaints—are actually caused by *trigger points*, or small contraction knots, in the muscles of the body. Pain clinic doctors skilled at detecting and treating trigger points have found that they're the primary cause of pain roughly 75 percent of the time and they play at least a part in virtually every pain problem. Even fibromyalgia, which is known to afflict millions of people, is thought in many instances to have its beginning with myofascial pain and trigger points. *Myo* means muscle and *fascia* is the connective tissue that both covers the muscle and is present within the muscle tissue. *Myofascial pain* is pain arising from trigger points in the muscles. Most people who have been diagnosed with fibromyalgia also have myofascial pain syndrome and trigger points, and in some cases have been misdiagnosed. It is not uncommon for myofascial pain to be mistaken for fibromyalgia (Simons, Travell, and Simons 1999; Gerwin 1995; Fishbain et al. 1986).

Trigger points are known to cause headaches, neck and jaw pain, low back pain, the symptoms of carpal tunnel syndrome, and many kinds of

joint pain mistakenly ascribed to arthritis, tendinitis, tendinosis, bursitis, or ligament injury. Trigger points cause problems as diverse as earaches, dizziness, nausea, heartburn, false heart pain, heart arrhythmia, tennis elbow, and genital pain. Trigger points can also cause colic in babies and bed-wetting in older children, and may be a contributing cause of scoliosis. They are a cause of sinus pain and congestion. They may play a part in chronic fatigue and lowered resistance to infection. And because trigger points can be responsible for long-term pain and disability that seem to have no means of relief, they can contribute to depression.

The problems that trigger points cause can be surprisingly easy to fix; in fact, most people can do it themselves, if they have the right information. That's good, because the time has come for ordinary people to take things into their own hands. Why? Because an appallingly high percentage of doctors and other practitioners are still pretty much out of the loop regarding trigger points, despite their having been written about in medical journals for over seventy years. Why has the medical profession not embraced the idea of trigger points? Partly because they can't be seen by MRI, X-ray, or CT scan. They can't be observed in the cadaver lab either. However, there is an even more basic reason. There are not doctors of muscle backed by large learning and research institutions doing the studies into the muscular causes of pain. You can't go to school to be a doctor of muscle. The largest organ in the body is an orphan. As physician and researcher Dr. David Simons writes in the foreword to this book, "Muscle is an orphan organ. No medical specialty claims it. As a consequence, no medical specialty is concerned with promoting funded research into the muscular causes of pain, and medical students and physical therapists rarely receive adequate primary training in how to recognize and treat myofascial trigger points."

In fact, there are many things yet to be learned about muscles, fascia, nerves, trigger points, and referred pain. But there are many things we *do* know: trigger points are real. They can be felt with the fingers. They emit distinctive electrical signals that can be measured by sensitive electronic equipment. Trigger points have been photographed in live muscle tissue with the aid of the electron microscope (Simons, Travell, and Simons 1999). Trigger points can also be seen by 2D grayscale ultrasound, vibration sonoelastography, and Doppler ultrasound (Sikdar et al. 2009). The biochemical environment of active and latent trigger points has been sampled with novel microdialysis needles. The levels of biochemicals known to be involved with pain, sensation, intracellular communication,

and inflammation have been measured to identify the characteristics of trigger points versus normal tissue. (Shah and Gilliams 2008).

Much of what is known about trigger points is very well documented in the two-volume medical text *Myofascial Pain and Dysfunction: The Trigger Point Manual* by Janet Travell, MD, and David Simons, MD. Most of the information in this foundational text is couched in difficult scientific terms, but basic trigger point science isn't hard to grasp if it's put into everyday language.

Travell and Simons describe a trigger point as simply a small contracture knot in muscle tissue. It often feels denser or tighter than the surrounding muscle tissue. Often you can feel only a taut guitar-like string in the muscle fiber harboring the trigger point. The constant tension in the fibers of the trigger point itself restricts circulation of blood in its immediate area. The resulting accumulation of the by-products of metabolism, as well as deprivation of the oxygen and nutrients needed for metabolism, can perpetuate trigger points for months or even years unless some intervention occurs. It's this self-sustaining vicious cycle that needs to be broken (Simons, Travell, and Simons 1999; McParland and Simons 2011).

The difficulty in treating trigger points is that they typically send pain to some other site. Most pain treatment is based on the assumption that the cause of pain will be found at the site of the pain. However, trigger points almost always send their pain elsewhere. This referred pain is what has always thrown everybody off. According to Travell and Simons, conventional treatments for pain so often fail because they focus on the pain itself, treating the site of the pain while overlooking and failing to treat the cause, which may be some distance away.

