

# AdvanceHealing

Autumn 2012

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# Extend your knowledge And expand your practice.

## Seminar Schedule

DATE	LOCATION	COURSE	INSTRUCTOR
11/17/2012	Toledo, OH	KT3	Mary Morrison, PT, MHS, CKTI
11/17-18/2012	Portland, OR	KT1, KT2	Jim Wallis, ATC, MS, CKTI
11/17-18/2012	Fort Worth, TX	KT1, KT2	Virginia Ellis, PTA, CKTI
11/17-18/2012	Easton, MA	KT1, KT2	Sheryl Goodridge, PT, DPT, C/NDT, CKTI
11/17-18/2012	London, ON	KT1, KT2	Roger Berton, DC, CKTI
11/17-18/2012	Lake Placid, NY	KT3 EXP	Douglas Fye, PT, DPT, OCS, CKTI
11/17-18/2012 & 2/9/2013	Fairfield, NJ	KT1, KT2, KT3	Graceann Forrester, PT, DPT, CKTI
12/1/2012	Milwaukee, WI	KT3	Rosemary Schrauth, OT, CLT, CKTI
12/1/2012	Overland Park, KS	KT3	Scott Hainz, DC, CKTI
12/1/2012	Winter Park, FL	KT3	Mike McGillicuddy, MT, CKTI
12/1-2/2012	San Jose, CA	KT3 EXP	Karen Woodbeck, MS, PT, ATC, OCS, CKTI
12/1-2/2012	Kirkland, WA	KT1, KT2	Kyle Nelson, ATC, CKTI
12/1-2/2012	Calgary, AB	KT1, KT2	Roger Berton, DC, CKTI
12/1-2/2012	Clinton, NJ	KT1, KT2	Karen Danish, PT, MS, CHS, CKTI
12/1-2/2012 & 1/19/2013	Tampa, FL	KT1, KT2, KT3	Graceann Forrester, PT, DPT, CKTI
12/7-8/2012 & 2/2/2013	Miami, FL	KT1, KT2, KT3	Stephen Boyles, DC, CKTI
12/8/2012	San Francisco, CA	KT3	Graceann Forrester, PT, DPT, CKTI
12/8/2012	Ronkonkoma, NY	KT3	Andrea Wolkenberg, PT, MA, CKTI
12/8/2012	Indianapolis, IN	KT3	Barbara Humphrey, CMT, CKTI
12/8/2012	Baltimore, MD	KT3	Pete Pfannerstill, PhD, LMT, CKTI
12/15-16/2012 & 2/23/2013	Sandy Springs, GA	KT1, KT2, KT3	Pete Pfannerstill, PhD, LMT, CKTI
1/5-6 & 4/27/2013	Astoria, NY	KT1, KT2, KT3	Andrea Wolkenberg, PT, MA, CKTI
1/12/2013	Greenville, NC	KT3	Pete Pfannerstill, PhD, LMT, CKTI

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DATE	LOCATION	COURSE	INSTRUCTOR
1/12/2013	Phoenix, AZ	KT3	Virginia Ellis, PTA, CKTI
1/12/2013	Waterloo, NY	KT3	Douglas Fye, PT, DPT, OCS, CKTI
1/19-20/2013	St. Petersburg, FL	KT1, KT2	Pete Pfannerstill, PhD, LMT, CKTI
1/26/2013	Easton, MA	KT3	Sheryl Goodridge, PT, DPT, C/NDT, CKTI
1/26-27 & 2/23/2013	Harlingen, TX	KT1, KT2, KT3	Virginia Ellis, PTA, CKTI
1/26-27 & 2/23-24/2013	Sandy Springs, GA	KT1, KT2, KT3 EXP	Pete Pfannerstill, PhD, LMT, CKTII
1/26-27 & 3/9-10/2013	Royal Oak, MI	KT1, KT2, KT3 EXP	Lori Robinson, OTR/L, CKTI
2/2/2013	Brunswick, ME	KT3	Steven Huber, PT, Orthotist, CKTI
2/9-10/2013	San Francisco, CA	KT1, KT2	Jeffrey Lease, DC, CKTI
2/9-10 & 3/16-17/2013	St. Petersburg, FL	KT1, KT2, KT3 EXP	Pete Pfannerstill, PhD, LMT, CKTI
2/23-24 & 3/23-24/2013	Somerville, NJ	KT1, KT2, KT3 EXP	Graceann Forrester, PT, DPT, CKTI
3/1-2 & 5/4/2013	Asheville, NC	KT1, KT2, KT3	Nikki Stafford, MS, OTR/L, CKTI
3/1-2 & 6/22/2013	Milwaukee, WI	KT1, KT2, KT3	Rosemary Schrauth, OT, CLT, CKTI
3/2-3/2013	Kennesaw, GA	KT1, KT2	Jimmy Welsh, PT, OCS, CKTI
3/9-10/2013	New Haven, CT	KT1, KT2	Andrea Wolkenberg, PT, MA, CKTI
3/9-10 & 4/6/2013	McLean, VA	KT1, KT2, KT3	Pete Pfannerstill, PhD, LMT, CKTI
3/15-16/2013	Paramus, NJ	KT1, KT2	Andrea Wolkenberg, PT, MA, CKTI
3/23-24/2013	Astoria, NY	KT1, KT2	Andrea Wolkenberg, PT, MA, CKTI
4/6-7 & 5/18/2013	Lebanon, NH	KT1, KT2, KT3	Graceann Forrester, PT, DPT, CKTI
4/13/2013	Grundy Center, IA	KT3	Ewa Jaraczewska, PT, CKTI
4/13-14/2013	Framingham, MA	KT1, KT2	Graceann Forrester, PT, DPT, CKTI
4/13-14/2013	Tulsa, OK	KT1, KT2	Joyce Shieldnight, MT, CKTI
4/13-14 & 6/29/2013	Jacksonville, FL	KT1, KT2, KT3	Andrea Wolkenberg, PT, MA, CKTI
4/14-15/2013	Bay Shore, NY	KT1, KT2	Andrea Wolkenberg, PT, MA, CKTI
6/8-9 & 7/19/2013	Miami, FL	KT1, KT2, KT3	Andrea Wolkenberg, PT, MA, CKTI



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# Editor's Letter



**THIS IS THE REAL NEWS: CHECK OUT DR. KASE'S COLUMN ON PAGE 29 FOR AN EXCITING DEVELOPMENT THAT HAS BEEN YEARS IN THE MAKING.**

WE ARE ALL FAMILIAR WITH THE IMPACT THE PAST FEW MONTHS AND YEARS HAVE HAD ON PUBLIC AWARENESS OF KINESIO TAPING. I CAN'T EVEN GO OUT TO EAT IN A KINESIO SHIRT WITHOUT SOMEONE EITHER SHARING A KINESIO TAPING SUCCESS STORY, OR (INCREASINGLY) ASKING ME TO TAPE THEM. IT DOESN'T ALWAYS HELP FOR ME TO EXPLAIN THAT MY DEGREE IS IN MEDIEVAL ART, SO I'VE TAKEN TO CARRYING NAMES AND NUMBERS OF SOME LOCAL CKTPS. OF COURSE FOR OUR CKTPS AND CKTIS THE IMPACT HAS BEEN BOTH GREATER AND MORE SUBTLE.

I CHECKED IN WITH CKTI TOM LECHTENBERG EARLIER IN THE YEAR AND HE SHARED HIS THOUGHTS ON KINESIO IN THE NEWS:

*"As an athletic trainer for over 10 years I have personally seen the impact that the proper use of Kinesio Taping has had in to world of sports. Quicker healing times and fewer missed days of training have equated to higher levels of competition performance by all athletes in general. It is because of these exceptional results, that I use Kinesio Tape whenever possible to help my athletes and patients to recover from their injuries quicker or to maintain their high level of performance. The exposure that Kinesio Tape has received from athletes around the world has helped to increase its use by medical professionals in many countries and solidify its place in the medical and health & wellness community worldwide."*

I COULDN'T SAY IT ANY BETTER.

CHECK HIM OUT FOR KT1 & KT2 IN IOWA THIS COMING FEBRUARY.

Until next issue,

A handwritten signature in black ink that reads "Dorothy Cole". The signature is fluid and cursive, with a long horizontal line extending from the end.

Dorothy Cole  
Editor-In-Chief



## **BASIC FACTS ON TOM LECHTENBERG, MS, ATC, LAT, CSCS, CES, USAW-L1SP, CKTI**

Tom Lechtenberg, self-made man, philanthropist, and all around good guy has graced our planet with his presence since 1978. Many people have described him as a man of the people that is loved by all, yet feared by aquatic animals. He is a 10 time thumb wrestling world champion and has been known to regularly eat his body weight in pumpkin pie. Arrogant? Hardly! Tom is simply a man flowing with confidence; a virtual legend (at least in his own mind). There is no doubt that he will one day have a bust of himself carved into Mount Rushmore for all his adoring fans to pay their respects to. Tim Tebow wears Tom Lechtenberg monogramed underpants.



