



# **Wellness at Work**

forensic bodywork



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## **Introduction from Dr Paul Crozier.**

Former Medical Director A&E Ascot White Cross Remeura & Bodywall Ltd.

*Repetitive stress on the body whether through emotional and physiological insults or physical injury initially evokes a protective response but unless this mechanism is ameliorated it will leave its mark on the body and the psyche; in the former as a variety of syndromes as diverse as endometriosis and Rotator cuff syndrome and in the latter chronic pain syndromes.*

*Recognising a commonality of cause and effect in the body's response is the key to first alleviating further adverse changes and ultimately to undo these changes.*

*The therapies offered here work with the physiological changes not against them essentially telling the body to switch off unneeded responses.*

*Last but not least they comply with the dictum 'primum non nocere' first do no harm.*

*Dr Paul Crozier.*

## **Firstly thank you for inquiring about our CPPS Chronic Pelvic Pain Syndrome treatment. 😊**

All the therapists involved in the development and delivery of this treatment program are dedicated to minimising, and if possible, eradicating this horrendous condition and its side effects. We will do our very best to assist you in obtaining a rapid recovery.

This document is designed to provide you with information to help reach an 'informed choice' on whether you should undertake this treatment. A full hypothesis and thorough explanation of how and why this treatment was developed is outlined below.

Please take your time. We hope that by the end of this document you will have more of an understanding on why you have acquired the condition and why Chronic Pelvic Pain Syndrome responds to our treatment plan. Finally we hope you will understand that CPPS can be rapidly and inexpensively treated using these methods.

### **Protecting the Uterus for the survival of the species.**

Due to the important role the Uterus plays in the survival of our species it is centrally mounted within the endometrial cavity. Here it is well protected by the hip bones and wrapped in a blanket of interwoven abdominal muscles. To further protect the Uterus it is supported on a strong web of shock absorbing ligaments.

On top of this physical protection, anything negatively impacting or affecting the Uterus is assigned '**extreme high importance**' by the body's autoimmune systems, which means, considerable and immediate resource is applied to protecting the Uterus from threats.

This high autoimmune response can and does result in the formation of contractures to assist, support and protect the Uterus from excessive load placed on the supportive uterine ligaments. Unfortunately as these contractures form and attach it is often at great expense to regional organs, creating a wide ranging 'disease' that very often may take up to 10 years to diagnose. For Chronic Pelvic Pain Syndrome and Endometriosis sufferers this leads to many thousands of hours in pain leaving them unable to focus on study or work and an inability to contribute to home and family life. Due to the regional adhesions involved CPPS and Endo are conventionally regarded as very complex conditions with 85% of women with Gastro intestinal symptoms, 31% have a variety of autoimmune or endocrine disorders and 60% have allergies compared with 18% in the general population.

After successfully treating this condition in many hundreds of women since 1998 we have come to the clear understanding that CPPS Chronic Pelvic Pain Syndrome is almost certainly a RSI / Repetitive Strain injury to the ligaments supporting the uterus. And, that this Repetitive Strain injury develops very complex and wide ranging symptoms including Endometriosis due to the number of organs engaged by the autoimmune system and contractures formed as the body attempts to hold the uterus in its correct position.

We are required under the therapeutic goods act to state that '**individual outcomes may vary**' however, in line with all Wellness at Work Ltd treatments: this treatment is offered on a: **No Change No Charge basis. Wellness at Work Ltd will refund all your fees in full should you not achieve a positive health outcome after completing our clinical and self care treatment programs. Chris Toal, Director, Wellness at Work Ltd.**

## Background on the Wellness at Work group.

Since 1997 Wellness at Work clinics and associated companies which now include: Azolla Ltd, *Wellness at Work Ltd*, *Bodywall Ltd*, *Bodytool Ltd*, *Ltd* and *ScarsAway (Aust) Pty Ltd*, have been delivering successful, patented, and proprietary treatments for conditions that have proved to be unresponsive to conventional therapy.

Treatments include: RSI / Occupational Overuse and Carpal Tunnel, TMJ/TMD Temporo Mandibular Joint Dysfunction (patent pending), Fibro Myalgia, Dupuytren's Contracture, Spasmodic Torticollis, Shin Splints, Tinnitus, Meniere's disease CPPS / Chronic Pelvic Pain Syndrome and Endometriosis. We also treat general conditions including compartment syndrome, chronic back, Knee, Rotator cuff, and Sciatic problems.

