

## THE TRAPEZIUS REFLEX SYNDROME

## PART FIFTEEN

## THE TRAPEZIUS INDICATORS

NOTHING IN MAN IS SELF DETERMINING...EVERYTHING INSIDE AND OUTSIDE MAN'S BODY IS DEPENDENT UPON SOME OTHER PART OR ORGAN OR TISSUE OR BLOOD VESSEL.

THE BRAIN IS THE SOURCE OF ENERGY...THE BODY MUST NOURISH THE BRAIN.

YOUR BRAIN, LIKE YOUR GOVERNMENT, HAS NO ABILITY TO SUPPORT ITSELF, BUT IS TOTALLY DEPENDENT UPON THE BODY IT CONTROLS.

MONITOR STATIONS ARE PLACED THROUGHOUT MAN'S BODY. THE PULSE MONITORS THE HEART RATE AND IN SOME SYSTEMS, IT IS A VITAL DIAGNOSTIC TOOL. HEAVING OF THE CHEST MONITORS RESPIRATION...EXCRETION OF URINE MONITORS THE KIDNEYS AND THE LIQUID WASTE DISPOSAL PLANT ASSOCIATED WITH YOUR BODY. THE INTESTINAL TUBE MONITORS THE FOOD MATERIALS TO BE PREPARED AND DIRECTED TO THEIR PROPER DESTINATION. THE COLON HANDLES THE WASTE PRODUCT. THE ANAL SPHINCTER IS THE ONLY MUSCLE IN THE HUMAN BODY THAT CAN DISTINGUISH BETWEEN LIQUID, GASES AND SOLIDS, AND THANK GOD FOR THAT GOOD DEED. YOUR SINUSES MONITOR EXCESSIVE CEREBROSPINAL FLUID...STRANGE, ISN'T IT?.... BUT TRUE.

SURELY WITH MAN COMPOSED OF HUNDREDS OF SELECTIVE MUSCLES, GOD SURELY PLACED A MONITOR SOMEPLACE THAT WOULD SORT OUT AND SELECT AND IDENTIFY THAT OR THOSE MUSCLES NOT DOING THEIR JOB.

SUCH A MONITOR DOES EXIST. IT IS THE SHOULDER GIRDLE, AND SPECIFICALLY, THE TRAPEZIUS MUSCLE...THE ONLY SKELETAL MUSCLE INNERVATED BY A CRANIAL NERVE, THE SPINAL ACCESSORY.

## THE TRAPEZIUS MUSCLE.

THIS MUSCLE HAS TWO CAPABILITIES FOR THE MONITORING PROCESS OF SKELETAL MUSCLE FUNCTION, AND BONE RESPONSE.

## SKELETAL MUSCLE DYSFUNCTION.

WHEN A SKELETAL MUSCLE SERIES FAILS TO PERFORM ON COMMAND, THE TRAPEZIUS MONITOR WILL SELECT THEM AND ASSOCIATE THEM WITH A SPECIFIC VERTEBRA.

## BONE DYSFUNCTION.

WHEN SKELETAL MUSCLES AND BONE RESPONSE ARE NOT IN COMMON, AND WHEN THIS BONE RESPONSE IS A VERTEBRA, CHANGES WILL OCCUR IN THE PEDICLE SYSTEM OF THAT VERTEBRA WHICH CAN BE USED TO BEGIN THE IDENTIFICATION OF A STATE OF MALIGNANCY.

## ACTIVE PALPABLE TRAPEZIUS FIBER

THIS IS DISTINCTLY FELT AS YOU PALPATE THE TRAPEZIUS AREAS...IT IS THERE AND IT IS PAINFUL. IT IDENTIFIES A MUSCLE OVER-RESPONDING.

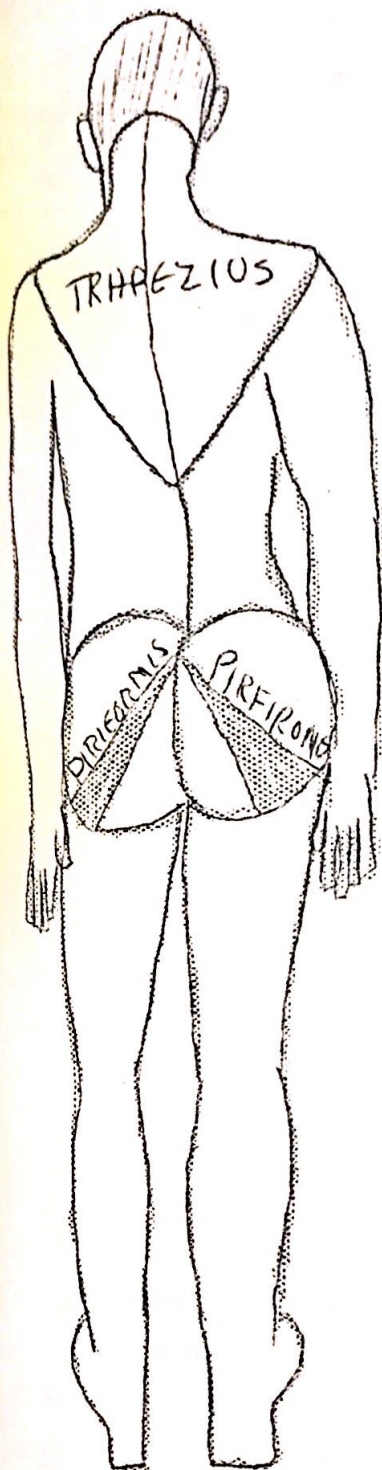
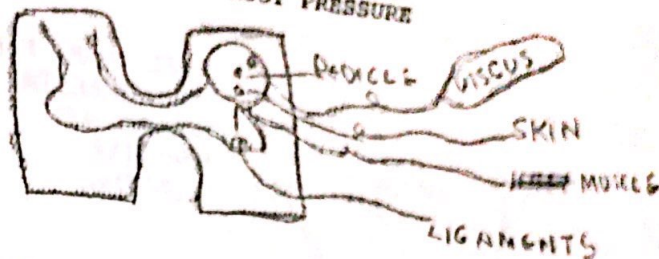
## THE REACTIVE TRAPEZIUS FIBER.

