

Relax & Restore Foam Roller Training
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The benefits of Self Myofascial Release include:

- Corrects muscle imbalances
- Improves joint ROM
- Decreases muscle soreness
- Decreases neuromuscular hypertonicity
- Increases extensibility of the musculotendinous junction
- Increases neuromuscular efficiency
- Maintains normal functional muscular length
- Relieves joint stress

THE Cumulative Injury Cycle

Kinetic Chain - This chain works, as an integrated, functional unit comprised of the soft tissue system:

- Muscle, tendon, ligament and fascia
- Neural system
 - Nerves and CNS
- Articular system
 - joints
 - Issues in the Kinetic chain will initiate the CIC, including but not limited to:
 - a) Muscle tightness and adhesions tend to restrict ROM
 - b) Because of restrictions, joint motion is altered
 - c) This changes normal feedback to the CNS
 - d) Neural feedback is altered
 - e) Neuromuscular efficiency is altered and compromised which leads to poor movement patterns (faulty) inducing premature fatigue and potential injury

General Guidelines for SMR

The health and fitness professional should be proficient in these techniques prior to client instruction.

- Hold each position 1-2 minutes for each side (when applicable).
- Roll about 1 inch a second.
- If pain is reported, stop rolling and REST on the painful areas for 20-30 seconds. Continuing to roll when pain is present activates the muscle spindles, causing increased tightness and pain.
- Resting 20-30 seconds on painful areas (adhesions) will stimulate the GTO and autogenically inhibit the muscle spindles; reducing muscular tension and pain.
- Maintain proper Draw-In Position, which provides stability to the lumbo-pelvic-hip complex during rolling.
- Clients can perform SMFR Program 1-2 x daily.
- Stretch the worked muscles after each SMFR session.

Take Away Points

- Rolling can be performed safely, daily and is ideal for pre and post exercise
- For best results, approach rolling with a method as pictured below
- Select rollers that are appropriate for your or your clients' needs with respect to density, roller length and cost

ILIOTIBIAL TRACT (IT Band)

Position yourself on your side lying on foam roll. Bottom leg is raised slightly off floor. Maintain head in "neutral" with ears aligned with shoulders. Roll just below hip joint down the lateral thigh to the knee.



PIRIFORMIS

Begin positioned with foot crossed to opposite knee. Roll on the posterior hip area. Increase the stretch by pulling the knee toward the opposite shoulder.



HAMSTRING

Place hamstrings on the roll with hips unsupported. Feet are crossed to increase leverage. Roll from knee toward posterior hip while keeping quadriceps tightened.



QUADRICEPS

Body is positioned prone with quadriceps on foam roll. It is very important to maintain proper Core control (abdominal Drawn-In position & tight gluteus) to prevent low back compensations. Roll from pelvic bone to knee, emphasizing the lateral thigh



GLUTEUS MEDIUS

Position the body lateral on the roller with the side of the glut on the roller. The top leg should be crossed and flexed at the knee, over the back leg that is long and extended. The foam roll is placed just lateral to the anterior pelvic bone (ASIS). Roll along the side of the "butt."



ADDUCTOR

Extend the thigh and place foam roll in the groin region with body prone on the floor. Be cautious when rolling near the adductor complex origins at the pelvis.



LATISSIMUS

Position yourself on your side with arm outstretched and foam roll placed in axillary area. Thumb is pointed up to pre-stretch the latissimus dorsi muscle. Movement during this technique is minimal.



RHOMBOIDS

Cross arms to the opposite shoulder to clear the shoulder blades across the thoracic wall. While maintaining abdominal Draw-In position, raise hips until unsupported. Also stabilize the head in "neutral." Roll mid-back area on the foam.



HIP FLEXOR

Lie prone on the foam roller with your body weight supported with your arms. Maintain proper draw in position while you manipulate the roller over the tissue-dense anterior hip area. Stay just medial of the ASIS joint. Focus on the Psoas and flexor area down to the quadriceps and upward towards the iliac crest and PSIS joint.



ANTERIOR LEG (SHINS)

Stabilize your body on top of the roller, gently rolling up and down across the front of the anterior lower leg. Particular helpful for those suffering from shin splints.



LUMBAR VERTEBRAE

Lie supine on the roller using your arms and posterior muscles to support your body weight. Proper draw in position is important here in order to stabilize the spine. Roll from where “your belt crosses your pants” down to the PSIS joint.



CALVES

Prop your body up on your arms/hands, being sure to support yourself with a shoulder joint that is closed and packed. Roll the extent of the calf, performing plantar and dorsi flexion in order to capitalize on the gastrocnemius and the soleus. It is common to get fatigued in this posture, so take breaks when necessary.



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