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# OUR AMAZING INSTRUCTORS

**There is more to being a Certified Kinesio Taping Instructor than teaching seminars!**

CKTIs are ambassadors in a whole variety of settings. Here are just a few highlights from the many activities of our instructors.

CKTIs help explain and demonstrate at expos throughout the world. Here are just a few photographs of our experts in action.

Arnaud Cognet, Colleen Prendergast, Ludovic Delaunay and Sebastien Echinard of Kinesio France in Paris

(Sebastien is in the background Ludo taping)



Michele Terragnoli (taping) and Dario Villa (teaching) of Kinesio Italia at Exposanità Bologna



Pete Pfannerstill taped up a storm at AMTA in Florida. Attendees at all these expos were grateful to have Kinesio taping relief available for the long hours of standing and walking.

Jose Maria Gonzalez Ruiz participated in a night race in Santander, Spain, with one of his colleagues. He took advantage of his Kinesio Taping skills for his own knee.



Izhak Friedman presented to the Health Ministry of Bulgaria. The officials and physios were eager for more courses in Bulgaria.



Jimmy Welsh was asked to speak to a local Brownie Girl Scout Troop in Baton Rouge, Louisiana. Who knows how many of these young ladies may grow up to be CKTPs –

# CKTI Brings a Range of Skills to the Aid of Pro Golfers

Álvaro Zerolo Vega de Seoane has been a Certified Kinesio Taping Instructor since 2008. A physiotherapist, he is an expert in the biomechanics of the golf swing.

Álvaro graduated in Physiotherapy in 1998 at the University San Juan de Dios, then earned a masters degree in sports physiotherapy. He specializes in the world of golf, and has certified in Trigenics with Dr. Gary Oolo.

Beginning in 2002 he attended seminars in London and New York on the biomechanics of the golf swing, including studies with Dr. Robert Neal Ramsay McMaster in 2004. Álvaro was certified with theTPI (Titleist Performance Institute) in San Diego (USA) in 2004, becoming the first Spaniard to bring expertise in biomechanics (study of motion in 3D) to Spain.

In 2007 he was the first Spanish therapist hired by the European Golf Tour, where he works with the best professional golfers in the world. He travels professionally to about 17 tournaments a year. In addition to serving as the physiotherapist of the regional federation of Golf and Spanish Golf Federation, he is in demand as an author of articles on golfing and health topics.

Here are some photos of Álvaro Zerolo Vega de Seoane with a few of his clients in the world of golf.



Charl Schwartzel and Álvaro Zerolo Vega



Graeme McDowell and Álvaro Zerolo Vega



Álvaro Zerolo Vega and Luke Donald Madrid Masters



Álvaro Zerolo Vega and Zach Johnson





# CKTP PROFILE:

## KARENA WU

Karena Wu was in the advanced pre-med program at University of California Riverside when she made the switch. Basically, she says, "I smartened up and decided to enjoy my college years!" She received her BS in biology in 1995. "I boomeranged home to LA and worked front office at a PT clinic, then worked as a PT aide -- so have had experience in all the jobs in my facility."

Karena is half Japanese, half Chinese, born and raised in Beverly Hills. You could say the medical field is in her blood: "My Dad is a pharmacist, my uncle an optometrist, another uncle as well as my sister and brother-in-law are acupuncturists. Choices in life from my Japanese mother were: doctor or lawyer. So, I decided I preferred the medical field."

"My dad is a below knee amputee and a PT where I worked was his friend; she became a mentor and steered me in the PT direction." She completed her MS in PT at Columbia University and never looked back. "I fell in love with New York City after coming here during college and applied to PT schools here and LA; when I was accepted to Columbia, I high-tailed it outta LA."

Her childhood dream was to be a veterinarian. "I love animals but then I couldn't handle putting them down, if and when I would have to." Having chosen the MD path, she finally gravitated to Physical Therapy since personality-wise it was a better fit. Karena thrives on building and maintaining a rapport with patients, the hands-on component and the activity/sports component, "although, she admits, "I did not do well as a sophomore in P.E. class."

Treating patients since 2000, Karena worked in a private chiropractic practice, went on to work at the Australian

Physiotherapy Center (Maitland Manual Therapy clinic) and then at Plus One in corporate PT. "I've always worked as solo PT on site so I developed independence and honed problem solving skills immediately."

In her practice, Karena treats the whole range of musculoskeletal conditions. "We do private, concierge work for travelers in vestibular PT, including Epley maneuver, with Dr. Ronald Primas -- who developed the model of concierge medicine and who the show Royal Pains is based on. We emphasize Kinesio Taping and Maitland style joint mobs and a holistic view on treatment. We almost never start right at the complaint, but at the core and lumbo-pelvic region first. Distal joint is usually touched/addressed directly by the 2nd or 3rd manual therapy maneuver in my treatment sessions so patients are amazed that I don't touch their problem spot immediately but can still effect a change in pain/ROM/MMT. They think it is magic!"

Karena discovered Kinesio Taping in search of continuing education opportunities. She took her KT1 & KT2 in 2005 and went on to become a CKTP. She has a long list of favorite applications, including L/S herniations, spasm, hip tightness, quad facilitation, calf tightness and shoulder RC facilitation. "The Kinesio taping applications help most overall in effectiveness in ROM/MMT/pain immediately. My emphasis is on TA activation, postural correction and holistic awareness for their rehab."

She has become known for some key phrases, like "Is your core engaged?"

Another is "It's all in your best interest! I use this especially when inflicting pain in loosening tight soft tissue structures. We do a lot of trigger point release in the glutes and



it's amazing how often we're caught with an elbow in someone's behind...."

She has a passion for her work, and it shows. "I would like for people to think about how hands-on and thorough I am, from the manual therapy techniques, the Pilates exercise instruction (which is quite extensive if they are to do an exercise correctly) and the exercise technique I deliver." She is a stickler in technique. "I have a very holistic view on treatment and feel like I have gotten into a niche based practice with the Pilates-based rehab (I have no gym equipment) and the holistic, manual therapy."



Karena Wu, Jeffrey Poplarski, Dianne Garcia



Dianne Garcia

## Tunnel to Towers: Runners Get the Tape

Dr. Jeffrey Poplarski, CCSP, CKTP

The 11th annual Stephen Siller Tunnel to Towers 5K Run on Sunday September 30th was again a big success.

We had 60 assorted health care providers be part of our Sports Medicine Team with a new addition of three CKTP certified individuals. In addition to myself, physical therapists Dianne Garcia and Karena Wu lent their skills.

The Kinesio Tex Tape was certainly one of the most sought after treatment modalities at the event, as many runners flocked to those practitioners that were offering the Kinesio Taping Method!



Karena Wu



# CHILE: A SOUTHWEST ESSENTIAL

By Jack Sichler

Chile or chili? In some parts of the word they even spell it chilli. We got the lowdown from Jack Sichler of Los Lunas, New Mexico. His family has been farming the Middle Rio Grande Valley for 150 years.

First off in order for it to say it's "New Mexico" chile it has to be 100% grown here in New Mexico – that's actually the law. Then there are the names of the different levels of heat that the Capsaicin produces. The capsaicin is the active component in chile peppers that is produced in the glands and vesicles of the fruit's placenta. It is commonly classified as mild, medium, hot, extra hot and one they call XXX. The mild is always referred to as mild, the medium chile in

New Mexico is referred to as "Big Jim;" the hot is called "Sandia" and the extra hot is usually called either "Barker's" or "Española." So if you want to use the local lingo, you would walk into a farm store and say, "I want a sack of Sandia" and they would know to get you 35 lbs. of hot New Mexico chile.

Where do these names come from? Good question. They are mostly derived from the Agricultural Sciences department of New Mexico State University. They developed these chile seeds called hybrids (a combination of breeding and genetics) that we use to grow all of our chile in New Mexico today. Big Jim is called that because it is the largest of the New Mexico chile pepper varieties. Sandia gets its name from the beautiful red color that it turns in the fall (even though the English translation of sandia is: watermelon.) Barker's chile is named after one of the researchers who helped develop it. Española is named that because it was specifically designed for the northern New Mexico city of Española. They have a shorter season due to their high elevation, so this variety of chile grows faster.

Not to be confused with chile from Mexico, California or what Texas calls "chili;" New Mexico has the ideal climate for growing the above listed varieties. The only problem is the farmland along the Rio Grande is continually being developed and we are losing our space to grow this amazing crop. Drought conditions have also hurt growing as well as stressing out the chile that is being grown. This stress will actually cause the chile to get hotter. So what is considered to be Big Jim can sometimes take on the

heat characteristics of Sandia.