Even worse than routinely treating the site of the pain is the pharmaceutical treatment of the whole body for what is usually a local problem. Pain-killing drugs, the increasingly expensive treatment of choice these days, give us the illusion that something good is happening, when in reality they only mask the problem. Most common pain, like headaches, muscle aches, and joint pain, is a warning—a protective response to muscle overuse or trauma. Pain tells you that something is wrong and needs attention. It's not good medicine to kill the messenger and ignore the message. When pain is seen in its true role as the messenger and not the affliction itself, treatment can be directed to the cause of pain.

The misdiagnosis of pain is the most important issue taken up by Travell and Simons. Referred pain from trigger points mimics the

symptoms of a very long list of common maladies, but physicians rarely get any education in the pathology and dysfunction of muscle. Doctors Travell and Simons believed that most of common everyday pain is caused by myofascial trigger points and that ignorance of that basic concept could inevitably lead to false diagnoses and the ultimate failure to deal effectively with pain (Simons, Travell, and Simons 1999).

Luckily, referred pain is now known to occur in predictable patterns. The valuable medical advance made by Travell and Simons and their brilliant illustrator, Barbara Cummings, has been in delineating these very patterns. Once you know where to look, trigger points are easily located by touch and deactivated by any of several methods.

Unfortunately, the two clinically oriented methods—spray, and stretch and injection—put forth in *Myofascial Pain and Dysfunction*, do not lend themselves to self-treatment. The goal of this book is to build on the work of Travell and Simons and provide a more practical and cost-effective approach to pain therapy: a classic do-it-yourself approach rather than a reliance on multiple professional office visits. This new approach is a system of self-applied massage directed specifically at trigger points. Significant relief of symptoms often comes in just minutes. Most problems can be eliminated within three to ten days. Even long-standing chronic conditions can be cleared up in as little as six weeks. Results may be longer in coming for those who suffer from fibromyalgia, or widespread myofascial pain syndrome, but even they can experience continuing progress and can have genuine hope of significant improvement in their condition.

Trigger point massage works by accomplishing three things: it breaks into the chemical and neurological feedback loop that maintains the muscle contraction; it increases circulation that has been restricted by the contracted tissue; and it directly stretches the trigger point's knotted muscle fibers. The illustrations in this book show you how to find the trigger points that generate your specific problems as well as the exact hands-on techniques for deactivating them. Special attention has been given to designing methods of massage that do no damage to hands that may already be in trouble from overuse.

Self-applied massage has multiple added benefits. If you treat your own pain, you are in control of when, where, and how much treatment you receive. If pain awakens you at night, there you are; you might as well get to work resolving the problem. With self-applied massage, you have control over intensity of the pressure. This is especially important if you

can tolerate only a light amount of pressure. Best of all, with self-care, you can benefit from multiple daily treatments wherever you are—without appointments, expensive equipment, or time off from work.

This book is primarily designed for use as a self-instruction manual, but it can also be used as a textbook for classroom use. This simplified and direct approach to treating pain with self-applied massage can constitute a foundational course in trigger point therapy in any professional training curriculum. Students in chiropractic colleges, physical therapy departments, and massage schools will derive particular benefit. [Chapter 11](#), *Clinical Trigger Point Massage*, is designed to help the professional manual therapist adapt the book's technical content to the treatment of others. Additionally, if therapists can learn how to interpret their own referred pain and how to find and treat their own trigger points, they will know exactly what to do when they encounter similar problems in their clients or patients.

A class in self-applied trigger point massage would be a boon in medical schools for exactly the same reasons. When new doctors can learn how to fix their own pain with self-applied massage, they are in better touch with the realities of pain and with the great potential in the treatment of trigger points. Such an addition to medical education would profoundly improve the treatment of pain and significantly lower its cost.