Our client base includes medical doctors and nurses, major corporations, international and national sports teams, plus national and international and Olympic athletes.

**All** Wellness at Work treatments are delivered on a **No change No charge** basis, “**no change to the condition, no charge for the work**” The group holds patents, registered brands and designs both in New Zealand and overseas for several technologies with additional patents pending.

Additionally, we specialize in severe burn scar remediation offering dermal / deep tissue scar remediation and contracture release, regardless of the age of the scar tissue and work with funding support from the NZ Burns Charitable trust. Our ScarsAway® treatments have featured on NZ national television on two occasions.

## Chronic Pelvic Pain Syndrome treatment hypothesis:

- a/ That in many cases the body responds to excessive load being placed on organs and soft tissue with a combination of autoimmune and postural responses. This can include; load redistribution via Golgi Tendon organ 'postural patterning' creating 'engrams' and; to further reduce pain these autoimmune system may support these patterns with Myofascial adhesions, collagen contractures, and scar tissue.
- b/ Studies show autoimmune responses commonly generated by pain from injury and related anxiety contribute to a heightened state of stimulation of the Hypothalamus, limbic and endocrine systems. This can and often does result in tension being applied to the Psoas muscle which is the primary muscle engaged by the bodies flight and flight response. The physiological response to elevated Psoas tension is heightened adrenal activity. This can ultimately accelerate the formation of additional contracture and scar tissue greatly exacerbating the original RSI / OOS condition.
- c/ Loadings have been introduced or greatly contributed to by pre-existing and unobserved overuse or overtraining injuries. It is our belief in the case of Chronic Pelvic Pain Syndrome these injuries are most often RSI / Repetitive Strain Injuries to the medial muscles of the lower leg the medial muscles of the inner thigh (the leg adductors) also and most importantly the Psoas muscles. We have typically found participation in sporting activities such as; horse riding, dance and gymnastics or any activity that involves strong and ongoing leg adductor and Psoas engagement such as regularly performing 'the splits' or lunge postures can contribute. This also includes activity such as rigorous sexual intercourse however this can include unwanted sexual intercourse therefore these muscle tension patterns are often evident on women subjected to sexual abuse.
- d/ In Chronic Pelvic Pain Syndrome this load may also be supported by symptomatic emotional responses in the soft tissue surrounding the endometrial cavity (see 'engrams' below) These can create muscle soreness developing into painful patterns of musculoskeletal responses placing further pressure on the region. These patterns need to be located and released to ensure recovery and a return to homeostasis.
- e/ When excessive load is placed on injured tissues, contractures and adhesions may be formed in an attempt to redistribute load and reduce localised pain. In the case of Chronic Pelvic Pain Syndrome CPPS, this load is on the uterine ligaments. Contractures formed in this way can redistribute load to several regions of the body not involved in the original injury. For example: attaching contractures to the bladder, bowel or diaphragm. To effectively treat this condition all the original muscle tension must be located and released, then, the contractures need to be located and released to allow organs to return to normal function.
- f/ The Wellness at Work program locates the original injury, plus the site of the original contracture formation, these are then released. From there a sequential release of all the contractures that have formed as a kinetic support mechanism is performed. From here the individual own reprogramming of functional engrams allows for organ, muscle, joint, ligament, and tendon functions to rapidly normalise.
- g/ Injury retraining performed at maximum loadings facilitates markedly faster recovery, clinical trials demonstrate Bodywall is more efficient at both ROM Range of Motion change and Core training therefore we find retraining on the Bodywall system far exceeds conventional outcomes. This information is available on request. **Source \* AUT ROM report \*\* WINTEC Core performance study.**

## What causes pelvic adhesions?

All of the abdominal and pelvic organs, except the **ovaries**, are at least partially wrapped in a clear membrane called the peritoneum (per-i-toe-nee-um). When the peritoneum is damaged during surgery, it becomes inflamed. Inflammation is normal and part of the healing process, but inflammation also encourages fibrous bands of scar tissue to develop.