Preparing the chile to eat is also very traditional in New Mexico. The green chile needs to be roasted and peeled before it can be put into common New Mexico dishes like enchiladas, posole, tamales, rellenos, salsas and many many others. We love New Mexico chile on just about everything; from putting fresh roasted green chile on our hamburgers to pouring hot red chile sauce over a bowl of vanilla ice cream.

To prepare this chile it is first usually bought in a bulk order of 35 lbs. With the green chile, it is put into a large mesh barrel drum and a propane torch is put up to it as the drum is rotated. The fire roasting of the green chile, as it rotates, causes them to blister. This allows it to be much easier to remove the skins from the meat of the chile pods. After the chiles are roasted and cool off, you break off the stems, peel the skin and remove the seeds. It is now ready to eat or cook with.

Red chile preparation is a little different. You don't have to roast it but you do soak the chile pods in water after you remove the stems and seeds. Then you drain them and put them in a blender and puree it. Then strain it through a fine screen strainer or colander to separate the skin from the sauce. It then can be heated on a stove and now the sauce is ready to use.

So there you have it, some of the important points everyone needs to know about New Mexico chile. It is a staple in our food sold everywhere from McDonald's to the finest steakhouse. It has the ability to bring all kinds of



people together from various cultural backgrounds to share in different dishes that incorporate this amazing fruit. It is cheap, delicious and some would even say it's addicting.

For more information on farming traditions in New Mexico, and for recipes, go to <http://www.chilepepperinstitute.org/> or visit <http://www.sichlers.com/>

Here in New Mexico, where our hot dry summers give us multiple varieties of piquant peppers, we know a little bit about spicy foods. New Mexico State University is host to serious research at The Chile Pepper Institute (CPI) a research-based, international nonprofit organization devoted to education, research, and archiving information related to Capsicum. CPI publications note that "chile peppers originated in the lowlands of Brazil as small red, round, berry-like fruits," most likely something resembling what we now know as chile pequin. Ethnobotanists call that part of Brazil the nuclear area, and it still has the greatest number of wild species of chili peppers in the world today.

Almost every culture has recipes that use chile pepper flavorings. In Brazil they use chile and lime sauce on grilled meats. In the Middle East they make a sauce derived from Yemeni cuisine. You may spell it schug, zhug or schoog, but this pepper sauce can be a fun change.

Schug, schoog, zhug or zhuk, a Yemen paste of hot green peppers, is one of the hottest things to spice your food with. Hot peppers are very common in all Middle Eastern cuisines, eaten fresh, cooked or pickled. In most hummus places in Israel and Arab countries, hot peppers are an integral part of the course – fresh or as part of a sauce of some kind, although never as one of the hummus ingredients.

This crazy-hot pepper sauce and its phoneme-resistant name have their origins in the kitchens of Yemenite Jews.

During the 1950s in Israel, European Jews picked up on Middle Eastern culinary strategies to spice up their bland chow. On The Kichn, Roni from Chicago suggests, "Call it the era of falafelization. My late father developed a legendary appetite for this stuff as a student in Jerusalem. Decades later in the U.S. he was known to spread it on a bagel with cream cheese."

On the Nite Note blog, Val Cohen posted a good basic recipe in 2009.

Schoog

Makes about 2 cups

4 bunches cilantro

8 or more serrano chiles

8 cloves of garlic

juice of 1 lemon

2 tbsp olive oil

1/2 tsp kosher salt

pinch of ground cardamo

Coarsely chop the cilantro, peppers and garlic. Combine all the ingredients in a food processor or blender and puree. Adjust lemon, salt and chiles to taste. This is meant to be very hot — but you should still be able to taste the components. "I especially like it with grilled meats," Val concluded.

Like chile, schoog has at least three spellings -- but there is just one pronunciation. Val explained that "the ch in schoog is a voiceless velar fricative or, informally, a hard ch, like in loch, Bach or Chanukah. In other words, it sounds like K."

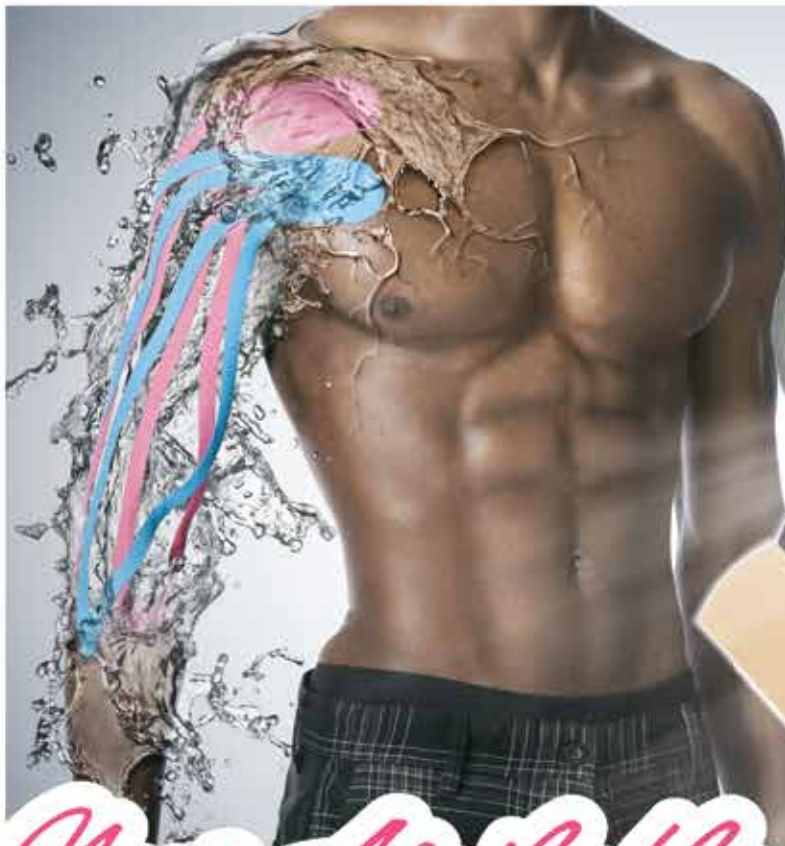
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# SUBARU-TREK RIDERS SURVIVE AND FLOURISH 2012

This spring we received some updates from Troy Lavigne, CKTP, LMT, on tour as soigneur to the Subaru-Trek Mountain Bike Team. In March they rode in round one of the UCI World Cup schedule, in South Africa. Troy told us “During the week my riders were getting some intense massage work and lots of Kinesio Taping as well as some very extensive Kinesio Taping post-race, both the men and women.”

“In this picture one of my riders was having some adductor and hamstring tension (almost crampy) as well as tightness and tension in their calves. We used lymphatic drainage pre-cuts on their quads and calves as well as 2 small ‘I’ strips for inhibition on their left hamstrings and a ‘Y’ Strip on their right inner hamstring/adductors. We also used bilateral calf inhibition techniques to calm the lower legs down.

“The athlete was experiencing some right hamstring tension as well as fascia binding and we used two ‘Y’ strips with the fascia technique to help everything here ‘unwind’ as well as two small ‘I’ strips for inhibition of the hamstrings.”

The team’s big story from the weekend was a 2nd place finish for Emily Batty. This is only her second year as an elite rider and her



first World Cup podium as an elite rider.

We caught up with him in May just after two straight weeks of furious competition.

“The team hit Nove Mesto Na Morave, Czech Republic, for round 3 of the UCI World Cups and then continued to La Bresse, France for round 4.

“In the Czech Republic not only were riders enjoying the benefits of the Kinesio Tape but staff members were starting to use it as well. One of our riders got a little too close to a tree and it clipped her left shoulder. We were using both lymphatic tape strips to reduce the swelling as well as a typical shoulder stabilization taping to reduce her discomfort during training and the race.

“One staffer was starting to have some mid back pain from driving for 12 hours straight and I was able to reduce his back pain significantly with a simple lower trap ‘Y’ Strip and two inhibition erector spinae strips. I find the ripples on the mid-back application particularly indicative of some lower trap tension. They are quite prominent.

“In La Bresse, one of my athletes took a tumble where her seat and frame smashed into her left adductors/hamstrings, creating a significant amount of bruising as well as discomfort off the bike. I chose to use lymphatic taping over the bruise to see if it created any changes, as well as use a ‘I’ strip to inhibit her adductors to reduce walking pain. The pooling from the swelling also began to create a small degree of knee pain so we stabilized the patella as well as lifted it off the knee to increase lymphatic drainage from

the area. The convolutions around the knee are very significant and obvious.

“You can see where the lymphatic tape had begun to increase the drainage from the bruised area in the last image.”

