

Principles: Advanced Myofascial Techniques

# HEADACHES & MIGRAINES

A. Cranial Sleeve

Til Luchau,  
[Advanced-Trainings.com](http://Advanced-Trainings.com)

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## USEFUL INFO & LINKS

### Principles: Headached & Migraines Live-Online Course

#### Lecture Link (via Zoom)

<https://bit.ly/headaches-principles-zoom>

Or by phone +1 253 215 8782 US

Meeting ID: 859 2847 9590

Password: 226680494

#### Lecture Schedule

Four Live 90min Lectures:

Wednesdays Nov 18, Sep 25, Dec 2, & Dec 16, 2020

(Thu/1 date later in Australia/NZ/Japan)

Each live lecture is repeated twice each day:

11am or 4pm PT / 2pm or 7pm ET

...plus Small Groups and Study Pod meetings as arranged.

#### Advanced-Trainings.com Office:

[info@advanced-trainings.com](mailto:info@advanced-trainings.com)

Tel/SMS/WhatsApp: +1 303 499 8811

**A-T Faculty contact info** (send in your Small Group questions 1 day prior):

<https://a-t.tv/headaches-principles-live-online/#faculty>

**Course Navigator** (your videos, handouts, quiz, and progress)

<https://a-t.tv/courses/headaches-principles/>

**Private Forum** (all links, schedules, announcements)

<https://www.facebook.com/groups/headaches.principles/>



Lecture (Zoom)



Course Navigator  
(login required)



Forum

# COURSE SYLLABUS

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Attend or watch each Lecture



Read the recommended chapters



Watch or follow along with each Technique video



Practice the techniques on yourself or a client



Note questions for discussion



Connect with your study pod



Meet with a faculty-led Small Group



Complete your quiz

# Quiz Preview:

## 'A' Sequence

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- What's an example of a “primary” headache?
- Which type of headache (primary or secondary) can hands-on work most realistically help with?
- Where is tension headache pain usually felt, in contrast to other types?
- What are we feeling for in the 'Ear: Concha, Cymba, Vagus' technique (C-08)?
- What is the suggested protocol for tension headache pain?

# Vista previa del cuestionario:

## Sequencia 'A'

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- ¿Qué es un ejemplo de un dolor de cabeza "primario"?
- ¿Con qué tipo de dolor de cabeza (primario o secundario) puede ayudar la terapia manual de manera más realista?
- ¿Dónde se suele sentir el dolor de cabeza tensional, a diferencia de otros tipos?
- ¿Qué buscamos en la técnica 'Oído: Concha, Cymba, Vagus' (C-08)?
- ¿Cuál es el protocolo sugerido para el dolor de cabeza tensional?

# Headache Classifications

## I. \_\_\_\_\_ (Idiopathic)

1. \_\_\_\_\_

2. \_\_\_\_\_ (eg Migraines)

3. \_\_\_\_\_

## II. \_\_\_\_\_ (Symptomatic)

4. \_\_\_\_\_ and Medical Conditions

5. \_\_\_\_\_, Trauma, Concussions

6. \_\_\_\_\_ Disorders (eg Cervicogenic)

## III. \_\_\_\_\_

7. Eg, \_\_\_\_\_ neuralgia, facial pain, etc

—summarized from IDHD-3 beta 2013

# Clasificaciones de dolor de cabeza

## I. \_\_\_\_\_ (idiopático)

1. \_\_\_\_\_

2. \_\_\_\_\_ (por ejemplo, migrañas)