Usually, this scar tissue dissolves, and the area continues to heal. In some cases, however, the scar tissue may develop into adhesions that grow and connect pelvic organs or tissues that normally are separate.

## How common are pelvic adhesions?

### According Gynecare Worldwide “Most patients develop adhesions after pelvic surgery”

Pelvic adhesions are abnormal bands of scar tissue that form after gynaecological surgeries, like C-sections, and bind organs that are usually not connected. Adhesions are very common after pelvic or abdominal surgery. The chances that adhesions will form after surgery and what problems may result depend on many things: the type of surgery you're having, the number of previous surgeries you've had, and the surgical technique used.

In fact, studies have shown that adhesions formed in 55-100% of patients who had reproductive pelvic surgery and adhesions are the primary cause of chronic pelvic pain in 13-16% of all females.

### What problems are caused by pelvic adhesions?

Pelvic adhesions may result in the following symptoms or complications:

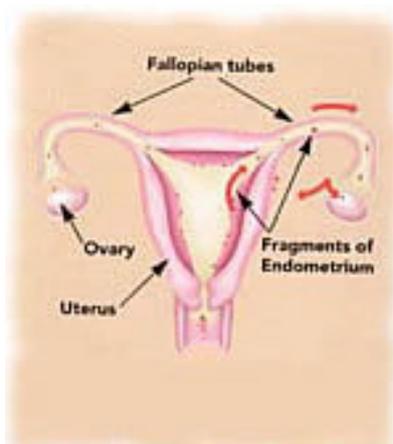
Pain during sexual intercourse

Increased potential for bladder injury

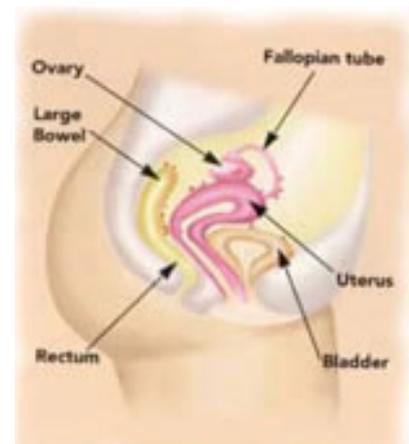
Infertility – 40% of infertility in women is caused by adhesions

Bowel obstruction – adhesions are the most common cause of postoperative small bowel obstruction.

**It is worth noting that according to research produced by Ethicon Inc a member of the Johnson & Johnson group of companies.**



**\*Surgery is not the optimum treatment option as studies have shown that adhesions formed in 55-100% of patients who had reproductive pelvic surgery.\***



## **Masking events, timing thresholds, engrams and Golgi tendon actions.**

Eighty-five percent of musculoskeletal pain people suffer is caused by trigger points that lead to Myofascial pain syndrome.

Research has shown that excessive strain to muscles, trauma and muscle lesions can lead to the condition. Disease and stress often exacerbate the condition and make symptoms worse and Myofascial pain syndromes can arise in distinct areas of the body such as in Chronic Pelvic Pain Syndrome and urologic chronic pelvic pain syndromes (UCPPS).

Some factors that increase the chance of developing Myofascial pain include injury to a muscle, repetitive movements, being inactive for long periods such as after surgery, stress and anxiety, being female, and being middle aged.

Since late 1997 we have documented in excess of 2500 successful patient outcomes for many of these painful myofascial conditions and since the development in late 2005 of the ScarsAway® tool we have recorded over 1000 successful scar remediation treatments both in New Zealand and internationally following the same hypothesis.

Over this period we have observed that the initial masking 'of' and or overriding 'of' pain signals appears to drive and then exacerbate proteoglycan and glycosaminoglycan adhesion formation in soft tissues. These adhesion events often develop alongside Golgi Tendon injury response patterns or "engrams" within muscle tissue. It would appear a 20 minute window of pain suppression is sufficient to commence this process and result in often quite an extensive kinetic chains or pathways to mask, hide, refer or relocate pain.

Via thorough questioning we have developed an extensive list of contributing causal factors for CPPS which in turn has assisted us in the development of our treatment modalities.

## **Engrams, recognising their contributions to ongoing injury.**

The automatic use of muscle patterns or 'engrams' have long been recognised, however, until recently what has not been fully recognised has been the relationship between injury or pain tension engrams and musculoskeletal dysfunction even organ dysfunction, often at remote sites. Engram tension or referred pain patterns may be directly contributing to a wide variety of system imbalances and medical disorders.

