

Physical Therapy and the Performing Arts Ref 226

Steven Bruce

Good evening and welcome to later with me Jools Holland. This is of course the Academy of Physical Medicine. But tonight I'm bringing you 90 minutes of live CPD with a bit of a musical twist. As always, I'm really delighted that you're joining us through Facebook and through the website. But tonight for the first time, we've actually got a live studio audience. So welcome to all of you guys. Thank you for being here. We're hoping that they're going to make a bit of noise for us during the evening both before and after the show, as well as during it because I want to ask questions, as are you of course, the show won't work as a musical feast if I didn't have some musical guests. So can I also introduce to you the all too funny Eliana who collectively are known as Coda duo. Welcome, guys. Until now, please feel free to kick me later if I pronounced your surnames incorrectly. I'm very sorry. But but no until there are professional group they've played in the Albert Hall. They've played on all sorts of places. Ronnie Scott's you know, they're a seriously good group and it's a real treat to have them in the studio with us. Clearly the CPD isn't going to work if I don't have some people who know something about osteopathy. Well, obviously my studio audience know lots about osteopathy, chiropractic and Sports Therapy. I'm not in that elite crowd, I'm afraid but I've got two great osteopaths with me this evening. I've got Ashley Stafford. Ashley is an osteopath about 30 years experience. He's a professional singer himself. He used to be the professor of voice at Westminster College, I think and you'll correct me if I'm wrong on that. But he treats a lot of singers and a lot of performers and he's here to talk to us about how we can use our therapy with Coda duo. I'm also joined by Lawrence Kirk Lawrence. I think he's got nearly 40 years experience as an osteopath. I first came across him when he was setting up for the osteopathy course at Oxford Brookes University. And yeah, he's a he's a great guy apart from playing rugby, which makes anyone a great guy, but he's closely associated with the Royal Shakespeare Company, so knows lots and lots about treating performance. So let's go and meet those two. I hope I didn't do any disservice and these introductions. I'm not going to shake hands because as I said, I'm sick this evening, I haven't got I haven't got COVID in Sydney, so I'm not going to spread the bugs. So tell us a bit about your background beyond what I've just learned.

Laurence Kirk

Well, not too much more to add really apart from the fact that obviously, I treat musicians gently as part of the Royal Shakespeare Company, and performers. So I'm used to all the stresses and strains of dealing with their stresses and strains. I suppose. I am right at the outset. Musicians are human beings too.

Steven Bruce

So actually, osteopathy, chiropractic sports therapy, physiotherapy, the therapy is the same. It's just the problems they bring to the party,

Laurence Kirk

and the emphasis that you place on it. So you know, as an osteopath, I use osteopathic principles. But the osteopathic principles can be recognised by physiotherapists or chiropractors in their in their own way. So there's a similarity across the board.

Steven Bruce

Actually anything particularly specific on you've been on the show before to talk about the voice. So people will probably recognise you from that, but nothing particularly unusual about treating the voicing performance.

Ashley Stafford

What I find is the, for me, the interest lies not so much in treating voice, although sometimes that's absolutely necessary. In other words, there is a direct approach you can take to the issues around the stresses and strains in life and how they manifest in the throat muscles, and the alignment of the legs. That isn't always the direct approach that I take quite often as I was saying to Lawrence earlier. You might find somebody, particularly at the moment actually after COVID COVID, long COVID repetitive COVID Or just coughs and colds. Somebody comes in in and they may say I just feel weak. And I say does that affect how you're singing? And they say, well actually my stomach was not as good as it was the top registers gone. I feel a bit rough around the edges. And it's the the role then is the role of any osteopath, which is so where are those stresses? range in that particular body, is it that the low back has become vulnerable? Has anybody else noticed how many people after COVID? Say they have low back problems? Interesting.

Steven Bruce

They're all they're all nodding. And

Ashley Stafford

that is it is that a question I ask is that just because when people have gone through viruses and viral load, that the whole system is a fascial system seems to be very vulnerable to that, and therefore they're not being held together properly? Or is it actually something special about COVID? I don't know. But certainly the situation for the singer is to get that midline working again, so that the energy that you're producing comes up through those further folds in a way that is going to be not damaging for our marriage, that person and so they can then re assert their individuality through the music that they want to say. And I think we're going to hear that very soon. So shall we have individuality?

Steven Bruce

Shall we get into the mood? Yeah, let's let's give Coda duo an opportunity to show us what they're made of. Let's go over to Cody do you

go to rehab and I said no no no I come back No No No daddy things sound fine just try to make golden Golda rehab dealing get a doorway job go to rehab I said no no no yes I've been lacking when I come back you know No, no

I ain't got my daddy things just go to every half hour god no I'm gonna I'm gonna lose so always keep he said I just did this yeah baby Golda rehab black God God daddy things

Steven Bruce

you had a little bit of time with the performance before we came on air didn't you? So you knew a little bit about them? Should we go over there and talk to them specifically about problems that relates to them that you can elaborate on?

Laurence Kirk

Yeah, we can do

Steven Bruce

so usually we start with the wrecking ball.

Laurence Kirk

I think we'll be rude and start with deal. Right?

Steven Bruce

Okay. I'll tell you I play a bit of guitar myself very very badly but I'm not as good as I'm not as good in my posture as you are deal but immediately you look at a guitarist and always standing one side. My case always standing like this as well.

Laurence Kirk

Yeah, that's a very important point. When we're training we were trained to recognise as osteopath somatic dysfunction. and you've got your acronyms or in your mnemonics a tart is one that's commonly used. And the ag and tart stands for a cemetery. And the interesting thing about musicians is they are by their very nature, often a symmetric, as in their, they spend hours and hours hours, using an instrument in a particular way, which creates different tensions and even builds muscle on one side compared to the other. So although I said earlier on that musicians are human beings, they're a little bit different, because they're spending hours and hours repetitively doing a certain certain action. And as a result, when you're trying to evaluate them, you can't make any judgments based just on asymmetry because they are already asymmetric. So you got to make a judgement and a compromise, I suppose, as well. And this, I think there's a paper published not too long ago, just logging all those asymmetry. So one love example was if you're a bass player, double bass player. And you've been doing it for years, your fingers span is dramatically increased on if you're right handed down down here. Oops, interesting. And then obviously, the guitarist as well, they find that there's a difference in your mobility. And the thing is man, left compared to right, and so on. We were talking about the bass players. And the difference between, say, Peter Hook down here, up here, so and again, that's level 42.

Steven Bruce

They're all too young musician comes to you, presumably, you'll be aware of this, but others ought to be aware of the fact that actually a guitarist doesn't play his guitar in the same position as every other guitarist, and maybe you need to know exactly how he does

Laurence Kirk

that. Yeah. So the best way of doing that is to watch and or you demonstrate as you just do, yes. Which is great. So I mean, you can you see, first of all, whether you're right or left handed and, and so, but, but the most important thing is how you feel you're everything's a

compromise. But if you feel pain free, that's pretty good. But I suspect you might have moments, as we discussed early on, we don't

Dhil

Yeah, absolutely. It's always, not always an obviously in the moment when you're playing your adrenaline joining. But often afterwards, when you've when you then relax, and you sort of work out where you're where you've been compensating. And yeah, that's when you kind of feel where the strains were.

Laurence Kirk

And I think we were saying earlier on as well, actually, I was chatting to you earlier on and I move over here a little bit, let's

Steven Bruce

just move on to the stage. Yeah, the cameras can pick all this.

Laurence Kirk

What we're saying is that it's a whole body thing, and you can't be too minimalist about it. Just treating your right trapezius would be pretty minimalist, and you get some relief for a short period of time, but quite often, they're a little compensations elsewhere. And I think Ashley was using an actor to treat treating someone's pelvis and finding that that partly sorted, sorted voice problem. So just compensations again, will come on to your pelvis. Yes, yeah. Okay. Yeah. So do you want to add anything to that?