*Two members of the Subaru-Trek Team were chosen to represent their home nations in the London Olympics: Emily Batty for Canada, and Sam Schultz for the US.*

*Schultz contributed a picture blog and diary for his fans in Montana and throughout the world, finishing 15th as the Olympics drew to a close.*

*Batty, who ate, slept and breathed thoughts of the 2012 Olympic Games for years, went in initially in fine form after finishing fourth at the Val d’Isere World Cup.*

*But her Olympic medal is also still out there. A crash during training on the course in the week leading up to the women’s Olympic cross country race on Saturday almost cost her the chance to participate. She was determined to compete, even with a newly broken collarbone.*

*After all, this was the Olympics. Banged up and with two bruised shoulders, hurting ribs and cuts on her hands and legs and hips, Batty took to the Olympic start line and finished in 24th place.*

*“We worked so hard to get here,” she told the television reporters. “I didn’t want to give my dream up. I wanted to compete and do my best here. I felt strong enough. I didn’t want to let my support network down. I didn’t want to let this go.”*

*When all is said and done this constitutes the beginning, not the end, of the Olympic journey for Emily Batty of Canada and Sam Schultz of the United States.*





# FIGHT CHIRO STANDS UP FOR HER KINESIO TRAINING

**D**r. Heather Morales has become known as the "Fight Chiro" for her work with fighters at all levels. Last year she shared some of her thoughts on Kinesio Taping and the training she received through KTAI.

The Kinesio Taping Method is becoming very popular in the health and wellness industry. There are now multiple companies that try to take the idea of the tape and make a spin of it on their own. There are some companies that do this so there are no certifications, exams or seminars to take to use the product. They have "special" protocols that are the cookie cutter approach to an injury.

Well, not every patient is "cookie cutter." I have seen in my practice the same injuries day in and day out, but each patient has a unique case based on their lifestyle. With that said, if a practitioner is not certified in the taping method (you can ask to see their credentials, it's okay) I'd highly advise to go to someone who is.

Anyone can slap tape on an injury, but it takes someone who's taken the technique certification exams to thoroughly understand how to use it, and know how to apply the tape in special circumstances. If the tape is not applied correctly for the right situation, it can cause further injuries!

Dr. Heather L. Morales, D.C., M.S., CKTP

Certified MMA Conditioning Specialist

ACSM Certified Personal Trainer

<http://www.elitechiroandsportsrehab.com/>



# SEMINAR CITY



## BASIC SEMINAR INFORMATION

**Time:** Daily 7:30 am to 5:30 pm

**Who Should Attend:** PT's, OT's, ATC's, DC's, MT's, PTA's, OTA's, and other medical professionals

## SEMINAR FEES

- Fees listed in the table below are for seminars provided by KTA only
- Cancellation & Refund Policy for seminars provided by KTA only:
- Registration fee, less \$50, will be refunded if written cancellation is received 30 days prior to the seminar.
- No refunds will be given after that date. The Kinesio Taping® Association reserves the right to cancel at any time with full refund.

Last date to register is one week prior to course date.

	KT1/KT2 (2 days)	KT1/KT2/KT3 (3 days)
* Early Bird	\$499.00	\$649.00
Regular	\$549.00	\$699.00
Group 5+ Early Bird	\$449.00	\$569.00
Group 5+ Regular	\$479.00	\$599.00
** Faculty/Student	Call for pricing	

\* Early Bird register four weeks prior to first day of seminar to qualify for the discounted price.

\*\* Please call 888-320-TAPE or email [kta@kinesiotaping.com](mailto:kta@kinesiotaping.com) for information on group, faculty and student discounts.

**DECEMBER 1-2, 2012**  
**CLINTON, NJ - KT1, KT2**

**Facility:** Hunterdon Medical Center-  
Outpatient PT  
1738 Route 31 N  
Clinton, NJ 08809

**Instructor: Karen Danish PT, MS, CHS, CKTI** - Karen Danish graduated from Ithaca College (Ithaca, NY) with a Bachelor of Science degree in Physical Therapy in 1980. She received a Masters in Human Resource Administration from the University of Scranton (Scranton, PA) in 1988. Karen became a Certified Hand Therapist in 1995. She has experience in varied physical therapy settings, but has concentrated her efforts in outpatient orthopedics since 1988. Presently, she is employed at CORE Physical Therapy, a member of the Good Shepherd Rehabilitation Network. She has been a Certified Kinesio® Taping Instructor since 2000.

**DECEMBER 1-2, 2012**  
**CLINTON, NJ - KT1, KT2**

**Facility:** Laredo Specialty Hospital  
2005 Bustamante St.  
Laredo, TX 78041

**Instructor: Timothy Lee DC, CKTI** - Tim Lee, DC, CKTI Graduated Texas Chiropractic College in 1988 and was Certified as a Chiropractic Sports Practitioner in 1992. He received his Acupuncture Certification in 1997, with certifications in Active Release Technique for Upper Extremity 1998 and Active Release Technique for Spine in 2002. He became a Certified Kinesio Taping Practitioner in 2004 and a Certified Kinesio Taping Instructor in 2011. Dr. Lee is currently the Attending Clinician at Moody Health Center, Texas Chiropractic College Outpatient Clinic, Texas Chiropractic College, Pasadena, Texas.

**DECEMBER 1-2, 2012**  
**RANCHO CUCAMONGA, CA - KT1, KT2**

**Facility:** Rancho San Antonio Rehab  
7777 Milliken Ave., Suite G-30  
Rancho Cucamonga, CA 91730

**Instructor: Jeffrey Lease DC, CKTI** - Dr. Lease earned his B.Sc. from California State University Fresno, and his Doctor of Chiropractic Degree from Palmer College

of Chiropractic West. Dr. Lease pioneered InMotion Chiropractic in 2001 to serve the Bay Area with "on-site" services in the workplace. He has provided care at companies of all sizes including Cisco Systems and Apple, Inc. Dr. Lease was first introduced to the Kinesio Taping Method® as a chiropractic student in 1998 and upon his graduation from Palmer West in 2000, he became a Certified Kinesio Taping Instructor. He has taught the Kinesio Taping Method® around for more than 10 years.

**DECEMBER 7-8, 2012; FEBRUARY 2, 2013**  
**MIAMI, FL - KT1, KT2, KT3**

**Facility:** Keiser University  
2101 N.W. 117th Avenue  
Miami, FL 33172

**Instructor: Stephen Boyles DC, CKTI** - Stephen Boyles graduated from Parker College of Chiropractic in 1992. He was an Assistant Professor at Parker College for 8 years before moving to the Houston Area and establishing his facility, Community Chiropractic, in New Caney, TX. Stephen has been the Parker College Team Doctor in the Chiropractic Olympic Games since 1993. He has been teaching Kinesio® Taping seminars for the past 4 years, and has been practicing the art of Kinesio® Taping since 1999.

**DECEMBER 8, 2012**  
**BALTIMORE, MD - KT3**

**Facility:** Baltimore Veteran's Affairs  
Medical Center  
10 North Greene Street  
Baltimore, MD 21201

**Instructor: Pete Pfannerstill PhD, LMT, CKTI** - Pete has been a licensed massage therapist since 1997. His focus is in clinical sports massage therapy and soft tissue injury rehabilitation using Myofascial Therapy, Structural Integration, Neuromuscular Therapy, Kinesio® Taping and Active Isolated Stretching techniques. He is an active member in the Florida State Massage Therapy Association (FSMTA) and is nationally certified by the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB). Pete is the FSMTA State Director of Sports Massage as well as the Coordinator of the FSMTA Tampa Bay Chapter Sports Massage Team.





**DECEMBER 9, 2012**

**FT. LAUDERDALE, FL - KT3**

**Facility:**Hotel Sheraton Ft.  
Lauderdale Airport  
1825 Griffin Rd.  
Dania Beach, FL 33004

**Instructor: Mike McGillicuddy MT, CKTI** - Michael is nationally Certified in Therapeutic Massage and Bodywork and is the President of USA Pro-Sports, a continuing education company, which conducts workshops throughout the world. He graduated from the Florida School of Massage Therapy in Gainesville, Florida in 1984 and is owner and administrator of the Central Florida School of Massage Therapy in Winter Park, Florida, where he teaches and practices massage therapy. Michael designed and conducts a sports massage internship program at the University of Central Florida for graduate students of massage therapy.

**JANUARY 12, 2013**

**WATERLOO, NY - KT3**

**Facility:**Seneca Falls Community Center  
35 Water Street  
Seneca Falls, NY 13148

**Instructor: Douglas Fye PT, DPT, OCS, CKTI** - Doug graduated from Boston University, Sargent College with a Bachelor of Science degree in Physical Therapy in 1990 and received DPT degree at Massachusetts General Hospital Institute of Health Professions in 2006. He became an APTA Orthopedic Certified Specialist in 2001. Doug has worked in a variety of patient settings in California and New York. He is Director of the Physical Medicine & Rehabilitation In/Outpatient Department at St. Joseph's Hospital Health Center in Syracuse, NY. Doug is a member of the National Ski Patrol.

