

Admittance, forms of training and therapy restriction.

The training for MNT is open for:

all therapists who, by previous training, are allowed to apply manual techniques on the body like: physiotherapists, osteopaths, chiropractors, acupuncturists, sports masseurs, shiatsu therapists and others...

All therapists must have the necessary certificates and diploma's for a legal complementation of the therapy according to the laws in their own country.

Forms of training.

MNT-NR International[®] offers two possibilities to complete the MNT training.

1. The MNT upgrade training (Pages 1-6).

This training is organized for all therapists who previously have finished the whole nerve reflexology training. Many therapists want first to learn nerve reflexology as additive skills to their own practical techniques like classic foot reflexology or like physiotherapy. Later, after completing the NR training, they still have the opportunity to learn specific MNT techniques.

Another advantage of this MNT upgrade training is the fact that it is offered in specific modules, restricted to one part of the MNT techniques. See therefore the training scheme below.

This structure gives therapist the possibility to choose for one specific module in their own therapeutic field, without following the others.

2. The MNT combined training (Pages 7-9).

In this training all the different techniques of MNT, including the nerve reflexology and including the anatomical and topographical foot reflexology, are instructed.

These modules in this training are not focused on one specific MNT technique but on functional disorders in body areas. See therefore the training scheme below. All the MNT-techniques for this body area are instructed in a total treatment concept.

The therapy is restricted to restore *functional disorders only* in the somatic or autonomous system. In case of structural disorders the therapy can focus on the functional disorders due to the structural cause.

The main goals of the training for NR and MNT are:

- training for the specific techniques of NR and MNT;
- applying these techniques in a specific NR-MNT-treatment;
- training for the pain clinical reasoning and treatment concept of NR and MNT;
- training for the necessary assessment techniques.

1. The MNT upgrade training.

1.1. Training scheme.

Module 1.

Neuroreflectory Soft tissue Friction
Techniques (NSFT) and Spine
Tuning (SP)

4 days of 6 hours each = 24 hours.

Module 2

Anatomical and Topographical foot
reflexology (ATR).

4 days of 6 hours each = 24 hours.

Module 3.

Visceral mobilization and visceral
reflexology (VM-VR).

6 days of 6 hours each = 36 hours.

Module 4.

Clinical reasoning and Neurogenic
Assessment

6 days of 6 hours each = 36 hours.

Remarks.

1. This training is only accessible for those therapists who previously completed the whole nerve reflexology training.
2. The total number of hours of the MNT upgrade training is 120 hours. Together with the NR training (54 hours) the total number is 174 hours.
3. Module 2 is only mandatory for these therapists who had no previous basic training in classic foot reflexology.
4. Module 3 can only be attended after following module 2 (except for participants with previous basic knowledge of classic foot reflexology).
5. Module 4 is ending with a practical final exam on the last day.
6. Therapists, who want to achieve the diploma of Qualified Manual Neurotherapist have to take part at all 4 modules and at the final practical exam.
7. Therapist, who are not interested in achieving the diploma, can participate at the modules of their own choice.
8. For each module the attendees will receive a certificate.

1.2. Objectives and contents of the four modules.

Module 1. The Neuroreflexory Soft tissue Friction Techniques (NSFT) and Spine Tuning (ST).

Objectives.

The spine plays an important role in all kinds of locomotor dysfunctions. Even in pains of the shoulder-arm, hips and legs, there is often a relationship with a dysfunction in the spine.

But also in the pain concept of MNT, the spine plays a central role. It surrounds the spinal cord. Upregulation and sensitisation of spinal cord segments is first expressed in the spinal muscles and joints.

Every nociceptor impulse and pain behaviour condition results in posture changes, necessary for avoiding overloading movement. Posture changes are expressed in hypertonic muscle groups surrounding the spine and decreasing movement possibilities in the joints. Also stress impulses are causing these kinds of changes. Certainly the thorax and muscles like sternocleidomastoideus and trapezius are known as "stress"-muscles.

Making the spine move is mostly the first goal in the MNT treatment.

In these seminars we learn to combine 3 techniques:

- Neuroreflexory Soft tissue Friction Techniques (NSFT),
- Spine Tuning (SP),
- Nerve reflex points (NR).

The NSFT are kind of circular massages in the run of the spinal nerves. SP are a mix of segmental and multisegmental passive mobilisations of the spine. NR is always the central technique, binding NSFT en SP

Contents.

Theory.

1. Neurophysiological backgrounds.
2. Theoretical backgrounds of NSFT en SP.

Practice.

