

## Assessing and Correcting Poor Posture: A review of Geoff Gluckman's muscle balance and function development techniques

BY DAVID DELISLE

Recently it's become possible in B.C. to receive training in a new method of assessing and treating poor posture. To date approximately 60 B.C. RMTs have received this training from Geoff Gluckman, a health care and physical therapy educator living in San Diego, California, and a developer of the system called Muscle Balance and Function Development.

Some of you may recognize this system as similar to the one popularized in Pete Egoscues book, *The Egoscue Method of Health Through Motion*, published in 1992 by Harper Collins Publishing.

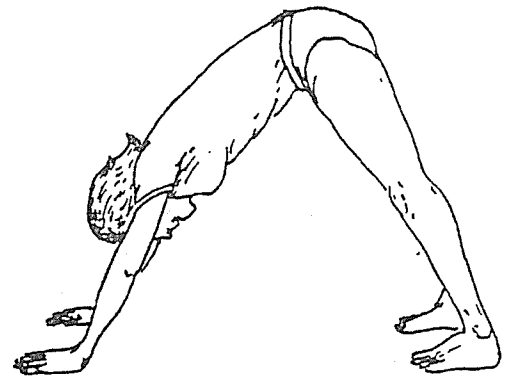


Figure 1: The exercise provides a strong posterior stretch to the lower extremities and helps create a neutral pelvis.

### Theory and Basic Principles

According to Gluckman's system you have proper posture when your body is in segmental alignment. A body is segmentally aligned when the shoulders, hips, knees and ankles are level on both sides when viewed from the front, and are directly above one another when looked at from the side. There are no twists, rotations, tilts or imbalances, and knees and feet point straight ahead.

One of the underlying principles is the need to create bilateral balance in the strength, length and neural stimulation of the postural muscles. To insure a left-right balance, bilateral rather than unilateral exercises are primarily used until stability in the area is obtained, (NB. With a bilateral exercise do both sides at the same time).

Great importance is placed on correct neural stimulation of the muscles. Neural stimulation is often over looked in other posture correcting systems. But think about it. You could have the strongest,

supplest muscles in the world and still have problems if the nervous system

proper time and in the correct amount.

All postural deviations are categorized according to which of the three anatomical planes (*frontal, sagittal and transverse*), the body has deviated from. What really makes this system different is that the exercises to correct the problem *stay in the same plane that the body deviates from*.

For example one shoulder being more anterior than another is a frontal plane deviation, (the two shoulders are no longer in the same frontal plane). Exercises to correct this deviation stay in the frontal plane and could include arm abduction and scapular adduction exercises. An example of a deviation from the sagittal plane is lateral flexion, a sagittal plane exercise is hip flexion/extension. An example of a deviation from the transverse plane is a unilaterally raised hip or shoulder, a transverse plane exercise is trunk rotation.

For more information on the background and theory behind the system

refer to Geoff Gluckman's article in the Fall 1995 B.C. *Massage Practitioner*

### What's Involved

To correct a patient's posture you first fully assess their posture, noting any deviations from the three anatomical planes as well as any muscular and structural imbalances.

Second, you consider the information obtained in the assessment and custom design an exercise program for the patient using the 50 exercises used in the program.

Third, you coach the patient through the exercise sequence. You insure they are doing it correctly and that they are actually able to do the exercises you have chosen.

Each exercise routine usually involves eight to 14 exercises. The patient should do the exercises one to two times a day, and five to seven days a week. Normally you would reassess their posture and modify the exercise program every one or two weeks.

Typically the postural changes become permanent after six to 12 weeks.

# The Exercises

Many of the exercises are modifications of yoga exercises. Some use low impact — slow speed arm, leg or trunk movements. Some of the exercises involve strengthening and stretching. Many of them involve putting the body into a segmentally aligned posture and neurally stimulating the muscles on each side of the body equally *mainly through isometric contraction*. Weights, rubber bands and other aids are not used in any of the exercises presently included in the system.

## Benefits for RMTs

In those cases where a patient gets temporary relief from your treatment but the problem keeps recurring there is often an underlying postural problem that is not being addressed. This exercise program offers a way of correcting these underlying postural problems.

The exercises are low impact and the intensity can be modified for use with people of any age or fitness level.

By combining these exercises with your regular massage practice you can help some of your patients get better sooner and stay well longer. As a bonus, Gluckman's training will improve your assessment skills and help you look at the body holistically rather than concentrating on the symptoms.

## The Courses

Course lengths vary from one to four days and vary in size from six to 30 people. Most of each course is hands on: doing the exercises; doing assessments; and creating exercise programs under Geoff's guidance.

The courses provide you with the basics and some guidance. Do not expect to find the exercise routines for your patients pre-packaged for you. Just as every patient is different, each routine will be unique.

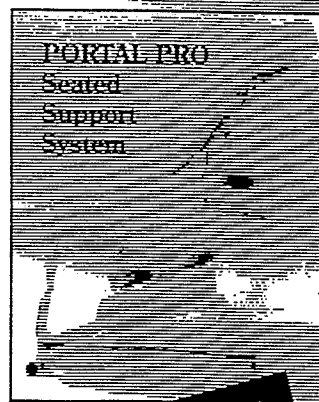
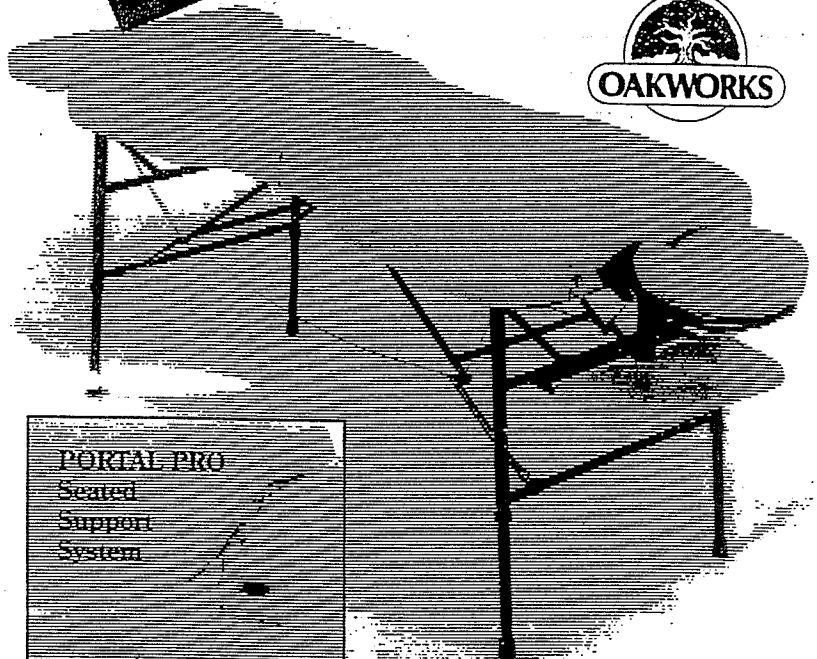
Tuition costs vary depending on the length of the course and the number of people participating.

DAVID DELISLE has his massage therapy practice in Maple Ridge.

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