**JANUARY 19-20**

**VIRGINIA ELLIS PTA, CKTI**

**SAN ANTONIO, TX - KT1, KT2**

**Facility:**Baptist HealthLink  
288 Bitters Rd.  
San Antonio, TX 78216

**Instructor: Virginia "Dee" Ellis PTA, CKTI** - Dee has been a Certified Kinesio® Taping Instructor since 2005. Dee has her American Physical Therapy Association (APTA) Advanced Proficiency in the musculoskeletal

realm and was the recipient of the Texas Physical Therapy Association's (TPTA) Joy Davenport award in 2008. She graduated with her A.A.S. from Community Colleges of Southern Nevada in Las Vegas with a Gerontology Wellness Specialty, and studied at San Diego State University in California. She is an active volunteer in the APTA, the TPTA and the Aquatic Section of the APTA. She currently works PRN for local hospitals, outpatient clinics and home health agencies in South Texas.

**JANUARY 26-27, FEBRUARY 23, 2013**

**HARLINGEN, TX - KT1, KT2, KT3**

**Facility:**Total Rehab of Harlingen  
595 Sesame Dr. W  
Harlingen, TX 78550

**Instructor: Virginia Ellis PTA, CKTI** - [See instructor bio in San Antonio listing above]

**FEBRUARY 2, 2013**

**BRUNSWICK, ME - KT3**

**Facility:**Coastal Orthopedics  
6 Gurnett Road  
Brunswick, ME 04011

**Instructor: Steven Huber PT, Orthotist, CKTI** - Steven graduated from Temple University's Physical Therapy Program and completed his orthotic training at Northwestern University Medical School Prosthetic Orthotic Center. In his 30 plus year career, he has worked at the Rehabilitation Institute of Chicago, Central Maine Medical Center, and, before entering private practice, worked in Saudi Arabia. Mr. Huber has developed and published Stroke Rehabilitation techniques and presented many seminars on Facilitation/Inhibition and Casting. Steven's practice, Huber Associates, PA, is a private physical therapy and orthotic facility located in Auburn, Maine.

**FEBRUARY 2-3, 2013**

**LAMONI, IA - KT1, KT2**

**Facility:**Graceland University  
1 University Place  
Lamoni, IA 50140

**Instructor: Tom Lechtenberg MS, ATC, LAT, CSCS, CES, USAW-L1SP, CKTI** - Tom earned his Bachelor's degree in Secondary Education from Kansas State University in 2001 and his Master's degree in Sports Administration from the University of New Mexico in 2003. Tom is the Head Athletic Trainer for the UFL Omaha Nighthawks of the United Football League. He has worked

with a wide variety of people ranging from high school and middle school students and recreational athletes, to Olympic, NFL, and Division I college athletes.

**FEBRUARY 9-10, 2013**

**ALBUQUERQUE, NM - KT1, KT2**

**Facility:**NM Orthopaedics: NE Heights PT  
8220 Louisiana Blvd. NE Suite D  
Albuquerque, NM 87113

**Instructor: David Garcia PT, CKTI** - David earned his physical therapy degree from the University of New Mexico in 2000 and is working on his doctorate from the University of St. Augustine. David has been active in Kinesio taping research since his days as a PT student with Dr. Heather Murray, PhD, PT, formerly of the UNM School of Medicine. He has been utilizing Kinesio® Taping since 1997 and became a Certified Kinesio® Taping Instructor in March of 2003. He has provided Kinesio® Taping for the PGA, Duke City Marathon, Race for the Cure and other events.

**FEBRUARY 9-10, 2013**

**SAN FRANCISCO, CA - KT1, KT2**

**Facility:**Presidio Sport & Medicine  
1162 B Gorgas Ave.  
San Francisco, CA 94129

**Instructor: Jeffrey Lease DC, CKTI** - [See instructor bio in Rancho Cucamonga listing above]

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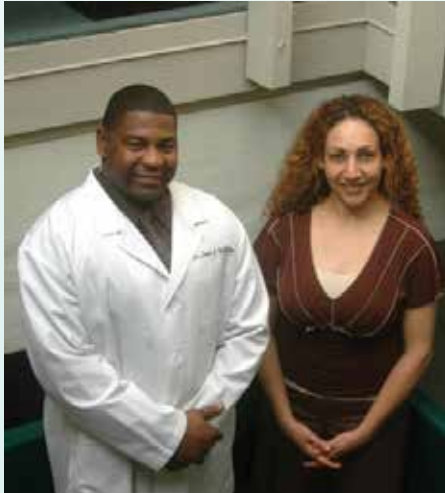
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# CKTP Helps Keep Zumba Conventioneers in Motion



Thursday August 9 through Sunday, August 12 saw the gathering of Zumba instructors from all over the world in Orlando, Florida for the only official Zumba convention in the United States. Kinesio was well

represented by Maggie Pezeshkian, DC, CKTP, who traveled from California to help the convention participants with their aches and strains.

Dr. Maggie is a Zumba instructor herself, so she knows what these energetic individuals go through on a daily basis. "I know that Zumba instructors suffer from repetitive injuries as does the program's creator, Beto Perez," Dr. Maggie reports. How was the Kinesio taping received? "Boy, did they need it!"

Licensed Chiropractors since 2004, Dr. Maggie Pezeshkian and Dr. John McHaney are committed to promoting the health and wellbeing

of their patients. They take a "whole person approach" when taking care of their patients. By combining the very best hands-on-technique, state of the art physiotherapy procedures, rehabilitation, and providing the newest and best natural vitamins and mineral supplements on the market today, they help patients to accelerate or maintain your journey to good health.

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Photo by Saloni Prachande



Australia's Debby Hodgkinson

# HONG KONG PHYSIOS TREAT RUGBY CIRCUIT

Phil Gillies and Alvin Chung are physiotherapists with Byrne, Hickman & Partners, Hong Kong.

Byrne, Hickman & Partners have been providing physiotherapy services for the Hong Kong Sevens since 1982. As the game has increased in popularity, more and more teams provide their own medical support however not everyone, especially the smaller teams, have a full-time physiotherapist. Even teams who do have a full time physio will often bring their players in for strapping and treatment.

Phil Gillies graduated from Sheffield Hallam University in 2010 with Bsc. (Hons) in Physiotherapy. He had completed KT1 & KT2 in the UK before moving to Hong Kong in early June, 2011.

Phil notes, "I use Kinesio Tape extensively with my sports injury patients, but have also found the tape helpful for swelling/oedema in other patients and also in aiding postural re-education for the hundreds of office workers we get through our doors here in the Central-Business-District of Hong Kong."

In addition to the Hong Kong Sevens, he has served as a physio for a number of sporting events and teams this year, including: Monsoon Touch Football Club, Singapore, at the Hong Kong International Touch Championships; DeA Tigers RFC CL1 & CL3 teams; and Hong Kong Polytechnic University Men's and Women's teams.

Phil worked the Hong Kong Sevens alongside his colleague Alvin Chung, DPT, CKTP.

Alvin received his doctorate in physical therapy in 2002 in Widener, Pennsylvania, and completed his CKTP certification in 2003. He has been a volunteer physiotherapist for the USA Paralympics Team training camp, Athens 2004. He has worked with numerous sports teams in the USA and Hong Kong, and as a volunteer physiotherapist for Team USA Martial Arts Team, Beijing Olympics 2008. Alvin uses Kinesio Tape extensively with the Taekwondo team. He is a judge for the USKSF (The United States Kuo Shu Federation.) This is where he does most of his Kinesio Taping.

The nature of the game and the hectic touring schedule means that players are often carrying niggles and old injuries, and there are always new injuries every day. In recent years, the number of players using Kinesio tape has increased substantially.

"We have had a number of players this year that really benefited from Kinesio taping," Phil reports. "It really can make all the difference out there on the pitch. One player came in with a supraspinatus strain and some sub-acromial impingement. We treated him, taped him up with Kinesio, and he made the match-saving tackle with that shoulder in his next match! He came back in afterwards all smiles and thanking us, amazed how much difference the tape had made. That's what it's all about. Getting these guys out there winning matches."





# RUGBY SEVENS

Rugby Sevens is one of the most exciting and action-packed sports in the world. Huge crowds gather to watch the HSBC Sevens World Series, held in nine countries across the world. Beginning in 2016 Rugby Sevens will be included in the Olympics as well.

The biggest and most famous event on the World Sevens circuit is the Hong Kong Sevens. The International Rugby Board (IRB) is increasing the number of teams on the full-time circuit from 12 to fifteen in 2013, and this year's Hong Kong Sevens was a qualifying event.

Phil Gillies shared some Kinesio Taping applications and techniques that he and Alvin utilized at the 2012 Hong Kong Sevens.