Additionally, emotions such as anxiety can generate tension responses in muscles that surround the abdominal cavity. Once released, the conditioned response patterns are disrupted and this contributes immediately to a reduction in overall stress responses, thereby delivering improvements in flexibility and associated organ dysfunction, dismantling of injury driven kinetic chains and lowering tension throughout the core support muscles and all regional Myofascial structures, halting further contracture formation.

Recent work on trauma treatment by Dr Bessel van der Kolk Professor of Boston University School of Medicine The Roles of Attention, Memory, Arousal Modulation and the therapeutic relationship in PTSD and development trauma, clearly outlines the significance of disease states in relation to earlier seemingly unrelated injury, and or emotional trauma. This work acknowledges the contributing role adjacent tissue tension plays in retaining injury, and the role it plays in restricting recovery. Links to more information are provided below.

## Using Bodytool to diagnose and treat injury.

Bodytool® therapy does not activate the body's normal pain spasm response mechanism. This provides for extremely accurate deep tissue palpation to be performed to detect tension and load pathways deep within the musculature and endometrial cavity.

## Deep tissue treatment using Bodytool®.

After initial assessment a deep tissue treatment is performed. This normally combines deep tissue Bodytool® and may also incorporate Scarsaway® dermal scar treatment for release of dermal scarring. The implications for CPPS is that, regardless of the causal factor of the contractures be it from; laparoscopy, caesarean section, or appendectomy regardless of the amount of scar tissue on or around the peritoneum or endometrium. Once the contracture pattern is defined, treatment plans can be developed to release the original injury, the resultant contractures, and any dermal scar tissue halting further contracture formation. These deep tissue and Myofascial release treatments have been formulated to take advantage of the mechanosensitive nature of cells, and the ability of myofascia to rapidly change state when the critical binding distance between proteoglycans and Glycosaminoglycans is reduced or extended.

The critical binding distance of proteoglycans and Glycosaminoglycans is able to be manipulated due to Myofascia being 'thixotropic' that is: *when agitated or placed under extreme / directional pressure p's & g's will alter their 'critical binding distance via a property known as 'isothermal heat transfer' this will effect rapid changes in the state within the myofascia, resulting in liquefaction.* By sequentially manipulating this critical binding distance, a controlled de-lamination between p&g's can be obtained. This has the effect of releasing scar structures that have formed and are currently supported in hydrogen / collagen helix structures within soft tissue.

A normal treatment program is performed in one hour sessions over five to eight weeks with a follow up treatment one month later. A follow up treatment is performed to investigate the formation of any new contractures or kinetic tension pathways. If any are located they are released along with any new adhesions or contractures.

## When treatments and self care are performed as prescribed the endometrial cavity normally returns to homeostasis by week eight to week ten. In many cases this is possible by week five.

Patient feedback indicates that there is a de-lamination of the proteoglycans on neural structures as patients often report pain in treatment similar to that of the original injury. It should be noted that proteoglycans as a surface laminate in autoimmune response to neural injury. Recently published research on spinal injury and neural re-growth, demonstrates this lamination must be removed in order to permit neural growth to proceed.

Our hypothesis is that this neural lamination was originally generated by the immune system to reduce nerve pain transmission and re-exposing these nerve endings and re-sensitisation allows for neural structures to be released from this lamination and reprogrammed to lower pain states. This subsequently interrupts the process of re-scarring at the injury site so post treatment contracture formation is halted or significantly reduced.

**Helena's Story****From:** Helena**Sent:** Thursday, November 24, 2016 4:43 PM**To:** [wellwork@xtra.co.nz](mailto:wellwork@xtra.co.nz)**Subject:** Helena's story

My partner and I had been struggling to conceive for about 3 years, after the failing 1st year we went to a fertility clinic where the doctor suspected I had a strong possibility of endometriosis and as I had no insurance, he referred me to a wait list at North Shore Hospital.