YOU FIND IT BY SPECIFIC DEGREE OF PRESSURE AND IT REACTS TO YOUR PRESSURE. IT MONITORS TISSUE CHANGES.

## SACRO OCCIPITAL TECHNIC 1977

## THE TRAPEZIUS REFLEX SYNDROME

## TRAPEZIUS NODULE INDICATOR OF NERVE ROOT PRESSURE



MAN SUBLUXATES. THIS IS AN ACCEPTED FACT BY ALL FACETS OF SOCIETY, SCIENCE, MEDICINE AND CHIROPRACTIC.

MAN MAY SUBLUXATE EMOTIONALLY, MECHANICALLY, PHYSIOLOGICALLY AND PATHOLOGICALLY. THE TYPE SUBLUXATION SUFFERED BY MAN DEPENDS UPON THE MECHANICAL PART INVOLVED IN HIS VERTEBRAL SYSTEMS.

ALL THE MISERIES OF LIFE CAN BE ATTRIBUTED TO MAN'S VERTEBRAL SYSTEM, YET NOT ALL OF THE REMEDIES LIE WITHIN THAT SYSTEM. THE CAUSE SITE MAY NOT BE THE REMEDY SITE.

THERE IS ONE VERY SPECIFIC AREA INVOLVED IN ALL OF MAN'S PHYSICAL SUBLUXATIONS AND THAT AREA IS OUTLINED BY THE FORMATION OF THE TRAPEZIUS MUSCLES. WITHIN AND UPON THIS TRIANGLE LIE THE INDICATORS THAT TELL US ABOUT MAN'S STRIATED SYSTEM, AND AFTER ALL THIS STRIATED SYSTEM IS HIS MAJOR PAIN SYSTEM. MAN BECOMES FRIGHTENED WHEN HE SUFFERS PAIN AND HE WANTS TO KNOW WHY THE PAIN IS THERE AND WHERE IT CAME FROM.

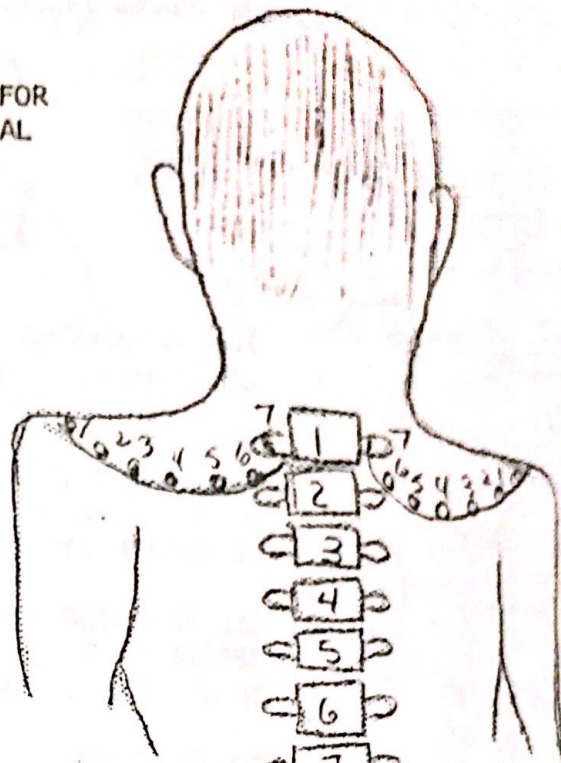
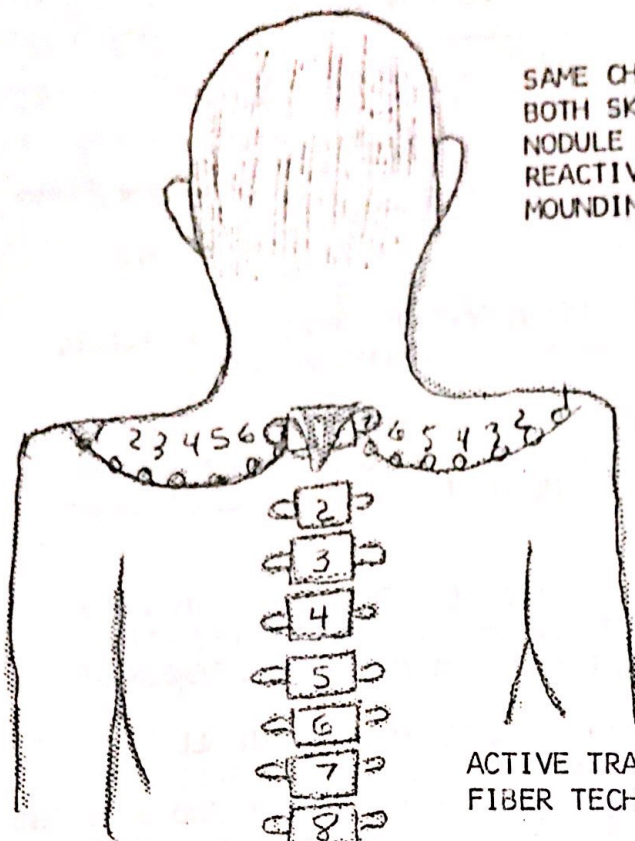
THIS TRAPEZIUS TRIANGLE IS THE ONLY STRIATED MUSCLE SYSTEM INNERVATED BY A CRANIAL NERVE, NAMELY, THE SPINAL ACCESSORY. IT IS THIS INNERVATION WHICH PERMITS THIS MUSCLE TO SERVE AS A GREAT BENEFACITOR WHEN USED PROPERLY BY A DOCTOR OF CHIROPRACTIC.