Ashley Stafford

Only that just to amplify something I've already said, which is, the implication would be that if they're in your practice, they're in your practice a reason there is a reason. So therefore, Adele, I think plays within himself when he's playing. But when he got to do that for a long time, excuse me, they're gonna get some compensations which break down. And that's mainly what we outside trauma, what we're seeing, isn't it, compensation patterns that become ingrained and embedded and sort of the body's natural oscillation, back to whatever is a comfortable centre is prevented. So as you were saying about your left leg, and if you're walking around the home like that, because your left leg is decided is, it's not participating anymore? Yeah, that's a good place to start. But I think that would be something that would all be recognising. But it's in what context what Lauren says, is recognising the fact that the violinist actually only comfortable when they're in this position. And then when they put the violin down, they actually are locked solid, there is something that we need to address while bearing in mind that that is where they want to be for eight hours a day.

Steven Bruce

We didn't actually talk about this earlier on but you get low back pain and right knee pain and knee pain.

Dhil

Yeah, I've got I sort of flipped between a few different instruments. So I play guitar, which is obvious, a lot lighter and acoustic compared to a bass for example, is a the weight difference is quite quite different. So I noticed a lot of changing instruments and particularly with bass because a lot heavier. That, you know, I feel like the strain on my left shoulder is definitely more present there. And I've tried to compensate that. I've got like a slightly wider guitar strap to sort of dissipate the weight of it across my body. But then I find like, particularly as we were saying earlier, like how Having having not had the opportunity to play as regularly

as as we did two years ago, that coming back and coming back into it, it was just like I didn't notice where this strains were. And then a lot we've just been talking about, particularly my left leg seems to be sort of anchoring my whole body because it kind of locks into place where I can just feel like I'm relaxed on stage. And I only know it's awkward. Like I said, when he, when I start walking again, I've kind of just my knees been locked for 90 minutes. So yeah, it's interesting that I only really realise it. I don't really feel it in the moment, but and then afterwards is when I feel the pain.

Laurence Kirk

Yeah, interesting. And I think the other thing to point out as well is that in an ideal world, of course, you're putting yourself in a situation where you are subjecting yourself to stress and strain, physical stress and emotional stress as well. But in an ideal world, you might say, in some sort of Utopia, we don't need to do that just have a nice, relaxed time and don't a bit, just like a sports team, you want to compete, and you want to play Absolutely. So you've got to, you've got to find a compromise and a point where, you know, there are stresses and strains, but you manage them. And that's, I suppose that's where we come in as well.

Steven Bruce

So when it comes to managing deal, obviously, the one thing you can't do is stop playing it down to stop playing the guitar. So how do we how do we get him to overcome these problems that he's mentioned? So for our particular that need that knee problem, I could see being a cause of other problems later on.

Laurence Kirk

I mean, there's, there's, there's an immediate observation, which you've probably noticed straight away when you look to deal as well. So we do make me feel sad. hyperextending knees? So if you if you if you look at his left knee hyperextend. So yeah, that could be an indication, like just be a structural thing, or it could be an indication that you're maybe slightly hypermobile as well don't have done the bite on the scale yet. Do that as well. But But you see, when you lock your knee out, it actually bows back. Right. So that's that in itself can cause a few problems. Yeah, may may mean that because your, your left knee is maybe a little bit more mobile. As a consequence, when you're bracing but you wait through it, you are recruiting more of the musculature around the knee in right to hold it steady. Okay. And because of that they fatigue. And because they fatigue, eventually you'll you'll feel some discomfort. Yeah. So yeah, there's all sorts of things that you could do, for example, around that might be recognising it and working on some of the the quad strength, for example, in doing some exercises that might actually increase the tension in those muscles to compensate for that. Are you white Nationals last year, are you more mobile than average?

Dhil

It's difficult, I can tell you with that with optic are dropping particularly like it's a lot of sitting down, like driving to gigs, many hours in the car, and then it's then waiting to go on stage. So it's as lot of stationary times and as our job but then in the week when we're not working we try I tried to alleviate that by you know, going for walks and stuff like that. That's the that's the most mobility I can really get.

Laurence Kirk

Yeah, that's that's your as me Miss phrasing the question to you really? Sorry. No, sorry. I've got my Aussie Aussie pass head on. Yeah. And I was thinking about mobility in relation to joint mobility. Right. So in terms of flexibility, we have always found it difficult to or is it easy for you to, to get into certain positions, touch palms to the floor,

Dhil

and I'm not that flexible?

Laurence Kirk

Which case, then we got? Yeah, we can maybe conclude that he's he's hyperextending. These aren't related to hypermobility, which is good for him? Because obviously, that has a there's a whole raft of problems in itself. So yeah, so that's, that's, that's one issue. And then obviously, you're, you're standing a bit, sort of, yeah,

Dhil

I feel like I've naturally got a sort of posture that lends itself to compensate for the weight of having a guitar or bass hanging off their shoulder in particular. Yeah. So you'd probably say, in the way I hold myself already, like, it's that, you know, I've ever tried to compensate when I'm just standing up straight, but it feels more relaxing to do to sort of, you know, drop my shoulder because that's normally how it is. Right?

Laurence Kirk

Well, that's right, and that and that's just the habit that you've acquired. Yeah, it helps you do the job that you do. So, you know, I may be wrong of me as a nun guitarist to start giving you tips on how to play guitar. But obviously, the other thing is checking and seeing how things are responding as well. So we are stills permission before for if it's okay to touch you, so if I'm just gonna go in I always Yeah, that's okay. Yeah. So, so, obviously, you've got a shirt on, I'm not going to get into take your shirt off unless he really wants to. You don't want to do and obviously, all different kinds of shirts, but as as people involved in therapists involved in physical medicine, we're used to touching our patients. And what you're picking up from that is your you've got a library of normal and you're comparing him to your library of normal I suppose. making a judgement and, and also that I've got my pressure pain Algoma to hear as my thumb. So basically, if I, if I, if I press into certain points, and I can't see your face, but if those points are a little bit uncomfortable, then usually there's a little recognition in the facial expression. And those are quite common points. And yeah, there's sort of trigger point areas across the top of the shoulders. And I'm just focusing, I'm sure Ashley is going to look more holistically at things. But just in that upper triangle to begin with, I started looking, and immediately you can, you can feel there are tensions relating to that asymmetry posture as well. So, and lots of the examination procedures that we use are not reliable, I suppose is probably the best way of putting it in that many studies have shown limited reliability. But if you add them all together, I suspect the reliability is greater. So we do our motion testing and look at range of motion, and so on as well. I won't go through because you are aware that already, but But recently, they found that if you add a little bit of overpressure, to the motion testing, you might get more of a response in terms of more more insight into what's going on. So view side bend, right, and sway bend your head to your right, right ear down to right shoulder, but less Yeah, so I put a little bit of overpressure on, and at which point if deal then complains of pain. And that's a good little clue. And same way. So rather than than just doing active mobility testing, I'm adding overpressure into it as well. And apparently, that is reasonably reliable, according to some studies, but yeah. And then basically, what you're trying to do is provoke a little bit of discomfort in order to work out what's what's going on, and take what was actually what deals said already, and correlate it with what you find. And again, it's teaching you to suck eggs, because you will know that. And musicians are just like any other human being as well. So there's no, there's no huge difference in what I would do. But I would add that I once had a locum come into my practice. And one of the actors came in from rehearsal with a I think it was an upper thoracic issue. And the local who had worked

with actors before, told them they had to rest for six weeks. Which wasn't ideal, really. But then you're so

Steven Bruce

you're resting for six weeks with normal practice.

Laurence Kirk

With pens, what you mean by resting it when they're not employed? Yes. Great. So I mean, yeah, actually, you want to, I just picked out one one element in that knee, do you want to add anything?