I then had a long 9 month wait for a laparoscopy surgery to detect and if so remove any endometriosis. Meanwhile I had seen and tried everything under the sun to try and get well and healthy to enable me to No 1 conceive and No 2 feel well, because I hadn't for quite some time. The day of the surgery finally came and went, which they did indeed find endometriosis and removed it, I was stage 2. I gave myself a few months to recover but was quiet saddened that I didn't feel any better, I had daily painful bloating, was always exhausted, struggled with my weight and still wasn't pregnant! So all in all feeling pretty down about the whole thing.

My mum had been going to the Wellness centre and was told about Chris Toal and that he has helped a lot of women with endometriosis and also had a lot of success in these women conceiving, so she booked me in and told me I got to go he will help me!

So I did, and I continued to go every week for about 8 weeks and had a deep tissue massage. I found out a lot about my body and what I had been holding onto and even been blocking. Chris explained to me I need to listen to my body to help heal it not just block it out so I can get on with life (or so I thought) all I was doing was standing still.

So sure enough week after week I was seeing some major improvement, I wasn't getting the painful bloating. I was starting to feel again, turning on what I had switched off! Chris gave me some useful tools to help my body day to day with a few tennis balls and a magnet mitt.

When Chris told me he had done all he can do for now, to let my body rest and recover come back in a month and we will have another look, I was very happy to find out I had fallen pregnant! Finally after such a long and painful journey we had made it!

We are now expecting a lil girl in April and I couldn't be more happy.

So thank you for everything you have done Chris I truly believe everything you have done helped me get to this happier and healthier place.

Thank you for your support Chris and Alla

Kind regards

Helena Hall

Sent from my Samsung device

Opening up to  
**CATHRYN POWLEY**  
about her daughter's  
hidden illness, the  
dance diva admits  
she just didn't  
understand

# Candy Lane

## MY GIRL'S CRIPPLING DISEASE

**D**ancing star Candy Lane's daughter Jaz dragged herself home from school, went straight upstairs to her room, pulled the curtains against the bright summer day and fell into bed.

The 15-year-old desperately hoped the pain in her belly would stop – but Jaz knew the only real escape from the crippling agony disrupting her life was sleep.

Before Jaz was diagnosed with endometriosis, her dazzling mum and *Dancing With the Stars* co-host Candy would despair of the girl who always seemed to be lying around in the dark, avoiding life and missing school. Candy would enter the bedroom, fling open the curtains and

cheerfully say, "Let's have some fresh air in here!" But Jaz would only roll over and groan, "Nooo" – her head thumping with a migraine, her belly knotted in agony. At an age when her peers' social lives were ramping up, Jaz was more likely to be bent over in pain and come home crying.

"I regularly vomit in pain," she says. "I go to bed and sleep for hours and hours, but the pain's still there in the morning."

Now armed with knowledge of the disease afflicting her daughter, Candy can't believe what Jaz has endured since day one of her first period at age 11. Nor can she believe she was so clueless about the disease.

Endometriosis occurs when tissue normally found inside a woman's uterus starts growing on the outside. Not only can it cause terrible pain during menstrual periods, but it can also lead to infertility.

Candy says, "Jaz was always in pain, but I didn't know why. I just thought she was wagging! I didn't understand it at all because I'd never known it."

March is Endometriosis Awareness month and Candy and Jaz hope that by telling their story, more women will get checked for the debilitating disease. "It's really common," says Jaz. "Yet a lot of women don't even know about it. They just think they've got really bad period pain and are being dramatic. But it can affect your fertility."

That's a confronting topic for any teenager to deal with, and for Jaz – an aspiring midwife who wants children of her own one day – it's an awful prospect.

But knowledge is power, and Jaz has been told that her best plan is to start a family in her 20s because once she turns 25,

her chances of conceiving are likely to decrease markedly.

Endometriosis affects about one in 10 women, and Jaz urges girls and women suffering severe period pain to see their doctor immediately. "If you don't know about it, you might eventually go to your gynaecologist and say, 'I'm having trouble getting pregnant', and they'll discover you've got all this scar tissue. But by then you mightn't be able to have a baby," she says.

Jaz estimates the illness – which has unexplained causes – has forced her to miss school for one week out of every month, and ironically is the reason she stayed home on the day her class heard a lecture about the disease.

Incredibly, she had assumed her pain – which afflicts her all through the month but which is worse during her period – was normal and to be expected.

