Myofascial release; an evidence based treatment concept?

Lars Remvig, MD, DMSc
Department of Medical Orthopaedics and Rehabilitation, Rigshospitalet, University Hospital of Copenhagen, Blegdamsvej 9, 2100 Copenhagen, Denmark.
phone +45 3545 2005, fax, +45 3545 2008, email lars.remvig@rh.regionh.dk

BACKGROUND Myofascial release (MFR) is a very commonly used treatment modality for painful somatic dysfunctions. However, do we have any scientific evidence for an effect of MFR?
METHODS A literature search is performed in order to elucidate the prerequisites for myofascial pain, the interobserver variability of diagnostic tests for myofascial dysfuntion and the clinical effect of MFR.
RESULTS We have evidence that fascia are built by stretchable collagenous elements, that fascia contains contractile elements, that fascia have vascular and neural supply, and that the dermis is attached to the underlying fascia.
We have no studies that describe intertester reproducibility of diagnostic tests for fascial thightness or looseness and therefore we cannot say for sure that either situation can generate pain. Neither is there any studies documenting that thight fascia can be released – i.e stretched – by MFR technique or that the technique *per se* gives relief to the patients myofascial pain.
CONCLUSION The prerequisites for myofascial pain is present. However, the proof for the MFR clinical diagnosis and the effect of the MFR treatment is lacking.

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