3. \_\_\_\_\_

## II. \_\_\_\_\_ (sintomático)

4. Condiciones \_\_\_\_\_ y médicas

5. \_\_\_\_\_, trauma, conmociones cerebrales

6. Trastornos \_\_\_\_\_ (por ejemplo, cervicogénico)

## III. \_\_\_\_\_

7. Por ejemplo, neuralgia del \_\_\_\_\_, dolor facial, etc.

—resumido de IDHD-3 beta 2013

|                                  | 1. _____<br>Headaches            |  | Migraines &<br>2. _____<br>Headaches                                                                  |
|----------------------------------|----------------------------------|--|-------------------------------------------------------------------------------------------------------|
| <b>TYPICAL PAIN LOCATION</b>     | 3. _____                         |  | 4. _____;<br>side can shift                                                                           |
| <b>ASSOCIATED SYMPTOMS</b>       | Not typical<br>(unless 5. _____) |  | One or more of:<br>• 6. _____;<br>• light/sound sensitivity;<br>• visual disturbance<br>• paresthesia |
| <b>PAIN DESCRIPTION</b>          | Dull; 7. _____                   |  | 8. _____;<br>stabbing                                                                                 |
| <b>FEMALE:MALE</b>               | 9. _____                         |  | 10. _____                                                                                             |
| <b>MANUAL THERAPY WITH NECK:</b> | 11. _____ improve symptoms       |  | Can improve; but sometimes 12. _____ symptoms                                                         |



|                                       | Cefaleas<br>1. _____                         |  | Migrañas y dolores<br>de cabeza<br>2. _____                                                                |
|---------------------------------------|----------------------------------------------|--|------------------------------------------------------------------------------------------------------------|
| <b>UBICACIÓN TÍPICA<br/>DEL DOLOR</b> | 3. _____                                     |  | 4. _____; el<br>lado puede cambiar                                                                         |
| <b>SÍNTOMAS<br/>ASOCIADOS</b>         | No típica (a<br>menos que están<br>5. _____) |  | Uno o más de:<br>• 6. _____;<br>• sensibilidad a la luz<br>/ sonido;<br>• disturbio visual<br>• parestesia |
| <b>DESCRIPCIÓN DEL<br/>DOLOR</b>      | Sordo;<br>7. _____                           |  | 8. _____;<br>pulsante                                                                                      |
| <b>MUJER:HOMBRE</b>                   | 9. _____                                     |  | 10. _____                                                                                                  |
| <b>TERAPIA MANUAL<br/>CON CUELLO:</b> | 11. _____<br>mejorar síntomas                |  | Puede mejorar; pero<br>a veces 12. _____<br>síntomas                                                       |

# Goals:

## Advanced Myofascial Techniques

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- Increase 1. \_\_\_\_\_ movement, both gross and subtle.
- 2. \_\_\_\_\_ proprioceptive, kinesthetic and interoceptive senses.
- These can lead to 3. \_\_\_\_\_ relief, improved 4. \_\_\_\_\_, enhanced 5. \_\_\_\_\_, etc.

# Metas generales:

## Advanced Myofascial Techniques

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- Aumentar las 1. \_\_\_\_\_ movimiento, incluyendo los movimientos grandes y los sutiles.
- 2. \_\_\_\_\_ los sentidos propioceptor, kinestésico, e interoceptor.
- Estas cosas pueden aliviar el 3. \_\_\_\_\_ aumentar la 4. \_\_\_\_\_, y mejorar(e) el 5. \_\_\_\_\_, etc.

# CRANIAL SLEEVE SEQUENCE

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## Intentions / Goals:

- Assess and 1. \_\_\_\_\_ any 2. \_\_\_\_\_ or mobility restrictions of the myofascial 3. \_\_\_\_\_ of the neck, cranium, and face;
- Prepare for deeper 4. \_\_\_\_\_ work.

## Indications:

- Headaches, especially 5. \_\_\_\_\_ or myofascial;
- Eye, neck, or face 6. \_\_\_\_\_ or tension;
- Tinnitus, vertigo, TMJ, insomnia.

# SECUENCIA DE LA ENVOLTURA EPICRANEAL

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## Intenciones / Metas:

- Evaluar y 1. y cualquier 2. sensibilidad o restricción en la movilidad de las capas 3. del cuello, cráneo y cara;
- Preparar para un trabajo 4. más profundo.

## Indicaciones:

- Dolores de cabeza, especialmente de 5. o miofasciales;
- 6., o tensión en los ojos, cuello o cara;
- Acúfenos, vértigo, ATM, insomnio.

# Transversospinalis

C-02

*Transversospinalis*

*Transversospinalis*

**P,D**



## **Instructions / Intentions / Feel or Watch For**

Check for sensitivity and layer mobility of:

1. skin and superficial fascia;
2. deep fascia;
3. transversospinalis and posterior neck structures, ....while flexing neck.