"When I was 11 at intermediate school we had camp. I thought everyone else must be in this much pain when they got their period. But I was in agony throughout all the activities. I just curled up in a little ball in my sleeping bag."

When she started high school, life got even harder. "I got quite depressed and low. I was often home crying. One of the worst times was when I was vomiting at school in the toilets from pain and the other girls could hear me."

Finally, last year, her GP referred her to an endometriosis specialist who was able to pinpoint the cause. The only sure way of diagnosing the disease is through laparoscopic surgery, and despite a morbid fear of needles and a tendency to faint when giving blood, Jaz, just 14 at the time, willingly agreed to an operation.

Sadly, the surgery to remove stray endometrial and scar tissue provided only temporary relief, and is unlikely to be Jaz's last operation. "Endometriosis is very common. They don't like doing surgery on people so young, but because it was taking me off school so often, they did. It helped for a while, but it's still quite painful. It will always be there – it will grow back and there's no cure for it."

On top of strong painkillers, Jaz now takes the Pill to limit her periods – and the pain and disruption – to once every three months.

Talking about such a personal disease doesn't faze Jaz, who says attending a girls' school has helped her cope.

"No-one's really embarrassed about anything like that at my school. I think everyone's really comfortable. It's not embarrassing. This isn't period pain, it's a disease," she says.

Candy finds it "unfair" that at an age when Jaz should be enjoying her youth she has instead sometimes been crippled by endometriosis. But she is also very proud of how well Jaz is handling her illness.

"What I've noticed mostly is Jaz's maturity," says Candy. "I always sit at the doctor's and listen while Jaz and the doctor talk – she knows so much about her condition and about her medication. I think she has had to grow up too fast." **WD**

For more information on endometriosis, go to [www.nzendo.co.nz](http://www.nzendo.co.nz) or (for teenagers), [www.me.school.nz](http://www.me.school.nz). To help support Endometriosis NZ's Big Hug fundraising appeal, visit [www.sella.co.nz](http://www.sella.co.nz).



'Jaz was always in pain, but I didn't know why,' says Candy. 'She has had to grow up too fast.'

Ever since I started menstruating at age 11 my pain was terrible, however because it started painful, I thought the pain was normal. I was often home from school with period pain, vomiting, and migraines. I would have extremely painful bowel movements during my period, and I would be taking several painkillers, Panadol, Codeine, Synflex and Tramadol, which never seemed to mask the pain completely. The pain got continuously worse as I got older, and I developed pelvic pain throughout the month, especially in my lower back. I would also get extremely sharp stabbing pains, which would only last for a very short time, but would have me crying in pain.. The pain kept me at home a lot of the time, and I wasn't going out with my friends, and would often decline invitations to parties and sleepovers because of pain. I would also get sick often, as my body was too weak to fight off infection by itself, and I was often on anti-biotics and other medication.

Because I was also suffering from migraines, I was on a drug called Topamax, which had several side effects and I had to take it daily.

When I was about 14, I was referred to a Endometriosis specialist by my GP, who suspected I had Endometriosis. Because of my young age, surgery wasn't the first option for me. I was put on the contraceptive pill, to try and limit my periods to 3 times a month, but the Pill made me ill, and nauseous and made me vomit and the pain wasn't helped at all, I tried 4 or 5 different brands of pill before I returned to the specialist, and she decided the only option left was a laparoscopy.

I was only 15 when I had my laparoscopy which diagnosed me with Endometriosis, which she removed during the surgery, and she found Adenomyosis, which cannot be removed. The surgery helped with pain for a few months, however the pain increased again and I was back on the Pill and taking painkiller after painkiller, which I eventually built up a resistance too. The specialist told me I would have to have more surgery, but before I went back, in 2010 I did a magazine article for endometriosis awareness month, which Chris Toal from "Wellness @ Work" happened to read. Chris got in contact with my mother, explaining about a non-surgical treatment called deep tissue massage therapy, which he had had a lot of success with.