MAN'S DISTORTIONS AND SUBLUXATIONS ARE INTER-RELATED. THE SUBLUXATION PRODUCES THE DISTORTION AND THE DISTORTION PRODUCES THE PATTERNS WE SEE WHEN MAN STANDS BEFORE US.

IN STUDYING THE VERTEBRAL SYSTEM AND THE MAKE-UP OF THE SPINAL CORD SEGMENTS AT EACH VERTEBRAL LEVEL, WE FIND THAT THE VERTEBRAL PEDICLE IS THE SOURCE OF MUCH OF MAN'S PAIN SYNDROMES. IT IS FROM THIS PEDICLE VERTEBRAL REGION THAT THE CORD HORN DEVELOPS THE ABNORMAL INNERVATION WHICH PRODUCES PAIN IN VISCERA, SKIN, MUSCLES AND TENDONS AND IT IS FROM THIS PAIN PATTERN THAT MAN'S DISEASES AND REGIONS TAKE THEIR IDENTIFICATIONS.

THE TRAPEZIUS REFLEX SYNDROME  
THE NODULAR AND MOUNDING REACTION

SAME CHART FOR  
BOTH SKELETAL  
NODULE AND  
REACTIVE  
MOUNDING.



ACTIVE TRAPEZIUS  
FIBER TECHNIQUE.

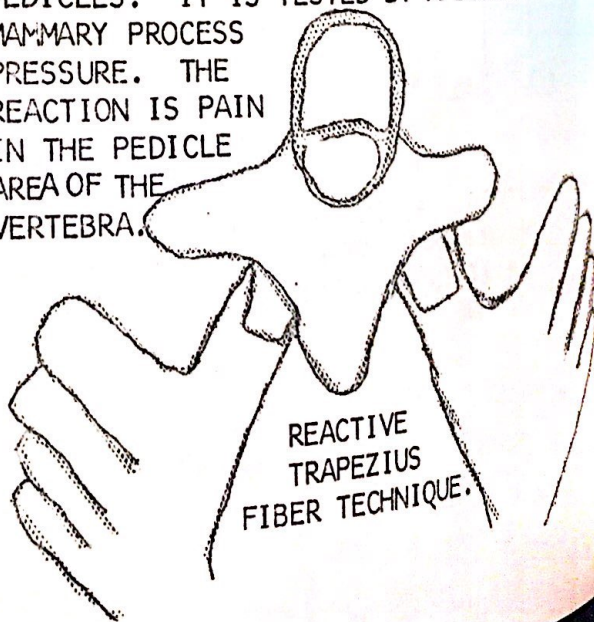
THE REACTIVE  
TRAPEZIUS AREA  
IS FOUND BY PAL-  
PATION. THERE  
IS A TISSUE  
MOUND, WHICH UPON  
A CONTROLLED  
PRESSURE CONTIN-  
UES TO DEVELOP  
AND RESIST YOUR  
CONTROLLED FIN-  
GER PRESSURE.

THIS AREA IS ASSOCIATED WITH THE VERTEBRAL  
PEDICLES. IT IS TESTED BY A DOUBLE THUMB  
MAMMARY PROCESS  
PRESSURE. THE  
REACTION IS PAIN  
IN THE PEDICLE  
AREA OF THE  
VERTEBRA.

TRAPEZIUS SPINAL REFLEXES.  
VERTEBRAL MOVEMENT.