Ashley Stafford

I'd be very interesting to just examine him to what one loves doing, isn't it when it comes down to it. And the thing I noticed about doulas he plays within himself. And I noticed that also about that she sings within herself. And that's not always the case with performance. The it's a very contained and very German so good mutually feeling between you, they're not leaping around the stage, they're not throwing the guitar around, or I mean, you might do that later. And you're not around is not singing outside of herself. So this they are actually very well balanced. performance in that respect. They've got a style of singing and performing, which is actually very comfortable for them. Within reason, I would say just want to just close your eyes for a moment. Yes, it's quite stable, actually. Which is nice, not just breathing and I'm just palpating the posterior diaphragm connections, ugly, and just put the feet together if you would. And this is just normal. Now there we see it. The moment he puts his feet together, we have the compensation the pelvis completely obvious. Its side bending right. And slight torsion, with the right anterior side is just let your right knees sag forwards keeping your foot on the ground. Just let it sag a bit more. Go on. Yeah. So sag sag, sag sag. Yeah, that is low mid lumbers and on them to come back and sag on the left. Yeah, so his mid lumbers actually taking a lot of strain. While he's said the position which is going down through the leg, it's actually also creating a rotation and a side bending. It strikes me which over time has allowed these muscles on the sides of the paraspinal muscles. I think they're called to be not exactly working as well as they should. So that would be a starting point to think well, what's happening is lower triangle On here in relation to what's happening in the upper triangle, and what influences the guitar got to play within that. So there's a lot as you say, there's a lot of retain tension through here, there is a natural thing he's doing, just put yourself in a playing position to might get this. See where that goes. So probably immediately we're going to see an explanation for every single thing that I've observed with him not playing. So you're going to be playing, you can play something just to cool. Down dry shoulder, much more active as a rotation is to stabilise that. So when. So that's wonderful.

Steven Bruce

Is he going to be a repeat patient though? Because when he's playing actually, I don't know if it's all the time there'll be you're kind of tied to that mic. So he can't move around with his he's got to stand there, which is going to encourage that. Yeah, that stance.

Ashley Stafford

That's another thing that might protect me singing into a mic and singing without my playing with my players out, am I actually also very significant,

Laurence Kirk

that divine justice. Actually, there's, from here, it's also clear again, apart from you, like receiving I'm pretty sure PCs as well deal but when you're standing and playing, you're quite lordotic in your spine, curves forward, lower back curves inwards and forwards. But when you play and you do tip back slightly and you and therefore you facet joints in your lower back will then compact right and proximate and therefore you, you're in effect, you're stabilising things by by doing that, but at the same time you're loading them. And that's a recipe for them to become irritable over a period of time as well,

Ashley Stafford

I'd say that I think you know, you You're in good physical shape, you end up carrying extra weight. You're young, you're you know, got a lot of constitutional energy. So

Steven Bruce

remember, relative thing.

Ashley Stafford

Okay, so the thing to bear in mind is if this if this became problematic, what would you what would the device be because it is it is meant for us is midterm lumber pivot is not working properly, there's when he is doing his walking, he's going to be walking in a certain way, which then might actually be problematic in the future. So it's the same as the more

Laurence Kirk

well that then that goes on into treatment, obviously, and, you know, self treatment and exercise and so on just knowing what you what your issues are. Yeah, is the first step really. And then,

Ashley Stafford

I mean, that's something occurred to me whether because playing the guitar is a technical business, because you have an instrument, you have to address it. So how you address your instrument and instruments is absolutely quite, it's really profound. And as you pointed out earlier, like, different guitars have different solutions to that problem. But does it ever, if you knew, for example, that that was going to potentially create a problem, and it's already gone a little bit of a problem? Because it's stiff? And would you consider adapting your technique slightly?

Dhil

I don't think I consciously do it. But particularly with my leg, for example, if I'm obviously feeling like, as I mentioned earlier, my where my, where my knee is, it kind of locks into place, it's almost like an anchor. If I start to feel that, then I'll obviously just almost like swap legs on that side instead. But that's what I'm doing in the moment, I don't know, as long longer term sort of fix what I could be doing better in terms of a hold of myself. And

Laurence Kirk

there's an obvious one as well do that have a soft left knee? Because you've you just go back into interlocking it. Yeah. And if you had if you softened it slightly, that would that would make a difference. It puts more load on the muscles in the front of your thigh. Yeah, but and they might just tie a little bit but it's better for your knee right and probably would result in you having fewer issues with the knee is interesting what you

Dhil

said about what I didn't realise my back was sort of bending inward. So not sure how to sort of maybe lean forward or sort of gain the weight.

Laurence Kirk

But there's, there's a, there's a there's a good one and that's the contraction thing with your transverse abdominals. So if you when you're not singing, because you can't do when you're singing, but if you're not seeing if you just suck, you umbilicus in towards your spine, right, you get this sort of CO contraction going on, and it actually braces you a little bit as well. So you have a go, if you so you're not trying to you know, try and bear down and show you six pack off. Basically just trying to suck you umbilicus in towards your spine. We've put your thumbs on either side of your spine like that, right? And then as as, as you suck your umbilicus in, you should feel the muscles in your back. Just tight. Yeah. And actually you can use it intermittently during the performance as well. And that sometimes just takes some of the fatigue out

Ashley Stafford

and driving. Yeah, right. So I think driving as something I do a lot myself bizarrely driving, but also, just, as you just described, draw the umbilicus towards the spine and you find yourself sitting up better. The lumbar spine is much less loaded.

Laurence Kirk

Yeah. And it's just a little trick that you can you can

Dhil

get into a habit of doing that sort of, not consciously just kind of,

Laurence Kirk

if you try and sing when you're doing that, yeah, that's gonna be really difficult when you've got quite entertaining,

Steven Bruce

yeah. The only real technical question for you of lads watching online and that has said that it's not just the weight of the guard guitar, but it is the neck dive and balance.

Dhil

That's very well, the guitars has obviously is like a plank of wood. But the actual, if I maybe show you with the bass, for example, you see it, you'll see how much heavier it is than then than a normal guitar. But like, for example, you can feel I don't know, if you want to just hold it, you can feel that the neck is heavier, yeah, then the body. So you actually have the neck sort of pulling down towards you. So you're kind of countering it by actually holding it up, as well. So that often depends on the different guitars. And obviously, with the bass guitar, where it's got a longer neck, you've got a longer piece of wood here, which is obviously pulling a wave down towards the end. So you're actually physically have to hold it up. Which is what flat metal? leaves them? Yes. Yes, very good point. So

Steven Bruce

should we turn to Anna? Well, one thing I immediately noticed about Anna, she's got a lot more of this pelvis thing going on the new kind, of course, it's trying to be a singer can be much more easily balanced while they're singing. Potentially. Yes.

Anna

Can be a lot more mobile as well. Yeah, yeah.

Laurence Kirk

Yeah. Because you're not using an instrument. You're, you're more symmetrical in many ways. But obviously, it's

Ashley Stafford

good to point out she is an instrument.

Steven Bruce

But yeah, but did you bring any problems to the party this evening?

Anna

Yeah, one, which was, I guess it's probably more of a repetitive strain thing. And I'm right handed to hold the mic with my right hand. So even if I'm, even if I'm have a radio mic off, you know, whether it's on the stand or not, it's here all the time. So I get a lot of numbness in this arm. And I find that when I swapped to my left arm, because I'm not very good ear. So I tend not to bother with that. I'm not very good with my left hand. So yeah, my right hand definitely,

Laurence Kirk

before the numbers starts to come on, then in a performance, if you will, honestly, it

Anna

depends. It depends on the day, or what I've been doing, really, especially if you've had a long drive to tend to drive. Yeah, sometimes forget to use my left hand with the steering wheel. Yeah, so I'm using my my right hand all the time on the phone, that sort of thing. So obviously, the more I'm doing in the daytime with my right hand, the more and I sit on a gear because I do have to kind of shake it out and stuff was on stage.