1. NSFT of the dorsal rami area of the spine.
2. NSFT of the ventral rami area of the spine.
3. Combining with NR.
4. Spine tuning: segmental glides, rotations, pelvic mobilisations
5. NSFT lower limbs.
6. NSFT neck, shoulder, arm.
7. Combining NR en SP.
8. Combining NR and nerve mobilisations.
9. Combining NR and muscle mobilisations.

Module 2.

Anatomical and Topographical Foot Reflexology (ATR).

Objectives

In MNT, we often combine the MNT-techniques with "zone reflex" therapy. Zones on the foot sole, representing visceral structures, are worked out with special massage techniques. This "classic foot reflexology" is instructed in different schools all over the world.

MNT-NR International® offers a different approach. Since MNT and NR are based on neurological and anatomical facts of the human body, we are holding on the pure anatomical and topographical reproduction of the human body structures in the foot.

On this base, the reflex zones of the MNT-NR International® maps might be very different from the Eunice Ingham or Hanne Marquardt approach.

The anatomical and topographical approach demands a very good knowledge of the real anatomical and topographical position of organs in the human body. Therefore, lot of attention goes to this knowledge. On the other hand, representation of the human body in the foot demands a deep knowledge of the anatomical structures of the foot, before going into the reproduction of the zones.

Although this seminar is not mandatory for those who have finished a previous training in classic foot reflexology, this special approach might give a new point of view in foot reflexology.

Contents.

Theory.

1. Anatomy and topography of the organs of the digestive tract.
2. Anatomy and topography of the reproductive organs.
3. Anatomy and topography of lungs and heart.
4. Anatomy and topography the endocrine glands, kidneys and spleen.
5. Anatomy and topography of the foot skeleton and muscle layers.

Practice.

1. Topographical representation on the body and on the foot of the digestive tract.
2. Topographical representation of the reproductive organs on the body and on the foot.
3. Topographical representation of lungs and heart on the body and on the foot.
4. Topographical representation of the endocrine gland, kidneys and spleen on the body and on the foot.
5. Basic treatment techniques on the foot.

Module 3.

Visceral mobilisations and visceral reflexology.

Objectives.

In MNT, the musculo-skeletal and visceral systems are considered as a unit in function, movement and innervation. The muscles, bones and joints of the musculo-skeletal system can only perform at the best level if they are provided by the right nutrients and hormones and if they get rid of their toxins. The digestive and hormonal system must provide the right nutrients and hormones, transported by arterial blood flow, while the toxins must be removed by the veins and the lymph vessels.

The muscle chains in the lumbar-pelvic and thoracic area provide a perfect support for the organs in the stomach, pelvic and thoracic area to move up and down. The movement of the organs is strictly related to the movement of the muscle chains. Both need good movement for a healthy function.

If function and movement are strictly related it is obvious the nerves in both systems are also related and from the same origin.

In these 3 seminars of module 2 we will go deeply into the relations of the musculo-skeletal and visceral system. Function and physiology of digestive tract, hormonal axis, immune system, blood pressure and so on...will be explained. Manual mobilisation techniques of diaphragm and digestive tract will be learned together with new and very special reflexology techniques at the foot. Zone reflexology for organs will be combined with nerve reflex points.

Contents.

Theory.

1. Physiology of the digestive tract.
2. Physiology of immune system and hormones.
3. Physiology of body fluid circulation and blood pressure.
4. Refreshment of the innervation of viscerals.
5. Refreshment of the musculo-skeletal chains.

Practice.

1. Mobilisations of the digestive tract.
2. Mobilisations of diaphragm.
3. NR for visceral plexi.
4. Visceral reflexology with:
 - a. techniques for 3 diaphragms,
 - b. techniques for functional restore,
 - c. techniques for emotional restore,
 - d. techniques in combination with NR.
5. Techniques for lymph drainage

Module 4.

Clinical reasoning and neurogenic assessment.

Objectives.

MNT and NR are based on 2 main principles: the phenomenon of pain and the way pain is transported and modulated by the nervous system. This is the science based part of MNT and NR. It is the task of the MNT-NR therapists to understand which parts of the nervous system are involved in the patients pain. This leads to a comprehensive treatment schema. Assessment of pain and the nervous system is necessary for a evidence based practice. Both pain and the nervous system can be assessed by simple methods. For pain we have the famous Visual Analogue Scale and questionnaires like the Mc Gill pain questionnaire. For the nervous system we can easily assess the sensory behaviour of peripheral nerves, spinal cord and brainstem by brushing and pricking skin zones. Other assessment methods are: history taking, motor function assessment and nerve mobility assessment.