## **Movements / Cues:**

Passive neck flexion and rotation.



## **Notes:**

Indicated for tension and cervicogenic headaches; cold whiplash; etc

# Suboccipital Triangle

C-03

*Suboccipitales Dreieck*

*Triángulo suboccipital*

**D**



## **Instructions / Intentions / Feel or Watch For:**

Feel for sensitivity or mobility restrictions at the levels of the:

1. Skin and superficial fascia
2. Deep cervical fascia (just under the superficial fascia)
3. Myofascial structures, intermuscular septa, and bony attachments (obliquus capitis inferior, superior; rectus capitis posterior major, minor, etc)

## **Movements / Cues:**



## **Notes:**

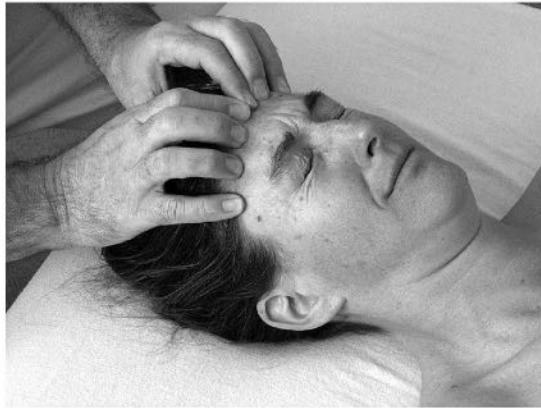
# Frontalis, Occipitalis

C-04

*Frontalis, Occipitalis*

*Frontalis, occipitalis*

**D**

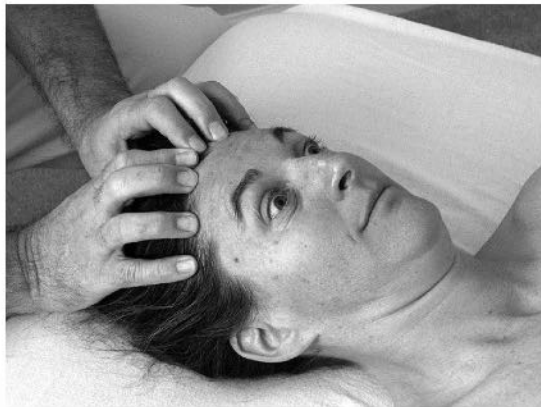


## **Instructions / Intentions / Feel or Watch For:**

Use firm pressure with fingertips to free the fascial layers of the forehead and scalp.

## **Movements / Cues:**

Open and close eyes; raise and lower eyebrows; grimace; jaw movements etc.



## **Notes:**

Not pictured: occipitalis on posterior cranium in the same way.



# Galea Aponeurotica

*Galea aponeurotica*

*Galea aponeurótica*

C-05

D



## Instructions / Intentions / Feel or Watch For:

1. Using a light touch, check for sensitivity of skin and superficial fasciae.
2. Use firm pressure with fingertips to free epicranial aponeurosis on entire cranium: "melon peeling."

## Movements / Cues:



## Notes:

# Temporalis Fascia

*Temporalis Fascia*

*Fascia temporal*

C-06

**D**



## **Instructions / Intentions / Feel or Watch For:**

Side-lying, or supine with head rotated.

Use fingers or knuckles to work Temporalis fascia with movement.

## **Movements / Cues:**

Jaw movements: depression/elevation; protrusion/retraction; lateral movements.



## **Notes:**

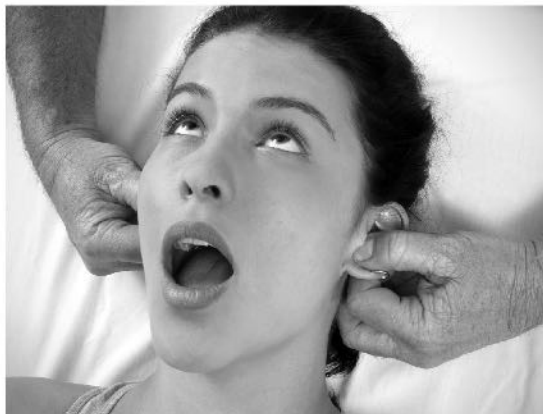
# Ear: Superior Crura

C-07

*Ohr: superiore Crura*

*Oreja: crura superior*

**D**



## **Instructions / Intentions / Feel or Watch For:**

The upper parts of the external ear can provide effective “handles” for mobilizing and desensitizing the cranial and temporal fasciae.