Laurence Kirk

We haven't we haven't spoken in any detail about your past history, and not that we're going to, but have you had any previous trauma or accidents affecting your neck and he with flashes or any falls anything at all that's affected you before you

Steven Bruce

answer that? Sure. Your hair is ruffling the mic and I don't even know where the mic is. And I'm not gonna go rummaging.

Laurence Kirk

Yeah, so if you notice, in the past, have you had anything that's affecting you in that way? Not that I'm aware of. Okay. You would be aware of it obviously. From behind? Yeah, no, it's just it's just if you've got that susceptibility to numbness when you're holding your arm out, it might mean that the nerve has previously been sensitised. And that was all. So yeah, but uh, position wise. So you're putting us stretch through some of the nerves, man damage your arm anyway. I'm suppose again, you just bear with it only most of the time. When you when you've got it?

Steven Bruce

Could you seem with a boom mic? Or is it part of the performance is using the microphone? It's

Anna

not for me. I could but I choose not to.

Ashley Stafford

Just try to be me. So that and I'm done with the audience think the same, but the problem you're presenting is an exacerbation of a an everyday life problem. Yeah. Very right sided. Very. And that's a problem that comes up again, with patients all the time. When the as far as you are, as a singer, you as you said earlier, you sing within yourself. And you're actually very, when you're singing We can we don't see very much strain, we're going to go into not doing a Mick Jagger or anything like that. However, the things that interest me as a thinking of you as a singer, as opposed to a patient, but potentially a patient because you had problems which were relevant, will be the issue the relationship between the voice production on a ongoing basis, whether it's an actor or a singer. The relationship between the voice itself the sound the The breath and how your body accepts that breath. And then obviously, the structure itself. And how that is supporting the process that you're engaged in. That process might be driving the car. But as it happens, we're talking about singing. And one of the things that having a mic doesn't help with is the fact that you're, though you're, we were very communicative. And I felt I don't know about the audience, they know better than I do, because you're singing to them. But you're actually very communicative, in spite of the fact that you had a microphone. So the microphone actually is part of your performance. That's my friend. Yeah. And it's very much part of your performance. And the thing that I would say is something that could be watched out for and it's not necessarily for you, but in general, is what happens to the singer, as they take that initial breath in relation to what they're about to do. Is there going to be a particular thing in cricket, it was called the, what is it the trigger, the trigger movement, the trigger movement of the batsman. So there's a trigger movement in singers very often, which is a tensing of the neck, a tensing of the throat bizarrely, and then a locking of the pelvis. So they actually set off to sing is possibly, I'm going to use where technically, though, I don't really believe in technique as far as singers. They knew how to do it when I'm born. And they're just somehow forgotten. So we need to remind the body what it really knows. But that trigger movement towards the to the right microphone has the potential for creating strain and in the anterior throat, as well as locking up the occiput, Atlas and opposite dipole complex, all of which is inhibitory to the free flow of energy through the body. And I know you have confessed that you don't use the whole body to sing. And that's the style that you're singing. And it's beautiful. There's nothing that I would ever suggest I wanted to change about the way you sang. Unless you said to me, I want to sing without a mic, and I want to sing Puccini, in which case, you'd probably have to change quite a lot. And there's nothing to say your voice is not capable of singing patootie it's just you don't have to do it. But that's okay. Because you don't want to. But in terms of singers, say, for example, that do, and this goes to the actor, as an actor who's simply, let's say, a stand up comic, and you're using a mic the whole time. That's a very different thing for being on stage at the RSC. And the way the voice is used, the way the body is used, becomes much, much more significant. And that's, you know, circumstances and exaggerates, therefore, certain predicaments that we can set ourselves up in. But as far as Anna is concerned, I would normally say to a singer, are there any elements in your performance that you would that you struggle with? Is it stamina? Is it range? Is it dynamic? Is it just physical? I get really tired standing, for example. And having asked me that question before we started, and the answer was, No, it's just fine. Which is great for me to be talking more hypothetically, necessarily, then, specifically, although it would be interesting to check out

your balance of a head and neck in relation to the upper body because you do because of the way she's performing. She's definitely singing from about here upwards.

Laurence Kirk

A hand in the way as well, from here down if you if you're watching, there wasn't too much movement, whereas if you were singing Puccini, that'd be a hell of a lot of movement.

Anna

It depends on the on the gig on the solace, how much breathing how much effort I'm

Steven Bruce

going to ask if we're in a small environment here presumably you do some bigger gigs we're probably your belting it out a little bit louder. Yeah, yeah.

Laurence Kirk

Especially a noisy room as well as when they get

Anna

rowdy later.

Ashley Stafford

What effect does that have on your overall sense of well being and

Anna

often I find again, I've said to you earlier, if I haven't sort of warmed up, it's more physically than sort of vocally if I haven't warmed up I find myself getting really tense, so tense shoulders, quite a tense throat and then that, you know, in the long run kind of, you know, I'll often go home sort of with an aching head after that, be that from just the volume or just from the from the pure sort of tension. But yeah, I do find myself if I'm, if I'm bouncing from trying to hit really high notes, I find myself really tensing to do it, rather than sort of relaxing into it. Whereas obviously, as someone who did earlier, I'd be a lot more relaxed into singing because I'm not putting in you know, I'm not putting in a great deal of effort. I'm just letting the voice sort of do its thing.

Steven Bruce

So we had a plan for what we're going to do this evening, but it's occurred to me and apparently seven people several people have asked this as well, having been told all this by Ashley by ash in there, Lawrence, can we get you to do another one of those songs you see whether whether anything has been said helps? Yeah, cool. sorry

you got to go get angry at my honesty knowledge rather than I don't do too well with apologies

because someone call revelry god I just need you know I know that I made those headaches maybe once maybe myself just need Masha Jensen is it too late is it too late? Take every single piece of a blade if you want me to show you know that there is no winner someone else game for two. I go I go and they span the truth. And we both say the word is it too late now to say sorry is it too late? downs

Steven Bruce

so let's let's give the the band a little break from being poked and prodded. And thank you. So did you notice anything from from that performance?

Ashley Stafford

In that moment? Yeah. What does bending his left knee

Laurence Kirk

he was definitely he wasn't wrestling with our habits. And he neither.

Ashley Stafford

Whether that was the music, that particular number, or the deliberate

Dhil

point that I was gonna make me is at least for me, like keeping tempo with either one can often add a little bit of strength as well. So what was obviously relaxing my left foot there to actually probably why.

Ashley Stafford

That's why it's more about the style of the song. Yeah. But I think it's interesting to think about how as an osteopath, I personally would be looking at a patient who I knew was coming to me. Because as a singer, they were having problems as opposed to as a an A to a another patient who didn't who said that that's just my back hurts. So the sorts of things that my might be looking at, which might be useful to hear or discuss. And I don't know about you, Lawrence. But if I think about the body's midline structures, if you think about it, are very few midline structures. They're very few things that operate actually in the midline. So you've got a cranial diaphragm, your falx, got your Volmer and you've got the folds. Then you've got the central tenant of the diaphragm, which of course is we know is biased, and then with better luck, who've got the pelvic floor, which bill up meets in the middle? So if these structures as these forward for diaphragms are operating successfully, and functioning effectively, very often, you know, you're OIC, you're dealing with a pretty straightforward situation. Then you come up against the fact that perhaps somebody's got a very, very well rough voice, and it doesn't cracks all the time. And I was just this case history that I can remember, I won a case, I can't remember the history, I remember the case where a young girl was sent by her singing teacher. And she simply put, she has growling. And every time she went up to a certain pitch, she grabbed this incredible break and the voice and so all she did was growl the whole time. And the singer was very puzzled, her mother was very puzzled, because she really loved singing. So at that point, I thought well, are the folds actually able to accept the energy being offered to them from the breath flow, and generally palpated, the cranial diaphragm, is relationship through from the base of the cranium down through the throat structures and onto the diaphragm. And it was really interesting to note that the the larynx itself as a structure was really biasing Off to the left, as a real strain, pulling that head, that mid cervical area off. And the interesting thing was, when I've questioned her about it, she had actually had a blow to the head, not by her parents, but by some boyfriend or other had actually had her head smacked on her that she therefore was able to bring her head back to the midline. But the larynx was twisted. And by working through those internal structures, and then balancing the other, the external structures to that her voice changed, she was able to be much more coherent with the way the footfalls are working. So that's it. For me working on looking at the midline. And its integrity is a really important thing. In that respect.