After finishing these seminars the MNT-NR therapist is capable to fully understand and to assess the pain of he patients. The clinical reasoning and handling model will give him/her the opportunity to act and to treat on a evidence based practice.

Contents.

Theory.

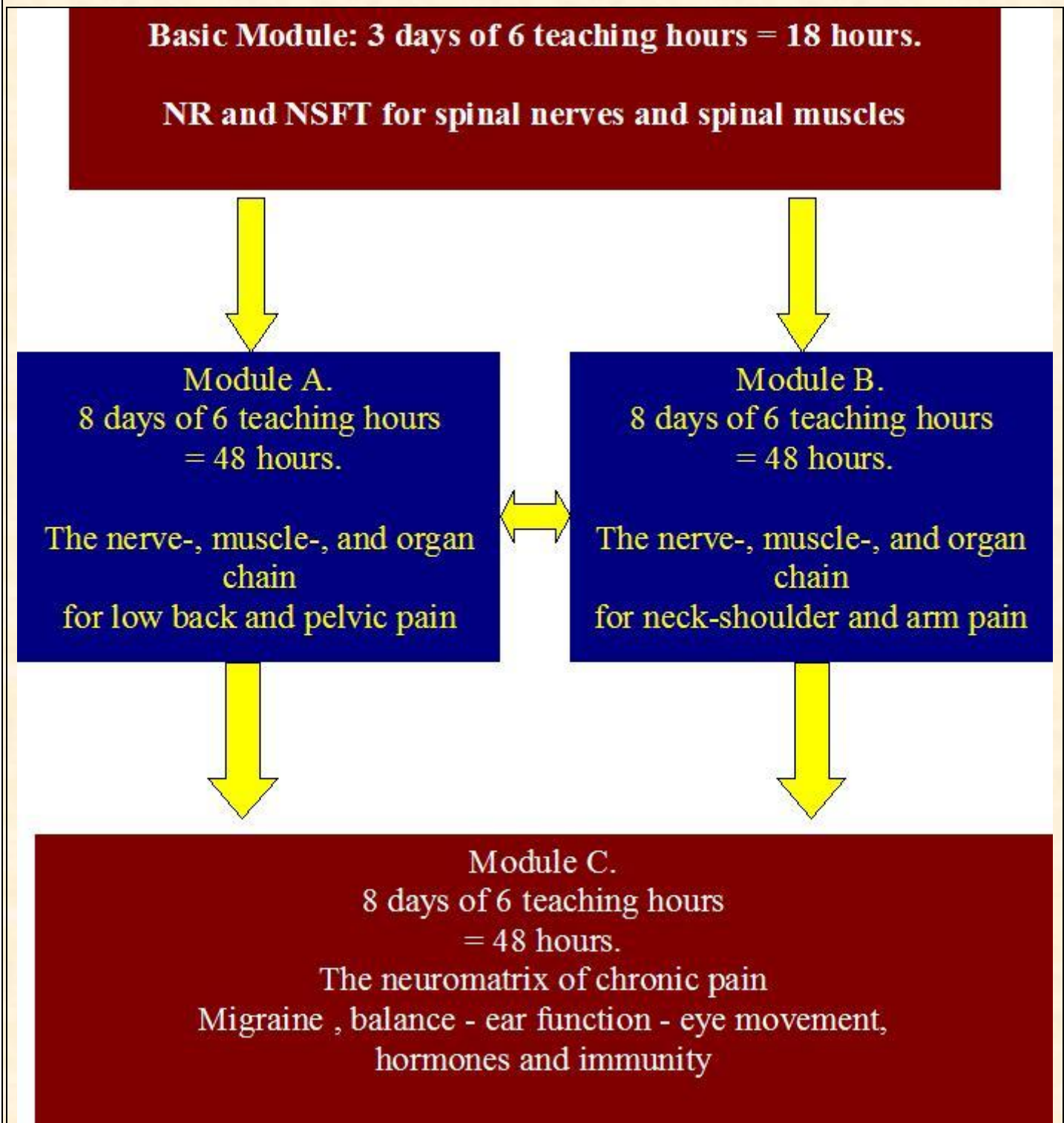
1. Physiology of peripheral pain.
2. Physiology of central pain.
3. Physiology of sympathetic pain.
4. Physiology of peripheral nerve mobility.

Practice.

