

FASCIITIS

Fascia is a term used to identify all fibrous connective structures not otherwise specifically named as tendons, capsules, synovial membranes, synovial sheaths or ligaments. Fascia varies in thickness and density according to the function it performs but it most commonly forms membranous sheets. Where two fascial sheets are easily separated, a loose areolar connective tissue called a fascial cleft intervenes. Some fascial sheets, called aponeurosis, attach muscles to bone, but most fascial sheets enclose muscles or groups of muscles and separate their several layers.

Treatment

Fasciitis is an inflammation of a fascial layer. The fascial layers pertinent here are those enclosing muscular tissues. The patient suffering from the *fasciitis syndrome* is generally sensitive to deep touch or probing into the involved tissues and may

adversely react to such uncomfortable contact. In the author's clinical setting, *fasciitis* is generally established to be present through DSR survey. It is generally easy to treat and responds well to phonophoresis of an effective anti-inflammatory, soft tissue manipulation to break any accompanying adhesions, milking or stroking massage and low frequency electrical stimulation to increase circulation. Successful treatment usually provides immediate and long lasting decreases in pain and functional improvement. It should be noted that successful treatment, confirmed by normal DSR readings and obvious improvements in the patient's condition, should be followed by a two week "lay-off" from the activity that the patient has cited as having caused the problem. The tissues need time to "toughen up" or (more accurately) to outlive the tissue sensitivity produced by bradykinin production.