## 1. Achilles Tendonitis

"This application was used especially with the referees!" he points out, "and often used in combination taping. We used basic taping application for Achilles tendonitis."

- Measured strip on Kinesio from metatarsal heads to just above the musculo-tendinous junction of the gastroc/achilles.
- Distal end of tape cut in to 5 strip fan from the metatarsal heads to the base of the calcaneus.

- No tension applied to base at the heel
- 50/75% tension applied over the achilles with the foot in dorsiflexion
- tail with no tension
- 5 fan strips applied with 50/75% of tension until final 1/4, then tension gradually reduced down to no tension for anchors
- Support anchor wrapped around metatarsal heads with paper off tension.
- Basic taping O-I of gastrocnemius with paper-off-25% tension
- Foot then placed in to 5 degrees of plantar flexion- figure of eight applied using 2.5cm leukolite, starting at the same height on the tibia as the gastrocnemius tape finishes. The Leukolite crosses the achilles tendon at the point of greatest tension/ tenderness.
- Anchored proximally, and then distally around the heel using 2.5cm rigid strapping, or if more movement is required, anchored with kinesio taping with paper-off tension.

## 2. Application for Hamstring tightness

"We used this on Debby Hodgkinson from the Australian Women's Sevens Team. She was complaining of

chronically tight hamstrings that felt like they over-stretched occasionally and caused more pain as the tournament continued."

- 2 Kinesio I-strips measured from the eyes of the knee to the ischial tuberosity.
- Apply distal tail of first I strip to the medial antero-lateral border of the knee
- Stretch the hamstrings with the patient in supine, flexing the hip to End of range and then extending the knee.
- Apply the kinesio I Strip with 25% tension following the course of semi-mem/tendinosis up to the ischial tuberosity.
- Apply proximal tail with no tension
- Repeat for lateral hamstring.

Phil adds, "We used 2 x I-strips instead of 1 x Y-strip due to the more developed physique and cross-sectional area of the player's legs and to allow for increased proprioception when running/sprinting."

## 3. Taping applications for sub-acromial impingement/supraspinatus strain.

"I used these taping techniques with Guyana star player Claudius Butts," Phil explains. "He came in

*Top Photo: India's players love Kinesio Taping.*



Photos by Saloni Prachande

to the physio room complaining of shoulder pain after tackling a player in his previous match on day 1 of the 7s. On assessment he was found to have a subacromial impingement, with swelling and tenderness of his supraspinatus and associated tendon. We managed the acute swelling and pain with ultrasound and ice and then applied Kinesio tape."

- Basic taping application for supraspinatus I-O
- Y-strip base just below greater tuberosity of humerus and tender tendon.
- Shoulder moved in to Adduction and internal rotation behind his back
- Tails laid down with a little more than paper-off tension (approx 20%)
- One tail above spinous process of right scapula
- One tail along spinous process
- Deltoid taping I-O using 2 x 1 strips due to the increased size of shoulder muscles
- I-strip started just below deltoid tuberosity
- Shoulder placed in to scarf test position and tape laid down along border of posterior deltoid with 20% tension

- Moved back to neutral and tail applied with no tension
- Shoulder then placed in to abduction and external rotation, we did this PASSIVELY with another physio facilitating the movement to the point of pain, as we could move him further passively than him actively moving
- Anterior tail then laid down starting at same position as posterior tail and surrounding the border of the anterior deltoid.
- Final I-strip laid down to help facilitate opening up of subacromial space.
- Patient placed in to shoulder protraction and depression
- Base of I-strip placed between inferior medial border of scapula and spine with no tension
- Tape applied superiorly over upper trapezius to just posterior to the mid 1/3 of the clavicle with 50-75% tension.

"For the games we strapped the player's shoulder with EAB to limit his painful range of external rotation with abduction. After all of his games on day 1, we used 2x Kinesio fan-cut strips with the bases at the shoulder by the Axilla, and the strips laid over the shoulder with oscillating 0-20% tension. The next day

we repeated the treatment as of the previous day. This allowed Claudius to play for the rest of the tournament."







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**KEYNOTE SPEAKER**

**DR. KENZO KASE**

FOUNDER/INVENTOR  
KINESIO TAPING® METHOD

# CASE REPORT: LYMPHATIC AND BLOOD FLOW EFFECTS OF KINESIO TAPING®

Sakina Morbiwala, PT, MSc, CKTP

February 27, 2010

**Subject:** Mrs. M is a pleasant 88-year-old female residing independently in senior apartments, and an active member of the community. She was ambulating without any device and was independent and driving until 12/31/09.

**Diagnosis:** On 12/31/09, she went shopping. She encountered a snow bank where she was reloading her groceries. She attempted to move the car by opening the car door leaving her left foot outside of the car and pressing on the accelerator with her right foot. However, she pressed too hard on the accelerator causing the door to slam on her extended left leg. She sustained a crush injury to her left calf muscle.

She was taken to the Emergency Dept. via ambulance where significant swelling of her left calf muscle was noted. Measurement of left calf circumference was 37.5 cm versus 31.5 cm on the (uninjured) right calf. Mrs. M had significant ecchymosis, both anterior to the tibia and in the calf.

The skin of the calf and inner thigh was starting to blister and she was admitted for a possible developing compartment syndrome and /or rhabdomyolysis and/or soft tissue sloughing due to the swelling.

**Past Medical History:** Remarkable for hypertension, hyperlipidemia L breast Ca s/p mastectomy, osteoporosis allergic rhinitis, hysterectomy, atrial fibrillation on Coumadin therapy.

**Diagnostic Test & Intervention:** L leg tibia/fibula and L knee films were obtained which showed no acute fracture or bony injury. A creatinine kinase was obtained which was elevated in approximately the 500 range. Cold moist wraps were applied pulse-2+in the posterior tibial and dorsalis pedis area. Coumadin was discontinued and INR was monitored. There were no signs or symptoms of compartment syndrome. Weight bearing as tolerated was suggested by orthopedic surgeon.

By 1/4/10, the blistering receded significantly and Mrs. M was restarted on Coumadin and sent to sub-acute rehab at our center which happened to be adjacent to her apartments. I had the opportunity to evaluate her on her day of admission on 1/4/10, four days after injury.

PT evaluation revealed a pleasant female, alert and oriented x3 with pain in L lower extremity accompanied by pulling sensation. Pain rated at 5/10 on a score of 0-10. Mrs. M also reported a pulling sensation which was uncomfortable and a catching sensation on flexion and extension of L hip and knee in supine and enhancement of pain on standing and walking. Range of Motion was actively limited in L ankle and hip and manual muscle testing demonstrated weakness of L lower extremity (2+ to 3++). Standing balance was F/F- (static v/s dynamic) and Mrs. M was unable to adopt tandem stance or single leg stance.

Extensive ecchymosis noted on medial and lateral thigh and leg area. Ambulation required stand by assist with rolling walker, tolerated up to 150 feet and slightly guarded gait pattern with decreased cadence.

After obtaining Mrs. M's consent, I decided to use my knowledge of Kinesio Taping to improve lymphatic and blood flow, to decrease edema, ecchymosis and pain, and thus improve functional mobility.

On 1/6/10 (six days post injury) I used the fan cut taping technique with 10-25% tension over the inner and outer thigh and leg and calf area with the base at the inguinal and popliteal lymph nodes (see pictures 1-4)

Mrs. M was concurrently receiving physical therapy including ice packs to L lower extremity, AROM and strengthening exercises utilizing NuStep x10 minutes, balance and neuromuscular reeducation and gait training with rolling walker. Pain was still at 3-4/10 in left lower extremity.

On 1/8/10 (eight days post injury) I removed the tape on L lateral thigh (see picture 5) and on 1/11/10 I took taping off from medial thigh and leg (see pictures 6 & 7). Considerable resolution of hematoma was noted. So I decided to retape the ecchymotic areas on L lat thigh, leg and calf (see pictures 8-11).

The blister on the thigh and posterior calf were dry and healed and by now measurement of calf girth was 34 cm on left side. Mrs. M had no complaint of pain in L lower extremity. Physical therapy was ongoing and Berg Balance Assessment score was 47/56. Distance of ambulation increased to 400 ft with RW.

Kinesio Tape was removed on 1/18/10 (18 days post injury) with significant reduction in ecchymosis (see picture 12-15). The fan



tape was reapplied to address the minimal ecchymosis on L lateral thigh and leg (see pictures 16 & 17).

On 1/19/10 calf girth was 33.5 cm on L v/s 31.5 cm on right. No complaint of pain reported. However slight variation in blood pressure, due to medication changes, was observed and PT/INR was being closely monitored by MD. At the family care conference Mrs. M and her daughter were pleased with her progress and the daughter stated that the doctor had predicted 6 months for Mrs. M to heal completely.



