

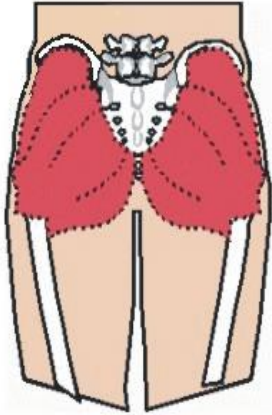
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Manufactured by: IHL, Inc., 1340 W. Lambert Rd., Suite #84, La Habra, CA 90631

Gluteal Muscles

Body Region:	Gluteal Muscles
Conditions Associated with TPs:	Sciatica, Low back pain, leg pain
General Symptoms:	Most common is upper leg pain in the back of the leg. Numbness, tingling and other nerve symptoms can be found as well.
Common Causal Activities:	Since the muscles are used for standing and positioning, extended activity in these can lead to the TPs. Trauma is often a causative factor. Trauma to the back, legs and even feet will cause a person to stand and walk differently due to the pain or discomfort. This will cause the Gluteal muscles to work differently than normal and develop TPs.
Anatomy Picture:	
Self Care:	Using tennis ball therapy is one of the easiest and best methods. A hooked tool is effective.
Therapist Care:	The massive Gluteal muscles mostly fall in the region between the sacrum and the lateral part of the upper leg (femur) bone. It is a deep muscle and best treated with a double thumb post. The best technique is to start in the center with the fingers flat on the sacrum. As you look for and treat the TPs move in a spiral outward until the entire deep area is covered. Leave you fingers in place and only move your thumbs. This will anchor your hands in place, give you leverage and maintain control of the therapy. Trying to do the opposite side Gluteals doesn't work. Your line of drive is not specifically downward into a prone (face down) patient. It is actually toward the center spindle or post of the body. As such trying to lean over the patient and pull your hands back into the Gluteals is bad on your own body. Walk around. It's much better for you.
	Since the Sciatic Nerve is a mingling of most of the nerves exiting the low back region and going to the legs and feet, it starts out as a

Special Notes:	fairly large cable of nerves (think a phone cable). It's passing through a powerful and often used muscle can lead to irritation of the nerves in the bundle. Any pain in the legs should consider TPs as a part of their condition.
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This region is best done on a semi firm platform like a floor. A soft bed is not as effective.

First of all you will use gravity to pull your body down onto the ABT. The only muscle work you will need to do is grip the ABT to keep it steady.

Place the ABT with the hook end down resting on the back of the curve as shown. Roll the body away from the ABT so that the hip is lifted up off the floor enough to get the point of the hook end under the Gluts and onto the TPs. Let your body roll back down



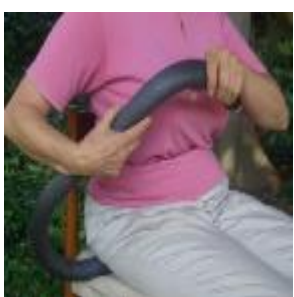
onto the ABT. Now with the curve of the hook end aligned along the side of the hip instead of outward, reach up high on the tool with one hand (or two) and grip the tool firmly so that the hand doesn't slip. By letting the elbow and arm drop toward the shoulder it levers the hook end up into the TP and lets gravity do the actual work at both ends of the lever.



One way to control the pressure on the TP is to lift the knee and place the foot flat on the floor and then allow the knee to drop inward across the other knee. This will lever the treated hip up enough to reduce the pressure on the TP for a little more comfort.



The use of a tennis ball explained above is show here, also. Simply place a tennis ball on the floor under the hip so that the body presses down onto a TP in the same way it would on the hook end of the ABT.



Another method is done while seated. Place the hook end on the chair and sit on it with the point under the Gluteal muscles. Simply rock the handle up and the point will press into the TPs in the region being treated.