And it's not too late for physicians already in practice to learn about trigger points and myofascial pain and to put the knowledge to good use. They will find this book to be a quick and practical introduction to the magnificent work of Travell and Simons and this neglected branch of medicine. Hopefully, many will be encouraged to go to Travell and Simons' two-volume work, *Myofascial Pain and Dysfunction: The Trigger Point Manual* (1983, 1992); *Myofascial Trigger Points: Pathophysiology and Evidence-Informed Diagnosis and Management* (2011), edited by Jan Dommerholt and Peter Huijbrecht; and *Muscle Pain: Understanding the Mechanism* (2010) and *Muscle Pain: Diagnosis and Treatment* (2010), both edited by Siegfried Mense and Robert D. Gerwin. Several journals, including the *Journal of Bodywork and Movement Therapies*, *Journal of Manual and Manipulative Therapy*, *Journal of Musculoskeletal Pain*, *Pain*, and *Archives of Physical Medicine and Rehabilitation*, publish studies concerning myofascial pain. See the Resources section at the back of this book for a list of course providers for medical and allied health professionals. A large segment of the public needs help and encouragement in learning how to deal with their trigger point-induced

pain. No one is better positioned to provide this help than members of the medical community.

The members of the medical profession are not unaware of the deficiencies of current methods of treating pain. Doctors hurt, too. Many of them worry like the rest of us about the relentless popping of pills, and many experience frustration with their inability to offer better solutions to their patients. Trigger point therapy, whether self-applied or administered by a professional, has the potential to truly revolutionize pain treatment throughout the world.

A New Day

A doctor should have written this book. It should've been written by a bona fide, credentialed expert in a white coat with years and years of experience and scores of articles published in medical journals. Instead, it took a regular working man—my father, Clair Davies—frustrated by the current medical approach to pain.

In the first two editions of *The Trigger Point Therapy Workbook*, my father told the story of how he came to be a trigger point enthusiast, massage therapist, and author. In short, he was motivated by pain. He had suffered a frozen shoulder in the mid-1990s that disabled him for eight months. It started as a slightly achy shoulder after shoveling snow. Eventually, he couldn't raise his arm above shoulder level, reach across his body to put on his seat belt, open a jar, or reach out to catch a closing door. One doctor diagnosed him with bursitis and recommended that he wear his arm in a sling for six months. As a self-employed piano rebuilder, that was not an option. A second doctor diagnosed it as adhesive capsulitis. His prescription was to put Dad under anesthetic then forcibly manipulate the shoulder to break up adhesions in the joint capsule. My father thought both ideas were nutty and opted for physical therapy. After a round of treatment that worsened his condition, he learned that the physical therapist was also suffering from a frozen shoulder. Her treatment couldn't fix her and it couldn't fix him. Nonetheless, she expected payment. Needless to say, Dad was a little irritated. Later, he tried massage therapy, where he observed the therapist using the medical textbook on trigger points to try to solve his shoulder pain. My father saw an opportunity to take control over his treatment, and leapt at it. He purchased the books by Travell and Simons and got to work.

His story is extraordinary in that he cured his own frozen shoulder with

a simple tennis ball, a Thera Cane, and Travell and Simons's two-volume *Myofascial Pain and Dysfunction: The Trigger Point Manual*. It took four weeks of diligent study and treatment for all of the trigger points to be released in the twenty-three affected muscles. After the trigger points were gone, another two weeks of stretching assigned to him by the original physical therapist restored his complete range of motion. He was astonished. He had solved his own shoulder pain!

Then he came after me. I had lived with chronic low back pain since a lifting injury during a scene change in a regional theater at age eighteen. For six years, I lived with pain. I couldn't sit for more than about an hour without having to jam my knuckles into my low back. I couldn't lift more than twenty-five pounds without paying for it for three days. I couldn't trust my back to do the normal things young people take for granted. Massage therapy and, more specifically, regular self-treatment changed all of that for me. I looked up one day after sitting making jewelry for four hours and realized that I didn't have pain anymore. When I should have been at my worst, I wasn't. My old friend, pain, had vanished; my body was restored. That old pain reappeared one more time a couple months later, and I made a classic self-treatment mistake, I smashed into the trigger points with a vengeance. Luckily, my body was able to accommodate the aggressive self-treatment with nothing more than a couple of bruises. I've had many bouts with other pain conditions through the years, and nearly everything has been resolved with self-applied trigger point massage.

My father and I both attended massage school and became massage therapists with a self-taught specialty in myofascial trigger points. After the publication of the first edition of *The Trigger Point Therapy Workbook* in 2001, we traveled throughout the United States teaching weekend continuing education seminars to massage therapists and any other health care professional who would listen. We reached several hundred therapists in those two and a half years. My father was a lone wolf in many ways and collaboration was a challenge for him. When I became ready to equal my mentor, the time came for us to break up our "Davies and daughter" enterprise and resume being daddy and daughter. I have continued the seminar business, providing workshops for professional therapists as well as regular folks in pain. You can find more information on my website at www.TriggerPointBook.com.