Apply gentle traction; assess for pain provocation or relief; repeat in various directions.

## **Movements / Cues:**

Use eye, face, and jaw movements, monitoring pain provocation or relief

## **Notes:**

# Ear: Concha, Cymba, Vagus

C-08

*Ohr: Concha, Cymba, Vagus*

*Oreja: concha, cymba, vagus*

**D**



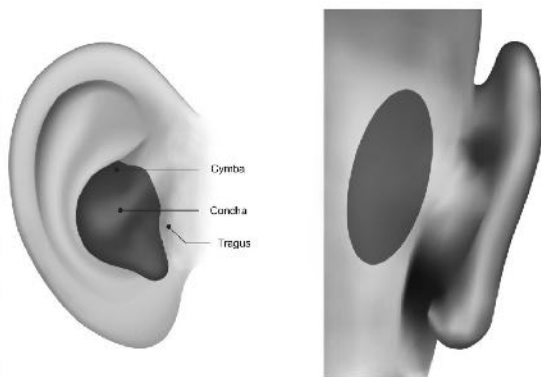
## **Instructions / Intentions / Feel or Watch For:**

1. Apply gentle pressure or traction to ears' concha, cymba, and or tragus
2. Ask for breath, or movement
3. Wait for response.
4. Repeat in each direction: inferiorly, posteriorly, superiorly, anteriorly, laterally.

## **Movements / Cues:**

Jaw depression/elevation; protrusion/retraction; lateral deviation.

Breathing; relaxing.



## **Notes:**

Variations:

- Use lateral traction on tragus or external acoustic meatus to imagine/feel connection deep into cranium and tentorium.
- Use jaw movements to feel into TMJ.

Lower illustration: dark areas indicate zones of cutaneous vagal innervation.

# Sacrum: Pelvic Lift

C-09

*Sacrum: Becken anheben*

*Sacro: levantamiento pélvico*

I



Instructions / Intentions / Feel or Watch For:

Movements / Cues:

Notes:

# Tension Headache Protocol

- Layer by layer, map out areas of headache 1. \_\_\_\_\_.
- Look for direction, layer, or pressure that relieves or (gently) 2. \_\_\_\_\_ headache pain.
- Encourage client to breathe; 3. \_\_\_\_\_.

# PROTOCOLO DE DOLOR DE CABEZA POR TENSIÓN

- Capa por capa, trace las áreas de 1. \_\_\_\_\_ por dolor de cabeza.
- Busque dirección, capa o presión que alivie o (suavemente) 2. \_\_\_\_\_ el dolor de cabeza.
- Sugiera que su cliente respire y que 3. \_\_\_\_\_.



# ANSWER KEYS / CLAVES DE RESPUESTA

## HEADACHE CLASSIFICATIONS

- I. **Primary (Idiopathic)**
  1. Tension
  2. Neurogenic (eg Migraines)
  3. Co-mingled
- II. **Secondary (Symptomatic)**
  4. Metabolic and Medical Conditions
  5. Injuries, Trauma, Concussions
  6. Musculoskeletal Disorders (eg Cervicogenic)
- III. **Others**
  7. Eg, trigeminal neuralgia, facial pain, etc

## COMPARED

- |               |               |
|---------------|---------------|
| 1. Tension    | 2. Neurogenic |
| 3. Bilateral  | 4. Unilateral |
| 5. Co-mingled | 6. Nausea     |
| 7. Squeezing  | 8. Throbbing  |
| 9. 60:40      | 10. 75:25     |
| 11. Can       | 12. Worsens   |

## GENERAL GOALS

- Increase 1. options for movement, both gross and subtle.
- 2. Refine proprioceptive, kinesthetic, and interoceptive senses.
- These can lead to 3. pain relief, improved 4. function, enhanced 5. well-being, etc.