Steven Bruce

We've got a couple of points coming in from Simon. The first one is a technical one, he's asked us all if we can keep our hands away from our mouths, because he's lip reading. And it's difficult for him to see what we're saying. So if we could stop doing that great. And I'm thinking behind Rana, not to have the microphone in front of her mouth, but we'll work on that with camera angle. Simon also said somewhere here. He said, If it was him, he'd be working on the singer, sternum and releasing the ribs and then working on the diaphragm. Yeah,

Laurence Kirk

and I think the important thing to point out is that the remit essentially is evaluating and we can go on to treatment as well. And mentioning treatment, my approach is obviously going to be a little bit different to another person to you as well, actually, but looking at things from a purely structural point of view. Not that you ever do look at purely structurally, there's interesting with singers, and that when you have a microphone in front of you, invariably, you're jutting your chin forward. And if you're Liam Gallagher, you really are jutting your chin forward. And that sets up all sorts of tensions in the front of the neck, obviously, where the voice is directly affected. But it also compresses the junction between the cervical and thoracic spine. And interestingly, just releasing this, the CT junction or the CD junction, which to your preferences, sometimes has a remarkable effect. So much so that I once treated an opera singer, who, not being a defined voice specialist, but he did. This is one as a student, he sang some scales and mentioned that he was tight tense. With the tutor, we worked out one or two things that needed addressing, worked on the city junction released the CT junction, like saying scales immediately afterwards. And it was full. It was, I mean, again, as someone who's probably tone deaf, I could I could recognise the difference. But yeah, so I my, my one thing again, that could you could address is the is the height of the microphone and how close to the microphone you you I know that affects your performance as well, to some extent. But it's the same thing across fertilises with those of us who work in offices and drive a lot, where we all tend to push into it. And it's just the simple thing of bringing your chin in, balances up some of that asymmetry as well. So it's a simple thing. But it's often very effective. Yeah, so it's the voice. I'm I'm looking at the whole body, but from a from a structural perspective, like focus very often on on the on that sort of upper triangle, as you saw earlier on, I suppose. But then looking not ignoring the other things to live with. If we're talking about treatment approaches,

Steven Bruce

Alex has asked whether there's any chance that we can. Obviously we're trying to affect the performance, but we might perhaps affect the adverse so he's calling to mind that as a healing crisis. If we do certain things to our structure, are we going to change her voice for the worse

Ashley Stafford

when somebody comes to treatment, and they are An active performer, I always tried to make sure they've got a day when they're not singing, but after. So allow things to settle on the body to free find this new balance on certainly so that's true. But then you probably do the same with any sportsman, or anybody who has to use their body actively, I would say, in a specified way, it's no different at all, we're going back to the point about the sternum. It's a really interesting point, because breathing patterns, as we know, are instrumental in influencing pretty much every part of the body in terms of how we, the adrenal system, the vagal system, the structural system, the habits of how many 10s of 1000s of times we take a

breath every day, the embedded habits, so I would always, absolutely examine how that pattern of breathing has affected the, the anterior ribcage and the sternum, the relationship between the manoeuvring room and the main body of the stone. And what is in fact, a healthy inhalation? It's a really controversial question. Because how we receive the breath has profound implications for absolutely everything. In terms of where the bank body balances, where the neurological balances, where the autonomies, how they're functioning, and that breath, every single one of them is having some kind of affecting the body, and mind money. And it's not your money, it's my money for my money. The thing that goes wrong 98% of the time in dysfunctional breathing patterns, is the fact that the anterior ribs are the sternum is lifting is simply that they breathe, like that. And when you lift the sternum on and inhale, you're going to contract, generally speaking the dorsal lumbar junction, and then you'll lead into all kinds of patterns, it may be the other way around, you've got a slouch pattern collapsed. And the only way that that person thinks they can start off is by taking a deep breath. So sort of theoretically, what I'm looking for is can you be my model? Your model, okay, did you put your hands up my one hand, on one hand on my lower back, so what I would say and I say it is controversial, this is when the inhale comes the sternum than the renewal brim sternal angle reduces, it releases the sternum inferiorly, which allows the costal angle to increase and the breath then is allowed to sink into the posterior to the lungs, which are the same time and it's important for voice users, it allows the larynx to drop, then with the exhale, the exhale then becomes supportive of the structure rather than collapsing. So instead of the normal dysfunction, which we all feel we can pay for, which is the breath is holding me up, and then I breathe out and it all collapses, you actually changed the whole thing where it's a release for the inhale. And that's when that gentleman was talking about the working on the anterior ribs becomes really important.

Laurence Kirk

And the thing that I think is important in valuation, as well as just checking the first rib, so you can you can access the first rib is only about a centimetre below the surface in that location. And you should feel reasonably symmetrical elevation and drop. And if there's any tension, obviously, in the muscles on one side, it will tether it effectively, and you can and that's really clear to feel once you get used to it. And that's, that's a good idea that fits in really nicely with with your anterior posterior chains, and so on. And you can even demonstrate to the patient the effect of the tension by just gently squeezing in over your STMs. And squeeze, you can hear the voice change, and then take it off. And again, there's always moderates. And it's just illustrative of how fundamentally all that does.

Ashley Stafford

The supraclavicular triangle, that whole organisation, again, this is grandma eggs and all that comes to mind. But you know, it's so obvious, isn't it that if there's that fat posture, and you've got the narrowing of the angle, and then the breathing is fighting that the whole time because so many complications that arise from

Laurence Kirk

just remember the question and it on a practical level, treating performers, if I have an actor, come see me the press night, sort of in the afternoon before and they've got an issue. I will deliberately use techniques which aren't going to be too provocative because obviously they you don't want them reacting to your treatment in the middle of the performance, so you're probably a little bit more minimalistic in terms of what you do, but still fundamentally shifting at the same time

Ashley Stafford

you're wanting to decrease their stress levels. So that those, the adrenaline actually has a major effect on the actual vocal folds itself. So when you're adrenalized, your vocal folds are working differently. Or some people say, Well, I've just lost the lower part, haven't got any loss of nerve fit in my register, because I'm got more adrenaline in the system. But on the other hand, the top of my voice is working brilliantly. Other people will say the opposite. It depends on their

Steven Bruce

you said earlier on, that it's very important to engage the lower ribs. And yet, when you looked at Anna, you said she's only using the top top,

Ashley Stafford

and it doesn't sing the other things technically brilliantly for what she does. And she does not stress and strength show the type. If we here were to hear Anna speak, which we did earlier, you will notice she speaks from her throat, and breathes quite high. And were she to ask me in a professional role, to say how can I get more out of my instrument? How can I get more out of my voice as things I want to say that I'm not saying, which isn't, say she say I say all the things I want to say it's fine. But if there were things she wanted to say, or with her voice that she finds frustration with, I would definitely start with the breathing pattern, dropping the breath lever, engaging the lower abdominal wall, in what is commonly called support, but I prefer the word activation, severely activating the voice from much lower this chest that then relax, the throat would change, you wouldn't have that. So so much stress and the vocal apparatus. Having said that, if it's working for her, and she's singing, as well, as she does within the style, and demands that she's been under, I wouldn't want to interfere with that. Unless she was coming to me with another issue, which was say, to do with stress levels, for example, prolonged anxiety and stress when which case working with a breath might be a very

Steven Bruce

helpful thing. Well, Caroline actually said here does does the stress and nervousness of performing impact on vasodilation of muscles breath vocalisation. And

Laurence Kirk

there's there's a very interesting paper, there's very little research on performance related muscular skeletal disorders with a mouthful. Overall. And the there's a, there was a paper which looked at logging all of the potential causes or in predispositions to developing. And one of them is clearly in study after study is stress related over rehearsing long performance hours. Most of them are fairly obvious, but it's completely exhaustive in terms of logging everything in the journal International Journal of Environmental Medicine and occupational health 2018. I can't remember the name of the author, but I can give it to you later on. But it's literally just logging all of those potential influences which fascinate Yeah, it is interesting. But clearly, stress affects performance in all sorts of ways.