I had three therapy treatments for my endometriosis, and a fourth for my migraines, with Danny, and after the first treatment, I felt a change in my mood and pain, and I went off the pill. The second treatment was less painful during the pelvic massage, and within a week after it I was only taking Panadol during my period, and my pain that I used to experience during the month had almost completely disappeared. After the third treatment the pain I had during the month had gone, and my period pain only lasted for 3 days, and was only as strong as I feel regular period pain would be. The painful bowel movements had stopped and I feel happier, healthier and my immune system seems to be coping much better with colds and flu's. The treatment for my migraines was extremely effective, I no longer take Topamax and when I get a migraine, It is much less severe.

Chris and Danny at wellness @work were amazing, and they have definitely changed my life, without the treatment I would have been subject to countless surgery's and a less full and happy life, I would recommend this treatment to everyone.

Thank You,  
Jaz Lane-Jones

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Elective Services no. CL8052B, IPM Service no IPM023  
ACC no. AA5013

28 April 2010

Dear Chris

I have now used the Bodytool for a few months in my practice. I have found it an extremely useful and effective extra modality for manual treatments. I found that quite quickly i was able to sense muscle and tissue tension through the tool and was able to release areas of abnormal tension with the tool. An added advantage was the reduced pressure on my hands, as the tip of the tool now does the work.

I would recommend use of the Bodytool to both manual therapists and to people with pain, who could use it to treat themselves.

Kind regards,

**Jonathan Kuttner**  
MBBCh, Dip O&G, FRNZCGP, Dip Sports Med, Dip MSM, FAFMM.



*Where women find strength*

26 July 2009

Contours Hamilton Limited  
83 Tristram Street, PO Box 24185  
Hamilton.

#### TESTIMONIAL FOR "WELLNESS AT WORK LTD"

In February 2008 I had a Laparoscopy and was diagnosed with "Grade 4 Endometriosis". I was requiring additional urgent surgery to remove my Uterus and the Endometriosis in which had also spread through my pelvic region. This surgery required two specialist surgeons. Every day I was having extreme pain. In May 2008 my Uterus and most of the Endometriosis was removed. Two months later the pain returned. I went back to my surgeon and was placed on a drug called "Dimetrioise". Within 3 weeks I had lost all my hair and become extremely sick. After two months of this drug my surgeon then took me off the "Dimetrioise" and told me he could no longer help. He would apply for some more drugs possibly "Zoladex" and put me onto the hospital waiting list for more surgery.

By this time I decided to see a 2<sup>nd</sup> surgeon who now told me the pain was possibly neurological and that I needed to go see the "Pain Specialists" who would prescribe to me more drugs that may help. In the meantime I was placed on "300mg of Neuronton" 3 times a day and a large dose of "Tremidol" and a slow release "Tremidol" that would remain in my system. These drugs had thrown me into a floating type trance every minute of the day and not able to function, even to the point of blacking out many times during the day.

At this stage I was very desperate for help and no longer coping with the persisting pain on a daily basis. It was at this stage "Stephen Burden" of "Healthy Ventures" mentioned to me about "Wellness at Work Limited". Within two weeks I was sitting in their Auckland rooms discussing my pain and surgeries with Chris Toal and Danny Orani. Straight away I felt they had an understanding on what was happening to my body. Each appointment was 2 hours long using a specialist technique with a "body tool", this had a greenstone at one end and another mineral stone at the other working on breaking down my internal scar tissue.

With in such a short time I am now completely drug free and have exercised for the first time in 18 months on their "BodyWall" and nearly completely pain free. There's no denying the 1st and 2<sup>nd</sup> treatment was excruciating as they worked around the pelvic and abdominal regions but believe me since my third treatment I have never looked back. I have recommended Chris and Danny to everyone I have come in contact with who have ailments. I cannot thank these two gentlemen enough. Thank god for "Wellness at Work Limited", we finally have people who know what healing the body really means and don't charge the earth for good health.

Kind regards

**Mrs Brenda Fox**  
Managing Director

**To whom it may concern.**

In June 2001 I was diagnosed with an ovarian cyst after suffering numerous bouts of intense pain i.e. akin to labour pains. After consulting with a Gynecologist it was explained that it was likely to be an endometriotic cyst and that the possibility of other endometriosis being present was high. I underwent laproscopic surgery to remove the cyst, and also had a large amount of severe endometriosis excised. Following surgery I took a three month course of dimetiose to try and reduce the occurrence of further endometriosis. In November 2001 I underwent a second laparoscopy for treatment of adhesions (from the first surgery) and insertion of a Mirena to provide ongoing hormonal control of the endometriosis. Although I had used the dimetiose between the surgeries there was still a fair amount of new active endometriosis present. These growths were also removed by the Gynecologist.

