



Reflex Locomotion According to Voita



Why consider a program in reflex locomotion? Movement is not something that spontaneously develops in the vertical posture but evolves from lying on one's belly and one's back. The movement from back lying, to side lying, to knee support, to elbow support etc requires global muscular interactions that allow us to verticalize during the first year of life. Understanding these global muscle plays, identifying their deficits, and how to restore muscular synergy for ideal movement is the goal of reflex locomotion.

Reflex locomotion allows the practitioner to appreciate that movement is an inter play of the whole body. When we single leg stand what is the spine doing, what is the psoas doing, what is the contralateral shoulder doing. Reflex locomotion teaches us that the deficiency in muscle function and its effect on movement requires us to create alternative movements with a dysfunction in muscle synergy. For example upper crossed and lower crossed syndromes are seen as a response to pain and injury. They evoke a change in muscle tone, muscle elasticity, and muscle function during movement. As practitioners do we decide to stretch the hypertonic muscle group or do we strengthen the hypotonic muscle group. With reflex locomotion we can do both as we restore the synergy required for the muscles to move us in a balanced antagonism. Reflex locomotion allows us to restore normal muscle function by restoring ideal neurological orders as someone would repair the hardware on a computer.

Reflex locomotion according to Voita also considers that part of the muscles function that "Gray's Anatomy" and "Kendall and Kendall" never considered. Most of our discussion of muscles, their rehabilitation, and their role in movement only considers that muscle function moves proximally. However, because we begin to function as infants while lying on our belly or our back, muscles also function in a distally directed action. The pectoralis muscles pull the chest to arm, the tibialis anterior flexes the knee, the latissimus dorsi elongates the spine, these are muscular events not considered by the standard insertion to origin muscle function, but are roles our muscles play in allowing us to move. Dr. Voita elaborates on these muscular functions and utilizes the whole of the muscle's function in the analysis of movement as well as its treatment through reflex locomotion.

The principles and concepts of reflex locomotion allow the practitioner to view movement and muscle function through a new set of eyes with a strategy that allows you to think outside the box. It provides an opportunity to learn and understand:

- 1. Why Gray's anatomical interpretation of muscle function is insufficient.**
- 2. How and why muscles chain up.**
- 3. Why movement occurs before the foot strikes the ground.**
- 4. Why Trendelenberg's test may not evaluate what you think it evaluates.**
- 5. Why are closed kinetic chain exercises for the upper extremity so effective.**
- 6. What the development of the foot or the hand can tell you about the spine.**
- 7. Why the function of the rhomboid muscle group is tied to the tibialis anterior.**

In this program you will learn:

- 1. How to examine the patient according to the concepts of movement development.**
- 2. How, when, and where to apply reflex locomotion to treat a variety of conditions from orthopedics, to scoliosis, to multiple sclerosis.**
- 3. How and when to use the variety of reflex locomotion positions and stimulation zones available in treatment.**
- 4. How to facilitate spinal elongation through muscle activation.**
- 5. How to enhance external rotation function and strength of keys joints.**
- 6. How to improve core strength by activating the deep stabilizing system of the spine.**



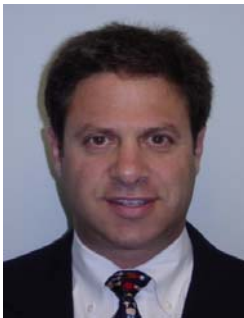
This program, based on the principles of Czech pediatric neurologist Vaclav Vojta, M.D. clarifies how, why, and where to administer the therapy of reflex locomotion. Through an understanding of postures and stimulation zones the practitioner will be able to rationalize the therapeutic intervention.

Outline:

- A. Introduction and Philosophy
- B. Creep stimulation Zones
- C. Creep movements and muscle functions
- D. Roll stimulations
- E. Roll muscle functions
- F. Examination of movement
- G. Application of therapy based on evaluation of movement
- H. Variations
- I. First position
- J. Reflex roll variations
- K. Lateral postures
- L. Problem solving and decision making



About the Instructor:



Dr. Richard Cohen, the first native English speaking practitioner certified by the International Vojta Society and the only one on the East Coast, has developed a program to help chiropractors and other manual therapists appreciate how the principles of movement development can be used in the analysis of the pain patient or the patient with movement disorders. This program will help attendees understand the principles of movement development and how these principles change our view of the musculoskeletal system and its role in movement. Your appreciation of movement and muscle function will be enhanced and changed by your attendance at this program.