Steven Bruce

Well, Matthew, who is also known as Mrs. trellis, he says he's got a subversive thought here. He says, Does an artist have to be posture really perfect to perform to their best, maybe some of them need to suffer for their art. And he's, he's mentioning Joe Cocker here.

Ashley Stafford

Well, it's an interesting point because Joe Joe Cocker is a popular music is just bypassing. Because the very quality you were talking about a singer earlier, the very quality of bringing

the jaw forward introduces a quality of stress into the voice, which may well be very attractive to a particular audience who wants to hear that, that sound, that particular sound, whether or not it's sustainable in the long term, and whether or not they end up with nodules, or other unfortunate consequences is another matter. But going back to Anna, because she seems to the microphone mostly, and she seems within herself, and she's like, she's allowing herself very comfortably to communicate with us. And I don't see that there's a particular problem there. Unless, as I say, if she were to turn on say, I have an issue with this, that and the other, which that's where I would start dealing with it. So it comes back to not not messing when there isn't a problem, unless it's something which is hidden, and going to damage that person in the long run.

Laurence Kirk

But there's a there's a classic RFC one which you've probably are aware of Richard the Third. And I've I've been in on various rehearsals for with actors who who are cast as rich and the third. And of course, they often want to go the fall due to cripple in the sense they want the built up shoe, they want the limp they want the one actor even wanted to tie his his hand back. As well as having a three inch built up shoe. So he definitely wanted to suffer for his art and I had to explain that he would suffer in all sorts of ways as a consequence of it, but bravely that current, which of the third is cast is a chap who's got radio dysplasia. So and he's playing it straight other than the fact that he naturally has radio dysplasia. So which which is interesting, as well given given that we shouldn't third going off tangent wasn't terribly disabled it anyway, mild scoliosis, but just wanted to add it light up for you as well that on the basis of suffering if you are one of the actors classified all the companies are one of three main categories and you could have subsets so you had the all the actors in his company he translated either lovelies fairly obvious brackies as internal clock on clock off go to the pub. And tilders, as in Tilda Swinton and Tilda Swinton famously suffers for her art, and was even once in a perspex box for two weeks as an exhibit. So, so you can if you're an actors, some actors definitely have a tendency to want to feel some some pain in their role. And I'm sure, some singers too,

Ashley Stafford

I'm sure they do, I would certainly say I live in the classical field that's less likely. But in other another styles and another effects, then there's definitely going to be some suffering. And as I say, if that is what they somebody wants to do, and I bet that you know, you got to work hard, it's always the same with every patient, you want to work around the what they want in their life, how they want to be feel fulfilled. And the thing that brings to mind suffering, there was a sudden rash, and some rash and rush of singers from the Covent Garden chorus, when they were doing the production of The Flying Dutchman it was before COVID. And what happened was the set designer and the whole set design, there was this overturned shipwreck on the stage, or the or the rake was something like that. And the chorus had to be standard, there is a bar opera, by the way. So it was quite long. And they were there on stage a lot. And the rehearsals are unforgiving and they had to be there. And they're all coming in with appalling problems that their backs and that so much so they actually pleaded that could we actually changed the design somehow. So what we actually did do is for long rehearsals when they couldn't come offstage, I made the suggestion, turn round and face the other way asked the chorus masters permission to put your back to the board. I mean, there wasn't an audience, but back to the auditorium and actually stand so your heels are getting a chance to drop back and open your packet. And in fact, that was adopted for some of the rehearsals which actually mitigated the issue. But if that's the set designers don't necessarily take bear in mind the fact that someone's got to use the set. There's a famous occasion in Ireland, where there was a set, which was very minimalist, and it was sort of

polished, squat, polished glass, but it wasn't gods were very, very polished. And it was quite a steep rake. And that was one item on the stage. And it was a sort of read sort of Roman pillar, but it was only about this size like a ruin. And all the way through the rehearsal was people just sliding all over the place. That is a state. We can't do this. It's impossible. I came up with a solution. Spray lemon juice all over the stage. So it made it sticky, but it's still very shiny, which is what the set designer wanted. And that was all going very well comes to the first performance and a cleaning lady turns out Oh, that's a major stage so stay clean, it's clean it all off. absolutely hysterical because at this point the singers weren't expecting the stage to be polished though think it was sick a great so come striding on. And the first one goes slide and grasps this rock in the middle of the stage. The next one comes up straight it says by the end of the first scene, there were four singers, clasping this rock in the middle of the stage tried to sing this Handel opera, at which point this occurred and comes out the end of the first one, act one scene three, and they all go off and spray on the stage and it's hilarious example of them. I think so.

Steven Bruce

Number two gin and tonics in the room. and getting back getting back to popular music. We weren't going to have a drummer in this evening. You've heard of it actually. We run

Ashley Stafford

a drummer in scrims it's very popular,

Steven Bruce

it is pretty next time. Next time, I will try and find an opera singer for you. I'll see if I can get Angel blue to come in. If have you treated drummers? I mean, I'm just thinking there's there's a peculiar instrument, isn't it? It's an all round one. It's an all four limbs one, well, sitting

Ashley Stafford

there and percussionist in general, actually, because that's a much wider range of activity than just

Steven Bruce

gravity, you see specific problems to them.

Laurence Kirk

I think it very much depends on again, on the style of drumming, and, and, and the, the kit, they've got some, some relatively minimal, some are maximal. And therefore they're having to, as well as simultaneously beat the drums, they're having to keep the bass drum going with their foot, and then having to swivel and twist while seated. And then we've got high hats, which they're having to extend the neck to. So it's a recipe for all sorts of postural stresses and strains. But then, but the remarkable thing is human bodies are amazingly adaptive, and given a chance and rehearsal and experience. bodies sometimes learn how to cope. But like most things, you can do that for a finite period of time. And then rest of your life gets in the way you do other things in the garden DIY, which compromises existing adaptations, and then that may be when you come to seek help from Ashley or myself or one of you. Because you don't want to stop them. The Chair, I don't know enough about drumming, being completely honest, to give someone advice on their technique, but I can pinpoint stresses and strains and work on their stresses and strains to some extent, to enable them to continue. But if you if it's a technical issue, we're dropping them, that's something which would impact on their performance, you'd think as well.

Ashley Stafford

To rider to that, that. I mean, I think it's the same with pretty much everybody we deal with, it's not always what has happened, but it's who who has happened to that individual. What's the what's the difference between a percussionist, who is five foot nine, solidly built on a percussionist, who is six foot four hyper mobile, and still has to load his kit into the into the van at the end of every night and unloaded at the other end, on top of having to play.

Steven Bruce

And actually John has just sent a question in saying, Have you seen differences between professional and amateur singers? He said, But amateurs practice more.

Ashley Stafford

Really? Yes, they're much more enthusiastic.

Laurence Kirk

And the same with amateur dramatics as well. With no disrespect to anyone who's theatrical.

Steven Bruce

Does that mean they reinforce the universe?