- TRAPEZIUS 1...TO T 1-2-10.
- TRAPEZIUS 2...TO T 3-11-12.
- TRAPEZIUS 3...TO T 4-5, L 1.
- TRAPEZIUS 4...TO T 6, L 2.
- TRAPEZIUS 5...TO T 7, L 3.
- TRAPEZIUS 6...TO T 8, L 4.
- TRAPEZIUS 7...TO T 9, L 5.

REACTIVE TO PRESSURE WITH PALPATORY  
PAIN AND HARD NODULE...COMPANION  
VERTEBRA REACTIVE TO PALPATORY PAIN  
OVER SPINOUS PROCESSES.



REACTIVE  
TRAPEZIUS  
FIBER TECHNIQUE.

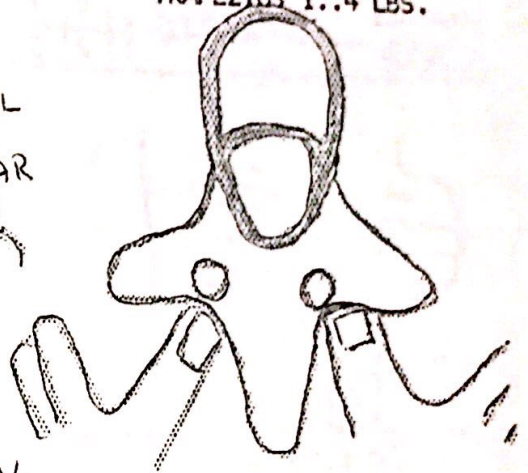
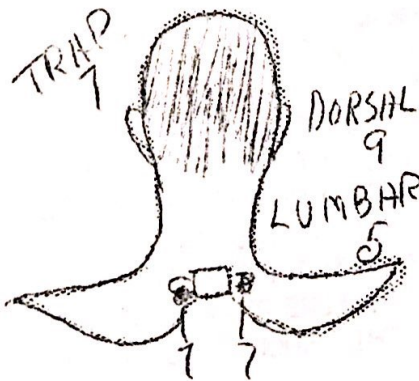
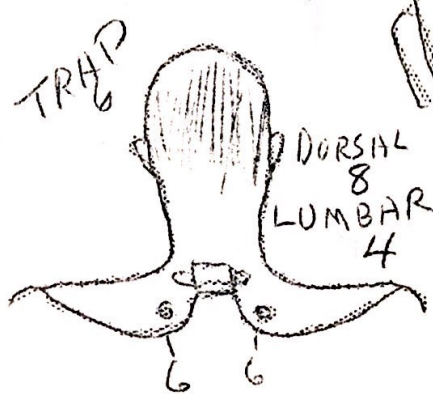
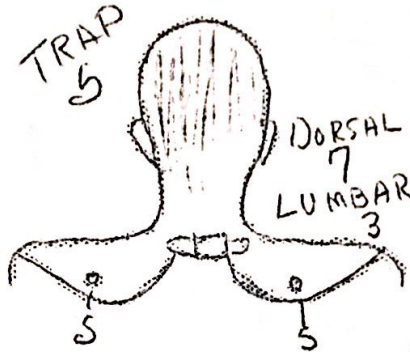
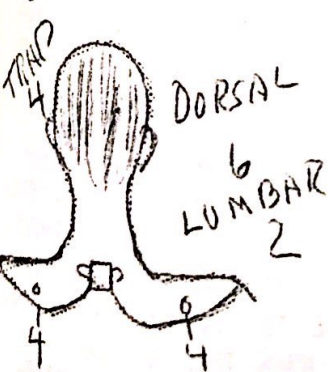
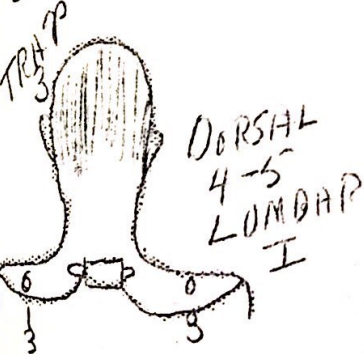
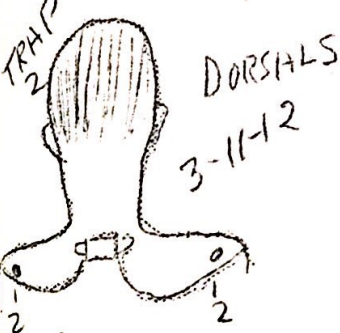
THE TRAPEZIUS REFLEX SYNDROME  
 TRAPEZIUS VERTEBRAL REFLEX AREAS

# TRAPEZIUS-VERTEBRAL

|           |     |   |     |   |   |   |   |
|-----------|-----|---|-----|---|---|---|---|
| TRAPEZIUS | 1   | 2 | 3   | 4 | 5 | 6 | 7 |
| DORSALS   | 1-2 | 3 | 4-5 | 6 | 7 | 8 | 9 |
| LUMBAR    |     |   | 1   | 2 | 3 | 4 | 5 |

DEGREE OF PRESSURE FOR REACTION.

- TRAPEZIUS 7..1 LB.
- TRAPEZIUS 6..1½ LBS.
- TRAPEZIUS 5..2 LBS.
- TRAPEZIUS 4..2½ LBS.
- TRAPEZIUS 3..3 LBS.
- TRAPEZIUS 2..3½ LBS.
- TRAPEZIUS 1..4 LBS.