## C. CRANIAL SLEEVE SEQUENCE

### Goals:

- Assess and 1. normalize any 2. sensitivity or mobility restrictions of the myofascial 3. layers of the neck, cranium, and face;
- Prepare for deeper 4. intra-cranial work.

### Indications:

- Headaches, especially 5. tension or myofascial;
- Eye, neck, or face 6. strain or tension;
- Tinnitus, vertigo, TMJ, insomnia.

## TENSION HEADACHE PROTOCOL

1. sensitivity
2. provokes
3. relax

## CLASIFICACIONES DE DOLOR DE CABEZA

- I. **Primario (idiopático)**
  1. Tensión
  2. Neurogénico (por ejemplo, migrañas)
  3. Mezclado
- II. **Secundario (sintomático)**
  4. Condiciones metabólicas y médicas
  5. Lesiones, trauma, conmociones cerebrales
  6. Trastornos musculoesqueléticos (por ejemplo, cervicogénico)
- I. **Otros**
  7. Por ejemplo, neuralgia del trigémino, dolor facial, etc.

## COMPARADO

- |              |                |
|--------------|----------------|
| 1. Tensional | 2. Neurogénico |
| 3. Bilateral | 4. Unilateral  |
| 5. Mezclado  | 6. Náuseas     |
| 7. Apretando | 8. Punzante    |
| 9. 60:40     | 10. 75:25      |
| 11. Poder    | 12. Empeora    |

## METAS GENERALES

- Aumentar las 1. opciones de movimiento, incluyendo los movimientos grandes y los sutiles.
- 2. Refinar los sentidos propioceptor, kinestésico, e interoceptor.
- Estas cosas pueden aliviar el 3. dolor, aumentar la 4. función, y mejorar(e) el 5. bienestar, etc.

## C. SECUENCIA DE LA ENVOLTURA EPICRANEAL

### Metas:

- Evaluar y 1. normalizar cualquier 2. sensibilidad o restricción en la movilidad de las capas 3. miofasciales del cuello, cráneo y cara;
- Preparar para un trabajo 4. intracraneal más profundo.

### Indicaciones:

- Dolores de cabeza, especialmente de 5. tensión o miofasciales;
- 6. Presión o tensión en los ojos, cuello o cara;
- Acúfenos, vértigo, ATM, insomnio.

## PROTOCOLO DE DOLOR DE CABEZA POR TENSIÓN

1. sensibilidad
2. provoque
3. se relaje



# Home-Study

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## Visit Your Course Navigator:

- For recommended readings, technique videos, and required documentation.

## Schedule:

1. Small Group meeting via link in email or forum, available after lecture
2. Study Pod meeting with your pod colleagues

## Practice:



**Invent**, practice, and teach someone else a self-stretch, yoga asana, mobilization, or dance move based on one (or more) of this sequence's techniques. Use your study pod, small group, or the forum for ideas and sharing.



**Practice** the sequence's techniques on a client or partner, following along the video or the booklet. Ask for feedback along the way. (COVID considerations: optional, if you aren't seeing hands-on clients/patients. Be sure to complete the 'Invent' step above instead.)



**Note** specific highlights, challenges, and questions to bring to your Small Group, study pod or supervision discussions.

# Estudiar en casa

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## Visite su navegador del curso:

- Para obtener lecturas recomendadas, videos de técnicas y documentación requerida.

## Programar:

1. Reunión de grupos pequeños a través de un enlace en el correo electrónico o foro, disponible después de la conferencia
2. Reunión de grupo de estudio con sus colegas de grupo

## Practica:



**Invente**, practique y enséñele a otra persona un auto-estiramiento, asana de yoga, movilización o movimiento de baile basado en una (o más) de las técnicas de esta secuencia. Utilice su módulo de estudio, su grupo pequeño o el foro para obtener ideas y compartir.



**Practique** las técnicas de la secuencia con un cliente o compañero, siguiendo el video o el folleto. Solicite comentarios a lo largo del camino. (Consideraciones de COVID: opcional, si no está viendo clientes / pacientes. Asegúrese de completar el paso anterior; "Inventar").



**Anote** los aspectos destacados, los desafíos y las preguntas específicos para llevar a su grupo pequeño, grupo de estudio o discusiones de supervisión.