Ashley Stafford

Yes. The thing about being a professor, the demands of being a professional singer, or a mute professional musician, is you had to turn up whatever it was, you've just got off an aeroplane, whether you've got off the bus or a long journey, you just do it. You have to do it. That's the thing. Is that's the definition not it's not necessarily although, of course, there is a distinction there. It's not necessarily the standard of performance in itself, or the standard of the instrument or their expertise. Not necessarily, it's the ability to actually, whatever it comes up, you just go out and you perform at a certain level, and you're not going to drop below that level. So that's the demand. I'd say, the ammeter is struggling with a whole lot of other things like working for a living, for example, and yeah,

Laurence Kirk

sorry, no, no, I swear, cutting across you know, I was just gonna say you were saying earlier on, it's the unconsciously competent issues after many, many hours of practice, you become unconsciously competent in what you're doing. I mean, with English longbowmen. It used to be 10 years of constant practice, before you were qualified to become an English Bowman. But the that was the measure of expertise at one time it was, I mean, 1000 hours, but 10 years worth of training became that's when I graduated, Bupa would only register you as a specialist, if you'd had 10 years in practice, and changed a bit now. But the assumption being that after 10 years, you were suddenly suddenly much better. And I'm sure that doesn't hold with with musicians, but obviously practice makes perfect

Ashley Stafford

and bad practice. makes them perfect. Exactly.

Laurence Kirk

That's another thing about we didn't rehearse that line if

Steven Bruce

Billy J is asked whether you see a role for Alexander Technique. When he says he's playing the devil's advocate, but I'm not quite sure why that was. We

Laurence Kirk

touched on it very briefly, didn't we, most of the actors in the drama school training will have had exposure to Alexander. And obviously had the head is very important. And if the head is right, everything else tends to fall on being very simplistic, but it really does have a place because if you can get that, as Ashley was saying, Get the head in the right place, then your chances are that the rest of you is going to follow.

Ashley Stafford

I had seven years experience with a really good Icelandic teacher who was trained very classically technique. And after the seventh year, I got up out of a chair. That was perfect. To this day, I still don't know what it was I did. Now that might be a good thing. In other words, it is inculcated something which I knew how to stand up out of the chair. But the thing that struck me the moment I became training as an osteopath, having had that seven years experience of lessons, and I did have the lessons, because having been fundamentally imbalanced, who had polio, so my left leg doesn't work. And same as my writing is compromised in quite significant ways. I was actually really uncomfortable talking about Dylan when his left leg, my right leg, which was my strong leg just wouldn't let me move off the stage. Sometimes I was so biased to the right. And it was having effects in other ways. And so I started having Alexander because I knew a good Alexander teacher. And she was really, really nice. However, the moment I started my training, as I said, the first thing I fell out of love was the idea that the primary control is in the head. And that's it. Excuse me, what about the floor? What about the lower extremities? What about the pelvis? What about the awkward dynamic from gravity as opposed to this dangling thing, which a lot of the misunderstanding I'm not saying this against Alexander Technique, per se, all the teachers, but the information gets often interpreted, interpreted, let's say, by the student as the feeling that you need to be dangling. And the idea this sort of feeling of reciprocal, let's call it power coming up on energy coming out through the body from the floor. Maybe veer away from my c'est la vie, Alexandra. But I did actually enjoy the lessons a lot. And I got a lot out of it. But I think it's part of an answer. It's not a full thing in itself.

Laurence Kirk

I'm gonna take one word you mentioned there that's dynamic. And as therapists involved in physical medicine, we look at people dynamically, not statically. And that, when you're looking at someone dynamically, you get quite a lot of information about any stresses and strains in the system or any asymmetries inequalities, any faults in the system. So it's important to check dynamically, we used to do lots of static observations and lots of static assessments. But I think being dynamic is the way to go.

Ashley Stafford

Couldn't agree more.

Steven Bruce

I do think there is probably a disadvantage in any therapist saying that my therapy is the way and no offence to chiropractors in the audience, in the studio or in our visuals, but I went to some presents, I went to a presentation and years and years ago, very savoury his CPD group in London, very famous osteopath. And the chiropractor who came to demonstrate did nothing but Upper Cervical was and that was the only thing that she did. And I'm sure there's

a lot of value in that. But I can't like you, I can't believe that it's the only thing that we need to do to, to address our patients.

Laurence Kirk

Because there's an interesting observation based on what you've just said. And that's the practitioner effect. And I think we overlook it very often as well. And that we are we all consider ourselves in our own practice to be effective, and we wouldn't be practising still would be if we were earning an income. So we consider ourselves to be effective. The basis of that effectiveness. Unless you read the telegraph today and saw that headline on the BMJ about osteopathy were mentioned the more good headline so but the basis for that you feel that you make you're making people better you're improving their lives and so on. But when people come to see you, there is this practitioner effect, and it's how confident you are in treating them how confident you are in explaining to them what the problem is. And it's really interesting to some extent, it doesn't matter whether whether you we've got 28 people in the audience, probably 28 different approaches to the same problem. But I bet in many cases, the patient would get better anyway. So it's the conviction that you have in yourself and your ability and the treatment that you're going to be applying that makes a difference. And the ways there's more than one way to bake a cake I suppose is the Are they? The answer? Could I

Steven Bruce

take a stem a slightly different route? Yeah. This is a question from Midori, Midori, we might need some more information for you from you on this because when I got in front of me is I wonder if we could touch on issues with tinnitus that are worked with music therapy. My patient develops severe tinnitus after COVID May or 63, new dizziness or recent ear infections and unremarkable MRI scan or neurological tests. Now, I'm guessing she's asking can music therapy help with the tinnitus rather than does the music cause the tinnitus

Laurence Kirk

or the unless you're talking white noise, which would be a little white noise generators by the side of your bed do to help you go to sleep. But yeah, that's a that's an interesting and difficult question to answer, I think without any more detail,

Ashley Stafford

I agree. And I think turns tinnitus is so variable in its manifestations, although you can categorise it and it has been the case that some tinnitus has had remarkable under sorry, the treatment has had remarkable efficacy and removing the tinnitus. Equally. It's true that you there has been no real effect at all, and when somebody comes in with Can you help me I have tinnitus, I say, I will examine you. I will see if there's an osteopathic issue. I do not know whether osteopathic issue is going to be related to your tinnitus but I will treat it and if it helps with tinnitus. That's wonderful. But I'm cannot predict the outcome. However, there may be somebody out there who has a fantastic technique. Sometimes working with just with a temporals and decompressing in a compression of strain or something has an effect in query. Even in the presence of those strains and releasing them nothing happens. So it's to me I'm always very keen not cagey. But I'm careful how I word. Yeah, but it would be anywhere

Steven Bruce

between most surgeons would say that therapy is only ever going to be accessible. A successful intervention is only going to be ever successful if you apply it to the right patient. Yes. If you say every tinnitus is the same, some of them are not going to get better with that

particular technique. Jolly leuco. This is Kim the system gives them funny names. I don't know why your studio audience have had this before, but it creates funny names for them on one of those systems. Anyway, this one this one, Julie local has told me that he or she is a Kim doesn't help me know whether they're male or female. But he had a percussionist who had very painful risks and was very impatient and wanted immediate results. Well, immediate results is what most patients want. So I guess he's going back to my drummer, what do you see in drummers? Where would you go with that? How does the drummer stop using his wrists?

Laurence Kirk

Impossible isn't it it's it's patient expectations of outcome as well, isn't it. So you have to very be very careful about explaining what you can do what the potential outcome is. And obviously, in evaluating them, you're going to see whether there is actually a potential issue which could impinge on the ability to continue. But assuming that there isn't a structural problem, or an infection or inflammation in one of the carpal bones, for example, then there are ways and ways to treat it. And again, treated differently for your iPhone or Ketopia. Clearly mallet finger.