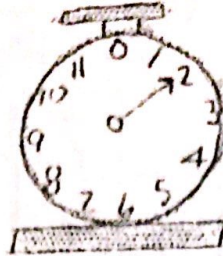
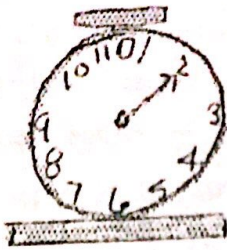


RUFFINI'S SPRAY ENDING CORPUSCLES ARE THE BASIS FOR THESE TRAPEZIUS REFLEXES IN RELATIONSHIP TO SKELETAL MUSCLE DISTORTIONS.

THE CONTACT TO ELICIT THE INVOLVED VERTEBRA WOULD BE PALPATION WITH PRESSURE INTO THE TRANSVERSE PROCESS, SPINOUS PROCESS NOTCH ON EITHER SIDE. WHEN THE VERTEBRA TESTED IS INVOLVED IN A TRAPEZIUS SKELETAL PROBLEM, THIS CONTACTED VERTEBRAL AREA WILL BE EXTREMELY PAINFUL TO THIS TYPE PALPATION. THIS PAIN LOCALIZATION IDENTIFIES THE INVOLVED VERTEBRA AS BEING THE SOURCE OF NERVE ROOT IRRITATION DUE TO THE VERTEBRAL MALPOSITION IN SUBLUXATION.

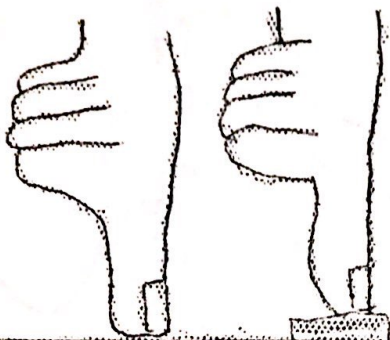
IN MOST OF THE TRAPEZIUS-VERTEBRAL ASSOCIATIONS YOU HAVE THREE CHOICES, AND OF COURSE IN OTHERS YOU HAVE TWO CHOICES. PALPATION OF THE TRANSVERSE PROCESS, SPINOUS PROCESS NOTCH, DIFFERENTIATES BETWEEN THE INVOLVED AND THE NON-INVOLVED VERTEBRA.

TRAPEZIUS PRESSURE SCALE

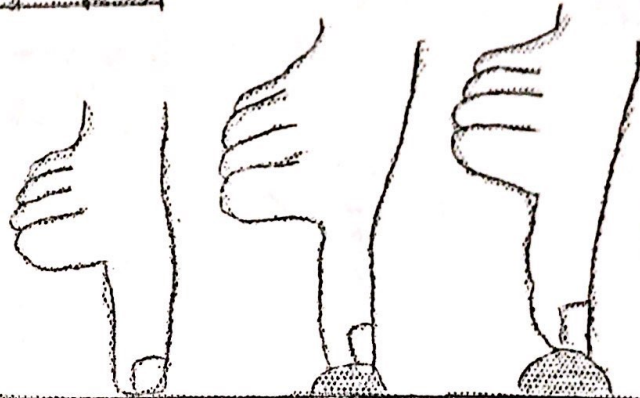


- TRAPEZIUS AREA 7...PRESSURE 1 LB.
- TRAPEZIUS AREA 6...PRESSURE 1½ LBS.
- TRAPEZIUS AREA 5...PRESSURE 2 LBS.
- TRAPEZIUS AREA 4...PRESSURE 2½ LBS.
- TRAPEZIUS AREA 3...PRESSURE 3 LBS.
- TRAPEZIUS AREA 2...PRESSURE 3½ LBS.
- TRAPEZIUS AREA 1...PRESSURE 4 LBS.

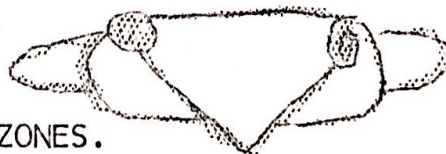
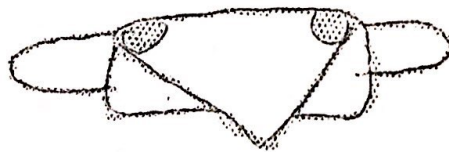
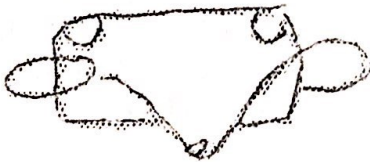
|           |     |      |   |   |   |   |   |
|-----------|-----|------|---|---|---|---|---|
| TRAPEZIUS | 1   | 2    | 3 | 4 | 5 | 6 | 7 |
| DORSALS   | 1-2 | 3-11 | 4 | 6 | 7 | 8 | 9 |
| LUMBAR    | 10  | 12   | 5 | 1 | 2 | 3 | 4 |



NO DULAR ACTIVE



REACTIVE



TRAPEZIUS MAJOR AND THE STRUCTURAL VERTEBRAL MISALIGNMENT: YOUR PALPATING THUMB CONTACTS A VERY FIRM AREA AT ONE OF THE TRAPEZIUS ZONES.