**1-4**

6/1/10

6 days post injury



**5**

8/1/10

8 days post injury



**6-7**

11/1/10

11 days post injury



**8-11**

18/1/10

18 days post injury



On 1/22/10 the taping on lateral thigh and leg was removed and pictures were taken (18-22) which show almost normal skin color and integrity. Edema of L calf was unchanged from last measurement. Mrs. M reported no pain at rest, on exercises of L lower extremity, standing or ambulation. I recommended use of straight cane and provided a home exercise program. Berg Balance Test score remained the same, partly due to medication changes and variations in blood pressure. Mrs. M returned home on 1/25/10.

Conclusion: Kinesio Tex Gold worked as a miracle tape. The lymphatic correction was used to assist in the removal of edema by directing fluid towards a less congested lymphatic pathway and lymph node. This was accomplished by the lifting effect and elasticity of the tape. The space between the skin and muscle is often reduced as a result of the congestion of the flow of lymphatic fluid and blood. This congestion increases the activity of the pain receptors located in the dermis. Kinesio Taping increases the space between the skin and muscles to promote the flow of lymphatic fluid and blood.

The results of this case strongly recommend Kinesio Taping as an effective method for resolution of hematoma resulting from acute soft tissue injury as it helps to expedite healing and overall functional recovery in people of all ages.



**12-15**  
18/1/10  
18 days post injury



**16-17**  
1/22/1  
22 days post injury



**18-22**  
1/22/1  
22 days post injury



# International Kinesio Taping Symposium 2012, Düsseldorf:

## NOTES FROM AN ATTENDEE

By Seppo Appelqvist, PT

The International Kinesio Taping Symposium in Germany provided one attendee with a good reason to combine business and leisure. Seppo Appelqvist, from Finland, was able not only to build on his Kinesio taping knowledge and contacts, but had a chance to watch Finnish football star Teemu Pukki playing in the Fortuna Düsseldorf-Schalke match. "You couldn't take for granted getting tickets for the match," Seppo tells us, "since the home team supporters rumbled after the last game of the season so much that they got a penalty, this time the home team got permission to sell at the most 25,000 tickets instead of 54,000 for the first two matches of this season."

It took a lot of Finnish stubbornness, but a the ticket was found. "It was an excellent match, ending 2-2," Seppo adds. He's got his eye out for more courses in Germany!

After a poor night's sleep it was time to head for the university and locate the correct room number. After getting lost at first this was found with the help of a Scottish participant and his GPS. The auditorium was filled, with more than 100 pairs of eyes from 23 different countries eager to update their knowhow about Kinesio Taping.

After the introduction, the first research presentation was by the Serbian (CKTI Dragan Dimitrijevic). He summarized "Thermography monitoring of Kinesio Taping Therapy - 3 Case Studies" (Nikolovski, Dimitrijevic, Stević). With Kinesio Tape the temperature -- e.g. in the area of chin (case 1) -- increased 2.4 degrees in 5 minutes. It was interesting to observe the increase in temperature, as shown by the infrared readings, also in surrounding area (for example in the sternum area) though the tape was set in the shoulder. As a conclusion, Kinesio Taping increases circulation and increases surface temperature. A critic asks, is this specific to Kinesio Taping or could any garment or covering do the same?



Second, a Spanish researcher presented a review of literature, "Kinesio Taping through Bibliometric Indicators" (CKTI Francisco Garcia-Muro San José). In the review 237 documents were analyzed. Studies were reported to be difficult to find and even 41.4 % is not written in English. Studies have been published in 13 languages in 139 journals. Results of Kinesio Taping reported in the literature have been generally good.

Next was a case study on Kinesio Taping related to ACL surgery: "Kinesio Taping after Anterior Cruciate Ligament Surgery, the Acute Phase" (CKTI Jose Maria Gonzalez Ruiz). In this repeated surgery, Kinesio Taping was used 20 days together with mobilization and exercise. The knee extension was full, so flexion motion and swelling was under interest. Knee flexion increased over 30 degrees in 20 days, knee was pain free and there was no sign of inflammation. A case study is not always a big deal in research circles, but this kind of case study can bring information and motivate somebody to carry out a larger study to meet the criteria of high quality research. Personally I'll remember this presentation best from the speaker's habit to mobilize soft tissue with the Kinesio Tape on. This was said to work well in controlling swelling.



Other workshops and demonstrations included Kinesio Taping for Beginners with CKTI Graceann Forrester and basic Kinesio taping Concepts with CKTI Jim Wallis.

Kinesio Taping was approached through the scientific challenge also from Egypt, in the topic "Kinesio Arm Taping as Prophylaxis Against the Development of Erb's Engram" (Ahmed, ElNegmy, Salem, Sherief) presented by Radwa Ahmed, PT, of Cairo University. A physiotherapy group (n=15) was compared with patients treated by both physiotherapy and Kinesio Taping. EMG and functional tests were used in evaluation. As a result of taping the shoulder and the forearm, the results were clearly better in the additional Kinesio Taping group compared to physiotherapy group.

Japanese view to brain EEG wave activity as a result of different stimulus, "EEG and Kinesio Taping" (Kimiko Kawano, PhD) was an interesting presentation. Experiments showed how Kinesio Taping of the calf activated the beta waves, which are dominant in activity. On the other hand, the same happened when calculating and hitting with a hammer as well. The lunch time was coming closer, so I started to wait for the conclusion (and lunch). After one hour I heard the conclusion: "I have no conclusion." But I got lunch, and possibly increased beta activity.

"Pain management after thoracic surgery using Kinesio Taping" (Jutta Draganow, MD, Hans-Michael Klein, MD) presented by a professor at the university in Düsseldorf was a thorough theme for the very informative background. There is a big risk of postoperative pain after lateral thoracotomy. Twenty to sixty percent of patients experience pain and almost 50% of these suffer from moderate or severe pain. Pain can be neurogenic or myofascial and also the control of pain must be diverse. One of these methods to control pain is Kinesio Taping.

The subject "Kinesio Tape: An Alternative and/or Complementary Treatment for Pain due to Sternotomy after Cardiac Surgery?" (Scalbrino, Clerici, Colombo, Frassine) was presented by CKTI Stefano Frassine and researcher Claudia Clerici and followed up on the previous theme. Pain reduction was clearly greater in the Kinesio Taping group. As a conclusion, Kinesio Taping was found to be a statistically effective way to reduce pain after cardiac surgery. Thus it enables reduction in use of pain killers.

In three live cases Kenzo Kase treated an amputee patient, ankle sprain and a stroke patient. It was interesting to notice the sensitivity to touch in the amputated stump. Touch felt painful with only 3-5g pressure, when pressure with bigger force didn't cause pain. Dr. Kase treated the stump with fan strip containing 16 thin strips and the touch was less painful after taping.

After coffee break I attended the workshop on "Balloon Theory of the Body." That reminded me of some things that make a difference between sports taping and Kinesio Taping. In demonstration the scar in the stomach affected the range of extension motion of the cervical spine, raised ribs to the straight

leg raise (SLR) test and the raised stomach to forward flexion test. This was an important point among other important points. That was roughly what happened in the first day.

The second day started with a shorter hiking tour in the campus area than in the previous day. Hamstring surgery and chronically tight Hamstrings made the first presentation "Kinesio Tape & Hamstrings" (Stephan Mogel, PT) my personal favorite of the symposium. In this subject 107 healthy, athletic participants were divided into three groups. Measured were mobility of the knee flexion, hip flexion, bend forward and the isometric strength of hip extensors. As a result of taping, the biggest change was found in the mobility of hip extension. Knee flexion was also significantly increased as well as strength in hip extension.

Effect of Kinesio Taping in Facial Palsy was introduced with two patients in the topic "Facial Palsy (Bell's palsy)" (Jacek Sasinowski, CKTP). The pictures taken before and after taping, showed a big difference. Practical experience of the Polish presenter shows encouraging results to utilize Kinesio Taping in cases of facial palsy.

For a person (me) who doesn't know anything about neurological physiotherapy, the subject "The Acute Effect of Kinesio Taping Method for Drooling in Children with Cerebral Palsy" (Zenginler, Tarakci, E, Tarakci, D, Irmak) presented by Yonca Zenginler, PT, had me thinking about the upcoming coffee break. But for those who are working in the neurological area, this subject is important. With the Kinesio Tape around the mouth and under the chin, the severity of drooling decreased from 3.72 to 2.20 and frequency 2.94 to 1.92. In addition there was a significant difference in the larynx elevation. Satisfaction was found in 19 of 25.





A series of three presentations concerning low back problems began with "Postural Balance in Low Back Pain: Comparison Between Back School and Kinesio Taping Method" (Stefano Frassine and Silvia Tognolina). In this 30 patients suffering from low back pain were divided into three groups. Group A received manual therapy and attended back school. Group B was treated by Kinesio Taping. Group C both. Measurements were carried out with VAS, isokinetic strength test and questionnaire. Generally best results were achieved in the group C.

