TRAIL Rx
by KATRINA HAYS » photo by DAVID CLIFFORD

Here's the Rub
ASTYM HAS CHRONICALLY INJURED PATIENTS RUNNING THEIR WAY TO RECOVERY

Two summers ago, my alarm shrilled viciously early, calling me out for a long run before the day's heat intensified. I groggily swung my feet off the bed but when my right heel hit the ground, I shrieked in pain and crumpled backward, tears of rage and self-pity springing to my eyes.

It was two months before my first marathon in Portland, Oregon, and it appeared that a persistent case of plantar fasciitis (a painful inflammation of the tissue running along the sole of the foot) would spoil my plans. Discouraged, I scheduled yet another visit to the physical therapy clinic for urgent treatment.

“The fastest way to lose a runner as a patient is to tell them they can’t run,” says Chris Cooper MSPT, a physical therapist with Therapeutic Associates Incorporated (TAI) in Bend, Oregon. “To offer them a therapy where I tell them to run is a big deal.”

Augmented soft-tissue manipulation (or ASTYM, with the “Y” added for easier pronunciation: “ey-stim”) is a therapy that initiates reconstruction and regeneration of dysfunctional tissue. In simple terms, the treatment creates new healthy, functional tissue from chronically injured tissue.

OLD INJURY, NEW SOLUTION

I had taken my aching right heel through the usual round of ice, heat, ultrasound, iontophoresis (a course of treatment in which steroidal anti-inflammatory medication is applied locally and delivered to the injured area via electricity) and massage. When I limped back to the TAI office in the Athletic Club of Bend, Laura Cooper, MSPT, looked at me with consideration.

“I’d like you to try a new therapy that I’ve had good results with,” Laura said. “But you have to really participate in your recovery, OK?” She said I would have to actively stretch, and I would have to (have to!) run as part of my rehabilitation.

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Laura had heard of ASTYM from a fellow therapist. She convinced her husband Chris to join her in an ASTYM training course, and the couple immediately started using it in their practice.

“We started seeing immediate results among patients,” says Chris. “I haven’t stopped using other treatment modalities, but for treating certain injuries ASTYM blows them all out of the water.”

TOOLS OF THE TRADE

Therapists trained in ASTYM use a series of ergonomically designed plastic instruments. The therapist rubs these tools over the injury site, the surrounding muscle’s origin and insertion and, finally, the ligaments above and below the injury. The

Is ASTYM right for you?
ASTYM developer Performance Dynamics indicates that soft-tissue treatment can be particularly effective on post-surgical scarring and fibrosis, hip pain or trochanteric bursitis, plantar fasciitis, Achilles tendinitis, shin splits, patellar tendinitis, hamstring strains, iliotibial band syndrome and most other forms of chronic tendinopathies.

Visit www.astym.com and click on “Locate a Provider” to locate a certified ASTYM practitioner near you.
A therapist’s skilled hands use the tools to identify soft tissue adhesions (bumps along an otherwise smooth length of muscle or ligament), and impart a trauma that initiates breakdown of the damaged tissue.

This microtrauma stimulates a local healing response where the body resorbs the old fibrosis or scar tissue. Combined with stretching, exercise and functional activity (like running), the therapy restructures both the existing and new collagen (connective tissue) in the injured area.

“Basically, scar tissue looks like steel wool,” says Chris. “Old injuries are just a mass of disorganized tissue. Healthy tissue will lie down in tidy parallel lines. The idea with ASTYM is that you’re micro-traumatizing inappropriate tissue to set up a natural healing response to recreate smooth, healthy tissue.”

So, you’re essentially re-injuring an injury to make it better? I was doubtful about this new therapy—even more so when Laura cheerfully told me, “It’s intense!”

**ACTIVE RECOVERY REQUIRED**

“Intense” is absolutely accurate. First, Laura rubbed my lower leg—from the toes to just above the knee—with heavy cream. That was the good part. Then she picked up a plastic tool resembling a heavy handle-less spatula and ran it solidly down my outer shin. As she rubbed firmly I could hear and feel the adhesions crunching under the spatula. It was painful. OK, it was very painful.

The typical ASTYM process calls for two treatments a week for six to 12 total sessions. I was absolutely rigorous about both following the stretching protocol and only running on trails and an elliptical trainer during the treatment. After three weeks my heel felt considerably better.

“We must to do a solid job of educating the patient about the ASTYM process,” says Laura. “If the patient doesn’t do her part with stretching and strengthening, then it doesn’t work.”

“The new tissue the body lays down is only going to be as strong as the forces put on it,” explains Chris, “which is where the stretching and running come in.”

Both therapists point out that ASTYM therapy is based on proven scientific research and outcomes. Healthcare company Performance Dynamics researched and developed ASTYM. The company was founded in 1996 and grew out of a collaboration that included Dr. Thomas L. Sevier, MD, as the leading researcher and developer, and Ball Memorial Hospital in Muncie, Indiana.

“We have found ASTYM to be unbelievably effective in clearing up scar tissue and treating chronic tendinitis,” says Sevier, a former college basketball player whose patellar tendinitis frustrated him enough to begin developing ASTYM 13 years ago.

He says that Performance Dynamics’ research reports a 90-percent positive outcome with its athlete test group.

“It’s gratifying,” says Dr. Sevier, “because we get people back to their sport pretty much without recurrence.”

Gratifying was exactly my experience with the ASTYM treatment. My heel slowly continued to improve, I ran the Portland Marathon and I am still running today—with no heel pain.

**KATRINA HAYS** is a Bend, Oregon-based writer. She has written for SAIL and Scuba Diving magazines and is a regular contributor to Bend Living magazine.