THIS DOES NOT RESPOND BY MOUNDING, BUT REMAINS FIRM AND PAINFUL TO THE EXACT PRESSURE DESCRIBED FOR THAT AREA. THIS FINDING IS RELATED TO A MUSCULOSKELETAL PAIN ZONE DUE TO A NERVE ROOT IRRITATION AT THE DURAL PORT AND WILL USUALLY CORRESPOND TO OUR CATEGORY ONE VASOMOTOR MAJOR. THE INDICATED VERTEBRA AS DETERMINED BY THE ZONE INVOLVED MAY NOT SHOW ANY X-RAY DIFFERENTIAL FROM NORMAL, BUT THE VERTEBRA BELOW OR ABOVE WILL SHOW A DEVIATION AND THIS SHOULD BE CONSIDERED IN YOUR ADJUSTMENT.

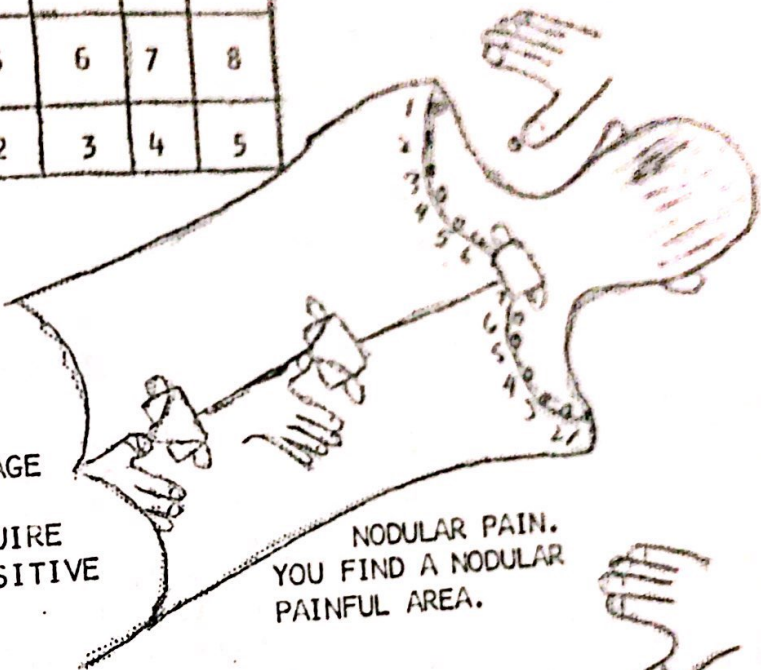
RUFFINI'S SPRAY ENDING PEDICLE IRRITATION PAIN SYNDROME: YOUR PALPATING THUMB LOCATES A TRAPEZIUS AREA OF FIRMNESS WHICH, AS THE EXACT PRESSURE IS CONTINUED FOR TEN TO FIFTEEN SECONDS, BECOMES RESISTIVE AND BEGINS TO PRESS AGAINST YOUR THUMB. THIS INDICATES A PEDICLE INVOLVEMENT. YOUR X-RAY OF THE INDICATED VERTEBRAL FIELD WILL SHOW A CHANGE IN ONE OR BOTH PEDICLES. THE PAIN SYNDROME CHANGE IS ONE IN WHICH THE PEDICLE IS SQUEEZED INTO AN OBLONG PATTERN. THE HALO PATTERN SHOWS THE PEDICLE THINNED AND EXPANDED OVER THE TRANSVERSE PROCESS. WE ASSUME THIS TO BE A BEGINNING MALIGNANCY.

THE TRAPEZIUS REFLEX SYNDROME  
ACTIVE TRAPEZIUS NODULE

|           |           |            |   |   |   |   |   |
|-----------|-----------|------------|---|---|---|---|---|
| TRAPEZIUS | 1         | 2          | 3 | 4 | 5 | 6 | 7 |
| DORSALS   | 1-2<br>10 | 3<br>11-12 | 4 | 5 | 6 | 7 | 8 |
| LUMBARs   |           |            | 1 | 2 | 3 | 4 | 5 |

ACTIVE TRAPEZIUS PALPATION.  
SKELETAL PAIN.

USE SUFFICIENT PRESSURE TO LOCATE ANY PAINFUL NODULE WHICH MAY BE LOCATED AT A SPECIFIC TRAPEZIUS AREA. MOVE FROM AREA TO AREA AND APPLY PRESSURE. YOU FEEL A MOUND, THE PATIENT FEELS THE PAIN. AVERAGE PATIENT WOULD REQUIRE FOUR LBS. PRESSURE. THIN PATIENT WOULD REQUIRE THREE LBS. CHILDREN ARE VERY SENSITIVE ALONG THE TRAPEZIUS AND ARE POOR SUBJECTS FOR THIS ANALYSIS.