This back theme continued with the subject "Back Stability, Gait and Kinesio Taping (A preliminary study): Kinesio Taping of the Thoraco Lumbar Fascia can help." (CKTI Itzhak Friedman). The Israeli presenter highlighted the role of thoracolumbar fascia (TLF) for example in a force transfer and maintaining posture. Eleven healthy participants took part in this study. Their stride length in walking was measured before and after Kinesio Taping.

The study "Effectiveness of Different Treatment Approaches on Pain, Functional Scale and Strength in Patients with Lumbar Pathologies without Neurological Deficits" (Baltacı, Senbursa) presented by CKTI Gül Baltacı, looked into the effect of different physiotherapy methods in the treatment of lumbar problems.

Turkish researchers concluded the regular Swissball exercise programme is effective to decrease pain, increase strength and function. The fastest reduction in pain was found in Kinesio Taping after immediate application.

Dr. Kenzo Kase spoke over an hour about "The Autonomic Nervous System Relating to the Kinesio Taping Method." Dr. Kase stressed the significance of stem cells in the healing process of soft tissue injury, and effect of Kinesio Taping on that. He emphasized the meaning of negative pressure to create space between the skin layers and to mobilize and repair mucosa as well as cooling down the temperature. Kase reminded us that Kinesio Tape is the only treatment method which with minimal stimulation works for several days. In the future there will probably be new screening tests for autonomic nervous system.

There was also room for a study related to animals, when Italian representative CKTI Sybille Molle, DVM, summarized the study "Use of Kinesio Taping for the Treatment of Sacroiliac Joint Dysfunction in the Horse: 7 Cases" (Molle, Duggeri, D'Onofrio). Seven horses with diagnoses of SI-joint dysfunction were taped. They were already medically treated in the past, which gave a good baseline in investigating the potential help of Kinesio Taping. The horses received Kinesio Taping for three weeks. Pressure measurements and walking analysis were made before the first visit, at week 1 and 5 after third treatment. As a result, pain decreased, stride length in walking increased and velocity increased. In addition the riders reported the horses were more elastic and willing to go.

An "ask the expert" panel was an interesting part where participants could ask anything about Kinesio Taping. How can you know the right amount of stretching? Suitability for the Parkinson patient? Pain control in the terminal stage? Itching? Usage for a child suffering from muscular dystrophy? Meaning of colors? How to make a Kinesio Taping study? Why Kinesio Taping was missing in Kinesiology education?

Dr. Kase explained why Kinesio Tex Tape is the best. Tape could be made in a cheaper way, he noted, but our tape contains good elastic fibers and there is something specific in the glue. There was also an answer for the origin of colors. One young patient said to Dr. Kase: "Doctor, this beige looks sick!" After that the production of blue and red tape started. Later on an athlete said "I don't want colors, I want black so my muscles look stronger." So started the production of black. Two other experts mentioned they let the patient choose the color, not because they would work in a different way, but because some colors may bring pleasure to the patient and the treatment may thus work better.

My workshop topic on the second day was sports. The workshop was built around cycling, where biomechanics was explained as a source of overuse injury. Also taping techniques were demonstrated. I was surprised to hear that although the major types of cycling injuries are overuse, traumas caused by falling make almost as big a part of the total number of injuries. In the demonstration the Quadriceps was taped and in this taping technique, like in other muscle taping cases, the direction of taping did matter. This origin-insertion idea is an important part of the taping method.

An intensive two days passed fast. Results of Kinesio Taping in the studies were good in extensive use range, but many studies had quite a small number of participants. A couple of presenters also brought this out, but the host reminded also from the purpose of the symposium, which is not only introducing high quality studies, but also encouraging to make a study, sharing up to date knowhow and giving participants the opportunity to meet other colleagues around the world who are working with Kinesio Taping. With these goals the 2012 Symposium succeeded well.





DR. KENZO KASE



Gustavo Mendoza

# GLOBAL MISSION

This fall, Dr. Kenzo Kase has been on his usual globe-trotting schedule, shuttling between Japan and the United States with stops in Germany, Austria, Costa Rica, Mexico and Hawaii.

These pictures from the KTAI Research Symposium need no additional introduction!



Kauai Beach Resort

Dr. Kase was an expert speaker at the 2012 ChiroPlan Hawaii Conference, October 13th & 14th at the lovely Kauai Beach Resort in Lihue, Kauai. This was his second presentation for this annual event, and he has been invited to return in 2013.



Universidad Santa Paula (USP) Costa Rica

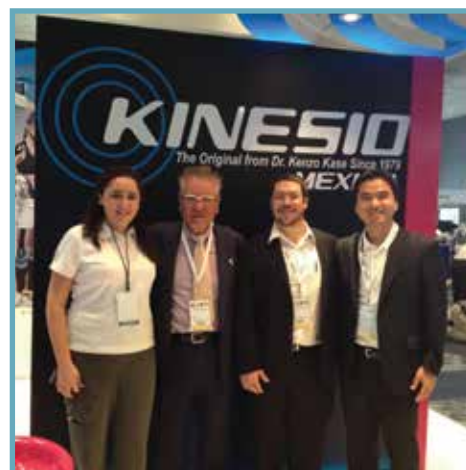
Dr. Kase was invited to make a presentation to students and faculty in the Physical Therapy program. They are very interested in pursuing Kinesio Taping education and research. Dr. Kase met with Dr. Erika Cyrus Barker, Director of the PT college, and CKTI Didier García Quirós. Together they are setting the wheels in motion for a collaborative effort.

At the Kinesio Taping Research Congress in Mexico, Dr Kase was the keynote speaker and had the opportunity to meet with CKTIs and Kinesio enthusiasts from all over Mexico and Latin America. CKTIs Peter Lang, Gustavo Adolfo Mendoza Orta and Masahiro Takakura were also featured at the Congress.

Several of the contacts he made at this meeting will be following up with plans for research. While in Mexico, Dr. Kase also had the opportunity to present at a Rehabilitation Congress in Veracruz, joining CKTI Raul Diaz Gonzalez Santibanez.



Dr. Raul Diaz Gonzalez Santibanez presented in Veracruz.



Mary Haber - Dr Kase -  
Peter Lang - Dr Takakura





# Kase's Corner

## After 34 Years... Kinesio® Tex Gold (FP™) is almost here!

It is with great pleasure and satisfaction that we announce the coming of Kinesio Tex Gold (FP) for early 2013. It has truly been a lifetime in the making. In 1979, I began with the idea of the unique properties of a tape for the Kinesio Taping Method. It had to have many qualities, a "formula" if you will that no tapes then or even today truly have. I created Kinesio Tex Tape.

At the beginning, the original concept was to have a tape that stimulated and mimicked the skin, along with certain tensions, elastic properties, and a medical adhesive that would adhere for days without irritation. The original concept was to have a fingerprint pattern for grip, feel, and stimulation. At the time, technology could not produce such a pattern and from 1981 to 1986 there was no pattern on Kinesio Tex tape. In 1986, I was able to add the now famous wave pattern in the first attempt at getting the fingerprint. In the 25 years following, the traditional (Classic) wave and Kinesio Tex tape have become an amazing tool for therapists and doctors the world over.

For many years we have been looking for how to keep the Kinesio Tex "formula" the same and provide further enhancements in the technology and Kinesio Taping application. The original concept is about to be released. Kinesio Tex Gold (FP) will carry all the same properties ("formula") of Kinesio Tex Tape, but with major advancements in stimulation, grip, comfort, quality fabric, engineering, and both medical adhesive and process. It is truly a dream come true. We are very excited as field and clinic tests from experts around the globe have been extremely positive. As one International CKTI said "It is truly a great step forward." We will continue to also produce the traditional "Classic" Kinesio Tex tape as it has been the standard for so long, and still carries the "formula" for patient success. Thank you to all who helped in the years and years of development.

This has been a true "REEVOLUTION"

Sincerely yours,

Dr. Kenzo Kase

November 16, 2012

See page 16  
for more information.

2013  
COMING  
IN

# AdvanceHealing

**ADVANCE HEALING MAGAZINE** IS A PUBLICATION DEDICATED TO IMPROVING THE EVERYDAY QUALITY OF LIFE FOR ALL THOSE WHO READ IT. THROUGH REAL SCIENCE WE SEEK THE TRUTH ABOUT THE HUMAN BODY FROM ALL ASPECTS. WITH REAL RESEARCH WE FIND THE ANSWERS TO LIFE'S QUESTIONS CONCERNING HEALTH AND HAPPINESS, AND WITH REAL RESULTS WE CAN PROVE THAT WITH TIME AND EFFORT PEOPLE CAN FEEL BETTER AND GET MORE FROM LIFE.