Many manual therapists now treat trigger points. It is not as difficult to find a capable therapist who can assist you in your quest for pain relief.

But you don't have to wait. You can begin today with self-applied massage. Start with the Pain and Other Symptoms Guides at the beginning of chapters 4 through 10. They will show you where to begin your search for trigger points that cause your pain. Many muscles and trigger points may be involved. Read [chapter 3](#), Treatment Guidelines, to better understand how to most effectively do the massage technique. I encourage you to carefully read about each muscle that may be contributing to your pain. Above all, don't be afraid to try it. Significant relief can be just around the corner.

The next chapter, All About Trigger Points, describes a little history and science of myofascial trigger points. If you need immediate help without a deeper scientific understanding, skip to [chapter 3](#), Treatment Guidelines.

Chapter 2

All About Trigger Points

In the four introductory chapters of *Myofascial Pain and Dysfunction: The Trigger Point Manual* (1999), Travell and Simons give a detailed presentation of much of what is known about the science of trigger points and referred pain. They substantiate their assertions with references to several hundred scientific articles that pertain to the subject. The personal authority of Janet Travell and David Simons is impressive in itself.

Janet G. Travell, MD (1901–1997)

Janet Travell trained as a cardiologist and pharmacologist in a time when few women were accepted into medical school. A journey with her own shoulder pain led her to explore myofascial pain treatment with her heart patients in New York City. Among those who study myofascial pain, Janet Travell is generally recognized as the leading pioneer in diagnosis and treatment. It was not a solo performance, of course. True innovation is seldom the product of a single mind. It's more often a matter of recombining bits and pieces of previous knowledge to solve a new problem. Dr. Travell read widely, looking for anything she could glean from the work of other people that might address her interests. She discovered that many researchers around the world were beginning to tentatively explore the strange phenomenon of referred pain from trigger areas in muscles. However, they all seemed to be working in isolation and largely unaware of one another's thinking. With extraordinary tenacity and persistence, she devoted herself to bringing it all together.

At the time the first volume of her book, *Myofascial Pain and Dysfunction: The Trigger Point Manual*, went to press in 1983, she had been studying and treating trigger points and referred pain for over forty years. She had already published more than forty articles about her research in medical journals, the first appearing in 1942. Her revolutionary concepts about pain have improved the lives of millions of people. The innovative clinical techniques for the treatment of myofascial pain used by physicians, physical therapists, and other health providers all over the world wouldn't have existed without Dr. Travell's dedication, energy, and intelligence.

Dr. Travell's personal success with one particular patient had a far-reaching effect on history. Not many people remember that Janet Travell was the White House physician during the Kennedy and Johnson administrations. President Kennedy honored her with that position in gratitude for her treatment of the debilitating myofascial pain and other ailments that had threatened to prematurely end his political career. It's a stunning example of how trigger point therapy can change someone's life and destiny.

Although she was in her sixties at the end of her duties at the White House, Dr. Travell had no intention of retiring or even slowing down. She went on developing and teaching her methods with vigor and enthusiasm for the next thirty years. She was past eighty when the first volume of *Myofascial Pain and Dysfunction: The Trigger Point Manual* was published and past ninety when the second volume appeared. She refused to rush into print: she wanted to get it right.

On August 1, 1997, Janet Travell died at the age of ninety-five. She's buried alongside her father, mother, and husband, John Powell, in the Albany Rural Cemetery outside Albany, New York. Her simple gravestone bears her married name, Janet Graeme Powell, with no indication of her professional name, her accomplishments, or her place in history. Perhaps her legacy is more fittingly inscribed in the minds and hearts of those to whom she brought enlightenment and respite from pain.

David G. Simons, MD (1922–2010)

David Simons lends authority to the study of myofascial pain with his long experience as a research scientist. In his early career, Dr. Simons worked as an aerospace physician, developing improved methods of measuring physiological responses to the stress of weightlessness. He was part of the team of researchers who sent animals into space in advance of sending human beings. A fascinating sidelight to his career is the world altitude record for manned balloon flight he set in 1957 as a young Air Force flight surgeon. In fact, he beat Sputnik into space. He was the first human to confirm visually that Earth is indeed round. He was featured on the cover of *Life* magazine that year and subsequently wrote a book, *Man High* (1960), about his adventure.

David Simons first met Janet Travell in 1963, while she was still White House physician. She had traveled to the School of Aerospace Medicine at Brooks Air Force Base, in San Antonio, Texas, to give a program about