Ashley Stafford

I've found I mean, it's an interesting one to come up because I actually have a issue with a patient currently who has on and off an extremely painful and very variably dysfunctional wrist after a damage that was done to that wrist, which meant that there's a ligament serious damage probably doesn't even have that ligament working anymore. And the rest is not problematic at all. Until stresses and strains of life. And the middle of thoracic area gets completely jammed up. And when that is resolved, the pain of the wrist goes away. So it's real barometer stuff. This isn't this wrist as a barometer. Now, with the drummer, we know that they're using their wrists a lot. So there's potential for a lot of inflammation and damage in who knows what that person's techniques like anyway, is he a good drummer? And as you know, there's all sorts of questions to be answered.

Laurence Kirk

I treated a drummer last week. And he's been drumming for 50 years was drumming and we're talking about Jazz, Jazz. So he's been drumming, jazz style 50 years. And he he can get his 72 and he can comfortably get through sort of two or three hours set. And he he he's learned over the years to that less is more in the sense that He doesn't use, he doesn't rely on his arm as most drummers learn not to use their arms, because you're gonna be bashed away with big muscles in your arms for a certain period of time before you fatigue. And yeah, so he uses five movements. But then the problem with that is those fine movements can generate issues. And yeah, and K tape. We've mentioned the brand. But I do sometimes use K tape in situations where you want to enhance feedback. So for no other reason than that, sometimes just to give them a bit of what used to be called biofeedback. So they're using the wrist in the wrong way or using a joint. And sometimes it just helps to get the extra feedback to the brain, from the essentially times on the skin. And that gives you the extra stimulus. It's tough,

Steven Bruce

though, isn't it? Because if, if a drama comes to you with a wrist problem, you can say, well, this is what I think is causing the pain. Yeah, but actually, you can't advise him on techniques, you've got to say to him, you need someone to look at your technique, and advise you how to do it properly. Simon has said drummers generally practice a lot and it's all about technique, as well as a loose grip, and how you set up your key.

Laurence Kirk

So if you if you my drummer last week was emphasising that you loosen your grip and you and your flight using a pure carpenter using a hammer, Hammer Nails. If you try and keep hammering the nails in using your whole arm, you you end up with tennis elbow and all sorts of problems, but they use the way to the hammer and let the hammer do the work. So I suppose then the drumstick do work.

Steven Bruce

So turning back to coda, do you over there? Do you think there's any hope?

Laurence Kirk

Oh, yeah, gosh, yeah. Partly because of their age. And partly because the human body is an amazingly adaptive mechanism. And yeah, just a few little changes emphasis can make it make a big difference as well. Yeah. So and we haven't we imported pieces. Totally, I think you're both in pretty good fettle, generally.

Steven Bruce

Particularly, do you feel that you've got something that you can use to improve your back pain, knee pain?

Dhil

I think so. I think I think the first step towards that is obviously being aware of what the issues are. And then knowing how to comfortably correctly. Be aware of them and to correct them as you as you mentioned, sort of like with the with the curved spine, I'm now more aware of it, though. So I'm trying to obviously counter it in my performance. So yeah, that's definitely given me a lot to be conscious of, and, hopefully work on.

Steven Bruce

Good. Well, we'll be watching you very closely with a little while. So I don't know if we've got any more questions from the audience online here. We've had we've got 400 People watching online we've got a bunch of people in the audience here. Anybody got any thoughts from the studio audience on patients they've seen themselves? I know we've actually got a singer songwriter musician in the audience, but I won't mention who it is.
Entire silence

Ashley Stafford

totally satisfied. Obviously. Amazing. Bar ignorant gonna

Steven Bruce

second let's get you a microphone.

Question. Thank you, I just wanted to pick up the comment about the drummer. I used to treat a lot of musicians and and professional singers, both in the pop world and classical opera singers, but also met a quite a few drummers from very well known bands of days gone past. And it for me, my understanding from what they were explaining about that technique is in order to achieve a loose, relaxed grip, you have to have a fulcrum of opposite tension somewhere. And that tended to come from the parry scapular muscles, and therefore the integrity of diaphragm, thorax, ribcage, all the things that you've gone through

is equally applying to a drummer as it might be to a singer. And the phenomenal force of power going through that Perry scapular area in order to keep that precision of drumming is is exquisite and extraordinary. And, and I think I would encourage any physical therapists to work with people in the performing arts, whether they're actors or singers or musicians, because it's, it's just the most phenomenal learning opportunity. So, um, thank you for everything you're saying.

Steven Bruce

We've had a comment in from January says in defence of Alexander Technique, not only we were attacking, but in defence of Alexander, I know that there are different schools and that the ICM school is more comprehensive in its approach, from experience that Jen has working with a singer Alexander teacher, and thinks that it does take the opposite forces into account From brackets wink, as with everything else depends so much on the practitioner and where they're coming from. And I think this is Zoey was Eric, who was a mctimoney chiropractor and a sports physio. They say that they were always taught to look at the body as a whole, I was always taught to look at the body as a whole, I'm sure you were always taught to look at the body as a whole. And you were to, but I'm never sure that we ever really did it. And the stuff that we've had at college, I all that stuff you were talking about, about voice generation and the muscles involved. I don't know if we ever got any of that at college that's taking osteopathy or physical therapy to another level surely.

Ashley Stafford

I'm not quite sure what your point is.

Steven Bruce

Well, first of all, there's a misconception in some minds that we are whole body holistic therapists, because coming out of college, we're told we are but actually we're not very good at looking at the whole body. And am I used as an example, your explanation of the force is generated in projecting voice, and the muscles concerned and I don't remember ever being taught that at college.

Ashley Stafford

We weren't really taught to move. While my when I was trained, is more we were taught to think holistically, I have to say, and but what happens is that when you're learning specific techniques, and how to use your hands, you inevitably are focusing in a more on small things to try to get right. I think one of the processes if we're lucky, as practice evolves, and you'll see more and more people that you do become aware of how these things need to happen. In fact, I don't know. But I find that I trying more and more to step back, just as I was told by Howard Klug many, many years ago to step back and try to see the space around the person, and what's the space that they are occupying? Rather than and then work from that perspective, rather than getting too close and doing? Oh, yes, I know that that vertebra needs adjusting. So I'll do that. And then I'll do that one. So that I do feel that actually I know, it's better than most everybody in this room actually would agree that we do want to step back and see that person that total contest, you mentioned the whole biosocial blob thing, from within and from without, so how, how all those inputs are influencing that person, and how that person is as an individual, and how that works on all the different levels and the integration between the autonomies and the digestive system and all the other things which are actually empowering that person to live a life. More and more or less fulfilled and are, you know, I feel often by role is to try to, and it's more specific with a, let's say a musician, because you've got this focus, but it could be anybody's to empower them to live their life as unfulfilled and individual as it's feasible. Within the limitations of practicality, I

Laurence Kirk

suppose. If I can just say ahead as well, I think the when you're a student and having trained students or taught students for years, you are obviously trying to give them a grounding across the board. And they've very focused on lots of time to evaluate and then they look at the whole body. And so but when you get to get into practice, you had to be a bit more pragmatic. And I now think of myself as a catalyst in the sense that I try and find a method to switch their body back into compromising again, because we're all a compromise. I mean, I I haven't got perfect posture. I've got a few stresses and strains, everyone here will have some quirks about their their posture and their musculature. And but we get on with it most of the time. And as as as an osteopath, in my view, I should be able to empower someone to get back to some semblance of normality without making them perfect. In other words, I could spend, they could come in every week for the next year for me to work on different bits, which weren't quite right. But yeah,

Ashley Stafford

well, yeah. So that's it. The reorganisation of the body's core design principles,

Laurence Kirk

you put it much better than

Steven Bruce

Ashley Lawrence. Thank you very much for your brilliant 90 minutes it flashes, byte, musical entertainment, as well as lovely apologies to Marina and Maria and Maria and Matthew and a few others who were talking about many other aspects of treatment, which I didn't have time to get around to the value of Pilates the value of swimming. Some examples of what went on with percussionist. Sorry, we couldn't get you to deal with all those questions. But hopefully you've got enough information