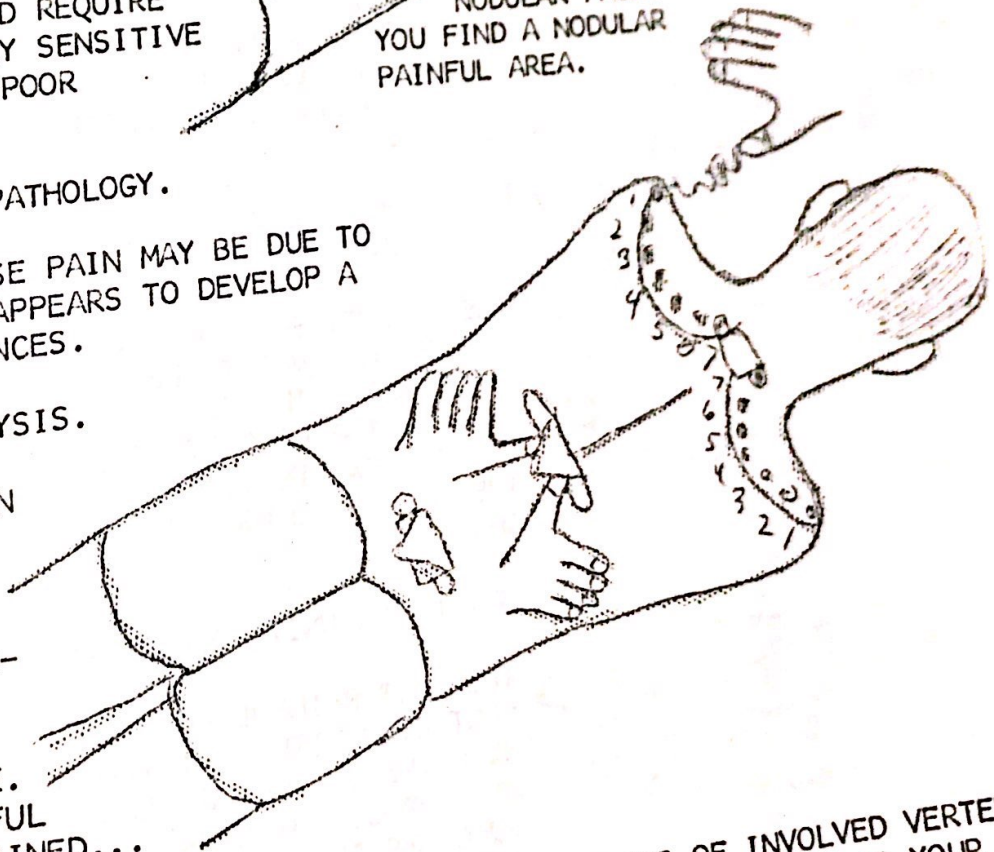
NODULAR PAIN.  
YOU FIND A NODULAR PAINFUL AREA.

TRAPEZIUS ANALYSIS FOR PATHOLOGY.

REACTIVE...OBSCURE OR INTENSE PAIN MAY BE DUE TO MALIGNANCY. THE TRAPEZIUS APPEARS TO DEVELOP A REACTIVE AREA IN SUCH INSTANCES.

REACTIVE PALPATORY ANALYSIS.

SAME PRESSURE AS DETAILED IN PRESSURE CHART ON PREVIOUS PAGE. YOU NOW LOCATE A SLIGHT MOUND, WHICH UPON CONTINUED PRESSURE AT DESIGNATED STRENGTH MOUNDS UP AGAINST YOUR FINGER LIKE A SPRING. IT IS NOT A NODULE. IT IS NOT NECESSARILY PAINFUL UNTIL FULL MOUNDING IS ATTAINED... PERHAPS ONE MINUTE TO MOUND.

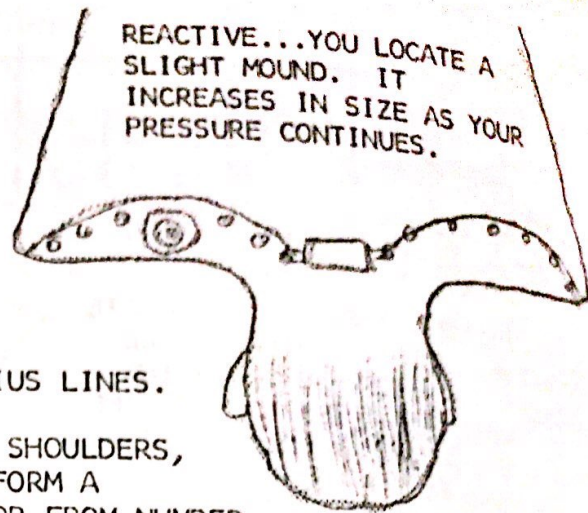
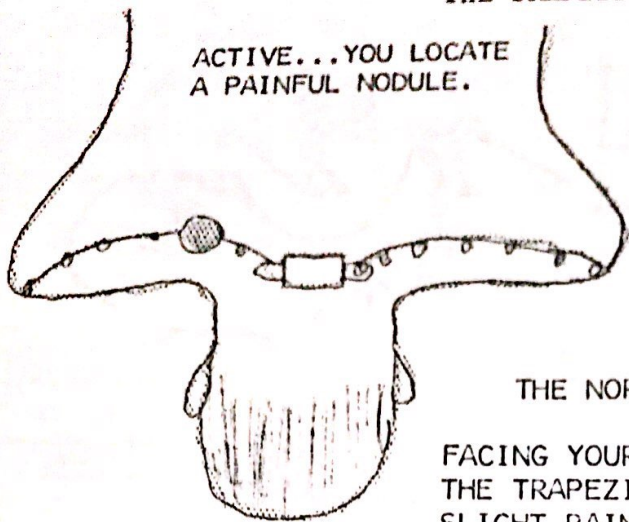


