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The phenomenon of indicator muscle change (https://epubs.scu.edu.au/cgi/viewcontent.cgi?article=3367&context=hahs_pubs)

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Document Type

Book

Publication details

Rolfes, AE 1997, The phenomenon of indicator muscle change, Anna E Rolfes, Newrybar, NSW. ISBN: 0646319752

Abstract

The transient loss of isometric muscle strength during a clinical assessment is called indicator muscle change (IMC). This phenomenon is used as biofeedback tool in Kinesiology since the nineteen sixties to assess neuromuscular stability.

The aim of the study was to find out if there was a linear cause-effect relationship between certain stimuli and the occurrence of indicator muscle change. This was examined in a blind and double blind setting. A distinction between concentric (CIM) and eccentric (EIM) isometric muscle test method was made. The results showed that the EIM were more sensitive than the CIM. The stimulation of sedation point of Spleen meridian elicited significantly more IMC than placebo. Mental focus on realistic anxieties elicited significantly more IMC than a neutral theme.

This allowed the conclusion that the circuits of motor control, which sustain muscle tone play an important role in the phenomenon of indicator muscle change.

Further, the question "What do clients think about the use of indicator muscle testing in their health care?" was examined. People who had experienced IMC in Kinesiology sessions were interviewed to give account of their experience and evaluate the assessment method. They reported that witnessing IMC in a Kinesiology session was of 'benefit to access their intuition', 'connect with their inner being' and 'bridge the gap between body and mind'. The skilfulness of the practitioner applying the method was seen as an important contextual parameter in discussing and interpreting test results.

In summary the study showed that IMC is a functional parameter of neuromuscular integrity, that can be used as a cost-effective biofeedback tool in the hands of a trained therapist to complement other diagnostic methods.

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