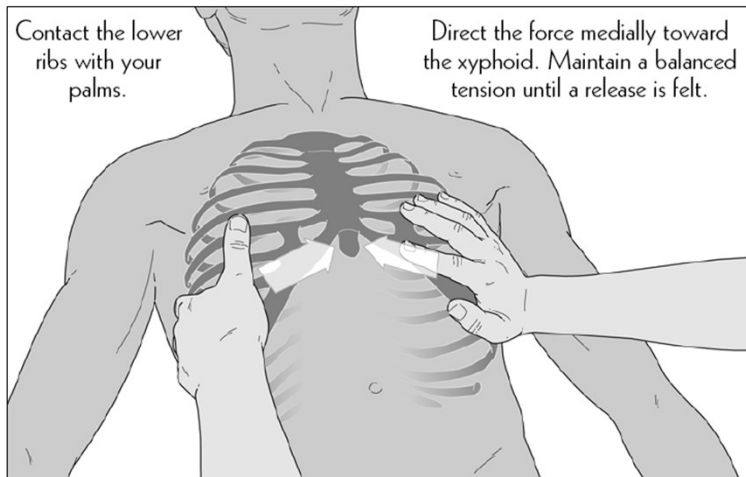


## Abdomen Summary

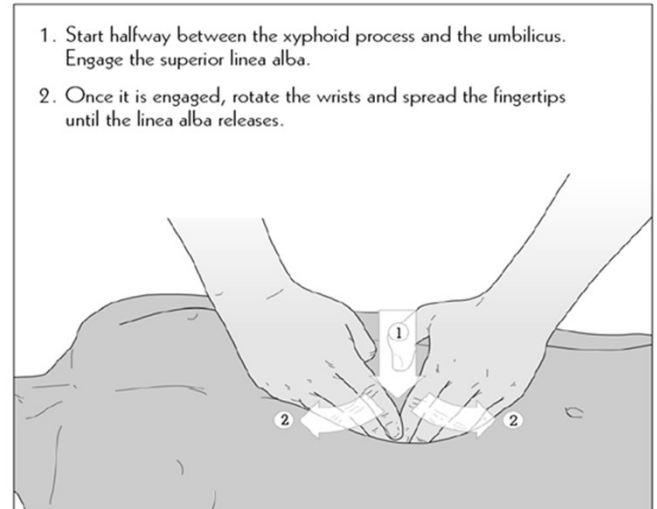
### (1) Diaphragm Release

Figure 6.8 Lateral compression for the lower ribs and respiratory diaphragm



### (2) Linea Alba

Figure 6.3 Superior linea alba technique



### (3) Ganglion Release

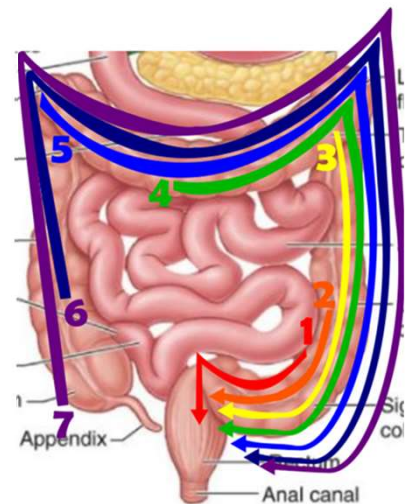


#### Technique:

1. Using both hands, place your fingers so that you contact the abdomen just below the xiphoid (celiac ganglion), just above the umbilicus (inferior mesenteric ganglion) and between the two previous points (superior mesenteric ganglion).
2. Apply a gentle downward pressure over these three regions while following respiration.
3. As the patient inhales, resist and while the patient exhales let your fingers sink down.
4. Stop advancing your fingers and hold steady pressure when you begin to feel the pulsations of the aorta.
5. Hold until you feel a release.

### (4) Colonic Sweep

1. "Open the drain" LLQ MFR/sigmoid lift
2. In a stepwise motion move proximal then work colon distally to encourage peristalsis. 1.(follow arrows 1-7)



### (5) Myofascial Release and Lymphatic Stimulation

#### Indirect MFR Steps

1. Identify restricted tissue or joint movement for all possible planes of motion
2. Slowly move the part of the body into its position of ease (indirect) for all planes
3. Follow any tissue release until completed
4. Retest motion, retreat with direct (restrictive barrier) MFR if needed

- Indirect MFR – direction of ease (severe pain, patient apprehension, autonomic normalization)
- Direct MFR – direction of restrictive barrier (chronic tension, fascial restriction, patient preference) – the tissue is loaded with a constant force until tissue release occurs.
- Activating forces: compression, traction, torsion, inhibition, respiration, vibration