ACTIVE TRAPEZIUS...APPLY PRESSURE DIRECTLY OVER SPINOUS PROCESS OF INVOLVED VERTEBRA. PAIN DEVELOPS AND INCREASES WITH PRESSURE...NERVE ROOT EXCITATION. HERE IS YOUR ADJUSTING POINT.

REACTIVE MOUNDING. TEST INDICATED VERTEBRA BY BILATERAL MAMMARY PROCESS PRESSURE WITH THUMBS...SUCH PRESSURE ELICITS PAIN ON SIDE OF PEDICLE INVOLVEMENT. VERTEBRA THEN STUDIED BY PROPER X-RAY FILMING FOR PEDICLE HALO OR PEDICLE DESTRUCTION.

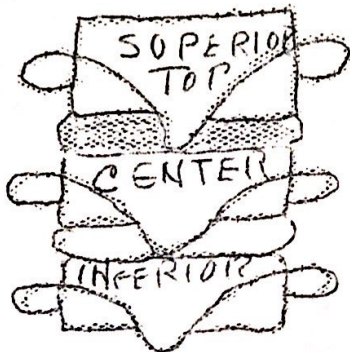
THE TRAPEZIUS REFLEX SYNDROME

THE TRAPEZIUS VERTEBRAL TECHNIQUES



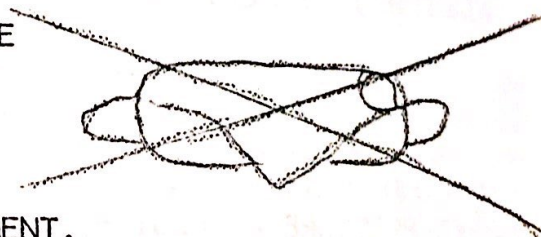
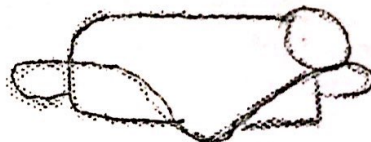
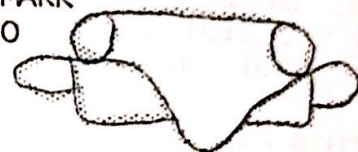
THE NORMAL TRAPEZIUS LINES.

FACING YOUR PATIENT'S SHOULDERS, THE TRAPEZIUS FIBERS FORM A SLIGHT RAINBOW INFERIOR FROM NUMBER SEVEN TO NUMBER ONE. THE QUICKEST WAY TO DETERMINE SPACES IS TO MARK NO. 7 AND NO. 1. USE A TAPE TO MEASURE AND DIVIDE BY NUMBER OF SPACES.

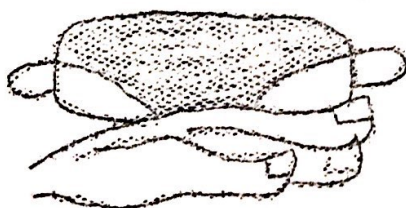


THE SKELETAL MOTOR UNIT SUBLUXATION.

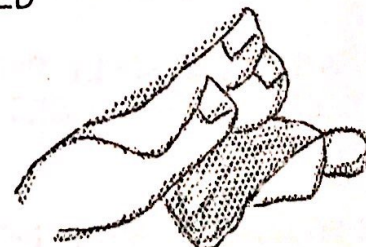
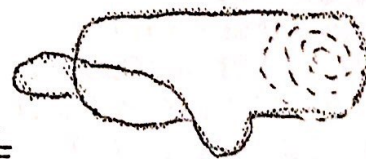
THE TRAPEZIUS PAIN NODULE ALWAYS INVOLVES THREE VERTEBRAE. THE TOP APPEARS THE LARGEST, THE CENTER NEXT IN SIZE AND THE MOST INFERIOR THE SMALLEST.



THE MOTOR UNIT ADJUSTMENT.



THE MOST PAINFUL UNIT IS CONTACTED WITH A PISIFORM OVER THE SPINOUS PROCESS AND THRUST ANTERIOR. MAKE SURE THE STERNUM IS SUPPORTED PROPERLY.



THE TRAPEZIUS REACTIVE SUBLUXATION.

THIS IS PATHOLOGICAL AS SEEN ON X-RAY. THE ADJUSTMENT IS GIVEN AS IF TO SEPARATE TRANSVERSE AND SPINOUS PROCESSES ON INVOLVED SIDE. THIS IS THE "X" ADJUSTMENT, BECAUSE FIRST THE RIGHT IS THRUST, AND THEN THE LEFT. THIS DOES HELP RELIEVE PAIN. WHETHER OR NOT IT DETERS PATHOLOGY IS YET TO BE DETERMINED.