1. Assessment of pain.
2. Assessment of locomotor function.
3. Assessment of peripheral nerves.
4. Assessment of spinal cord.
5. Assessment of the brainstem.
6. Assessment of peripheral nerve mobility.
7. Clinical reasoning and handling

2. The MNT Combined training.

2.1. Training scheme.



Remarks:

1. Following the basic module is mandatory before starting the others.
2. Module C is open after following the basic module and module A and/or B.
3. On the first day of module A, B and C a small multiple choice theoretical test is organized.
4. On the last day of module C a final practical exam is organized. Taking part is not mandatory.
5. Succeeding in the final practical exam is honored by a diploma as qualified manual neurotherapist.

2.1. Objectives and contents.

Module A.

This basic module is designed for learning the basic principles and techniques of MNT. The 2 main techniques: NSFT and NR are demonstrated and applied, focusing on the spinal nerves and spinal muscles.

One day is spent at neurophilosophical and neurophysiological principles of the nervous system..

Contents.

- Introduction in the concept of MNT.
- The anatomical reflexion of the human body in the foot.
- Marking the spine as reflex zones on the foot skeleton.
- Learning the push technique of NR.
- Applying NR for dorsal and ventral roots of spinal nerves.
- Characteristics of NR-points.
- Objectives of NSFT.
- Applying NSFT for spinal muscles.
- Combining NSFT and NR.
- Neurophilosophical and neurophysiological principles of the nervous system.

Module A.

Chronic low back and pelvic pain or instability is one of the big problems for the manual therapy approach. In this module the focus is on a specific point of view and approach in theory and praxis.

A lot of attention goes to the lumbar-pelvic cage with its own nerve, muscle and organ chain.

The muscle chain is formed internally by diaphragm, psoas, quadratus, psoas, piriformis and pelvic floor muscles. On this chain, the intestines and pelvic organs must glide up and down, forming a movement unity. This unity is controlled by the same nerves, connecting the muscle and organ chain on the spinal cord and brain level. It is the first in MNT to balance these 3 chains.

Contents.

- Refreshing the NSFT and NR of the basic module.
- Specific NR , mobilisations and ST for the muscle chain.
- Specific NR and mobilisations for the organ chain.
- Specific NR for the nerve chain.
- Topography of the organ zones on the foot.
- NR combined with classic foot reflexology for organs.
- NR and NSFT for lower limbs.
- Neural tests for the nervous system.
- Specific neurology and neurophysiology for this region.

Module B.

Like nerves, muscles and organs in the mumber-pelvic cage, combined chaines are formed in the thoracic cage, neck and shoulder area. The chain starts here up from the diaphragm over mediastinum, pericard, pleura and neck muscles.

In the neck are, the sympathetic system plays an important role. Trapezius and sternocleidomastoideus are known as "stress"-muscles. This has to do with connections between diaphragm, phrenical and accessory nerve and sympathetic stress.

Contents.

- Neuro-anatomy and neurophysiology of thoracic, brachial and cervical plexus and spinal nerves.
- NSFT and NR for muscles.
- Spine Tuning techniques for neck and thorax.
- NR for sympathetic-phrenical-accessory connections.
- Assessment of peripheral nerves and spinal cord.
- NSFT and NR for upper limbs.
- Pain clinical reasoning and handling.

Module C.

In this module the focus is on brain structures and peripheral nerves of brainstem.

In the brain we have different pain centers who are participating at the whole image of pain. The feeling of pain is born and modulated in these centers. Of course, these centers are very important in fighting pain. In MNT we have different and specific points for these structures. Coupling these points to organs, hormonal and immune system points gives the therapist the opportunity to interfere in chronic pain states..

Many migraines and headaches are often combined with organ dysfunction and dysbalance between sympathetic and parasympathetic nervous system. In this module we pay attention on the treatment of these headaches.

Contents.

- NSFT and NR for plexus cervicalis, occipitalis en trigominalis.
- Specific NR for brain pain centers.
- Specific NR for eyes, ears, teeth, balance.
- Physiopathology of chronic pain.
- Treatment of chronic pain.
- MNT treatment in a holistic perspective.

Final Exam.

Participants who have finished all 4 parts of the MNT training can take part at a final exam. This exam is only practical, consisting of treating a patient completely following the MNT directions.

The exams are organised on the last day of the clinical reasoning and handling seminars.

Succeeding in the exam gives the right for a diploma in "Qualified Manual Neurotherapist".

It is up to the student to decide if he/she takes part at the final exam.