

Introduction to dry needling

(Part one)

By Steve Barnett



Last month, as noted in the November issue of Nature's Pathways, Jane saw one of our physical therapists and, as part of her treatment, underwent a trigger point release procedure which we term "dry needling." Dry needling is a relatively new technique used by physical therapists to alleviate trigger points in taut tissue bands and the symptoms they produce.

The term dry needling is generic and has different meanings, depending on the

medical professional performing the technique. According to the American Physical Therapy Association (APTA), dry needling can also be called intramuscular manual therapy, trigger point dry needling or intramuscular needling.¹

Treatment of trigger points has been performed for hundreds of years, and came to the forefront in the mid 1900s by Dr. Janet Travell, a cardiologist who later was President Kennedy's personal physician.

She found "knots" in taut tissue bands that, when palpated, often caused pain. During her career, she mapped out referral pain patterns of the skeletal muscles in the body. Her means of treating trigger points was the use of a "wet" needle, or injection. Research has shown that the dry needle technique is as effective as and less damaging to muscle tissue than the use of a wet needle.

A very thin needle containing no medication is inserted into a trigger point with the goal of creating a twitch response. When this occurs, it releases the trigger points and relaxes the taut muscle band. This will alleviate the pain and symptoms that the trigger point has caused.

The technique itself can vary widely. The term dry needling is not trademarked. Using the Internet to search for this term can bring up pages and pages of various techniques, definitions and applications. How do therapists get training and determine the appropriate course of treatment for a patient?

- **Certification and continuing education training:** There are no fewer than six sponsored courses that physical therapists can take in the United States. Continuing education classes range from on-line courses to KinetaCore®, a course that offers 54 clinical hours in two different weekend sessions, to Myopain seminars, which offer 110 clinical hours in four different weekend sessions. This is on top of

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the over 2000 hours that physical therapists spend studying human anatomy.

- **Initial evaluation:** A physical therapist will perform an initial evaluation to plan a course of treatment that may include dry needling. Physical therapists will explain different treatment options to a patient and customize therapy for a patient to reach optimal outcomes.
- **Practice, practice, practice:** During the extensive training courses, physical therapists will have learned to dry needle muscles of the head, face, neck, trunk, pelvis and upper and lower extremities. They have needled each muscle group several times and have been needled themselves.

Jan Dommerholt, PT, DPT, an acknowledged expert in the world physical therapy community explains the technique, “Once you have palpated a trigger point and deemed it to be active (pain producing), you place a solid filament needle into the trigger point. Before you put the needle in, you need good anatomical knowledge to picture a three-dimensional image of exactly where the tip of the needle is at any given time. Once the needle hits the trigger point, there is a twitch response indicating you are in the right place.

Then you withdraw the needle from the muscle but not from the skin, change the direction of the needle a little and bring it back into the same area to get more and

more twitch responses. The objective is to elicit those twitch responses, which are spinal cord reflexes. And if you treat the trigger point properly, there will be no twitch responses left.”²

Dry needling is not a treatment by itself. It is a “tool in the toolbox” of techniques that a physical therapist has to offer patients to restore the musculoskeletal system to optimal health. This article is a multi-part series on dry needling. In the next issue, we will go more in-depth with the practices and questions that arise with dry needling. 



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Sources: 1. Virginia Board of Physical Therapy Task Force on Dry Needling. Meeting Minutes. March 2007.

2. Advance for Physical Therapists & PT Assistants. Ferrie, Brian W. Volume 19, Issue 6, Page 26.



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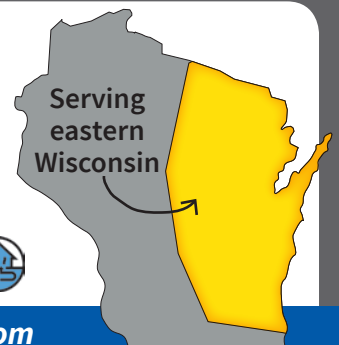
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