From 2002 to 2006 I continued to suffer from pain, from both adhesions and ovarian cysts. The pain was not limited to cyclic occurrence and present on a daily basis. I was also diagnosed with vulvo vestibulitis in 2002. In general my health deteriorated, and I went from being a very physically active and outgoing person to one who was constantly tired and introverted. Day to day activities became difficult and I was no longer able to work full time. Pain was an almost constant companion and I often reverted to prescribed pain killers for relief.

In August 2006 I underwent a laparoscopically assisted vaginal hysterectomy with right ovarian cystectomy, left paraovarian cystectomy, and had endometriosis excised from the surface of the bowel. It was hoped that this surgery would end my endometriosis issues but from mid 2007 the pain increased and the occurrence of cysts continued. Most of these cysts were self-resolving but in August 2009 my Gynecologist recommended undergoing further surgery to remove a cyst on my left ovary plus release my right ovary which was stuck to the vaginal vault with adhesions.

As I was reluctant to undergo more surgery I began (once again) to look for an alternative therapy. I was at this time already receiving treatment for my general health and endometriosis from both an Osteopath and Acupuncturist. In October 2009 I visited Danny Orani at Wellness at Work for a deep tissue massage course. We were both of the view that it was unwise to work anywhere near the left ovary because of the dangers of rupturing the cyst, but he was able to work elsewhere in the abdominal cavity. The first massage session was very painful, and, as expected by Danny, I was in a great amount of pain for the following 2-3 days. It took about six days before I felt well again, and I then returned for two follow-up massage sessions at 10 and 17 days respectively after the first massage. Thankfully the follow-up sessions were not as painful and I recovered quickly from these.

It is now three months since my last massage with Danny and as a result I have increased mobility in the abdominal cavity, and less general pain (presumably) from adhesions. After the massage course I visited another gynecologist for a second opinion regarding the management of the cyst on my left ovary. Upon examination of my abdomen it was found to be soft and non-tender even to deep palpation. There was no major tenderness at the vaginal vault and it did not feel to her that the ovary was stuck to the vault. To me the difference in general softness and tenderness of my abdomen is notable.

In general my health has improved since last year but I still have pain from the cyst on my left ovary and suffer from fatigue. I continue to see an Osteopath and Acupuncturist, who have also been key to my health improving, and a follow-up scan is scheduled in February to establish what is happening with the left ovarian cyst. I have also scheduled another massage with Danny as I have no doubt that the increased mobility in my abdomen can be either mostly or completely attributed to his deep tissue massage.

**Name and address withheld upon request.**

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### **Testimonial for Wellness @ Work**

From the age of 12 when I started having a menstrual cycle, I was unlucky enough to have both very heavy and painful periods. This was a huge hindrance to me with both my sport and life in general.

Symptoms I experienced included, Vomiting with pain, Fainting due to the pain, Pain before and during periods, Chronic pelvic pain throughout the month especially with sport, Lower back pain, Heavy periods, Painful bowel movements especially during menstruation, Painful urination during menstruation, Fatigue, Diarrhoea and constipation.

I went to the Doctor on a number of occasions regarding these symptoms, with the only solution being to put me on the contraceptive pill. This obviously helped with slightly less heavy periods and pain but only masked the underlying condition. It took 9 years of persistence and I finally saw a specialist at 21, she performed a laparoscopy confirming that I had severe endometriosis and she burned off the tissue during the procedure. This made me feel much better for a wee while but slowly the pain got worse again so at 25 I had another laparoscopy and again they removed scar tissue, this time it was all over my ovaries and bowel. I was again put on a contraceptive pill and wasn't having periods at all for almost 3 years, I had further tests at 27 that confirmed I would need yet another laparoscopy. My Doctor also said if I didn't have children before I was 30 I was unlikely to have them due to the severity of my endometriosis thus causing infertility, which was my worst fear.

At 28 a friend in my squash team recommended Chris Toal at Wellness @ Work as someone who had a lot of success with endometriosis through therapeutic massage so I thought it would be worth a try instead of another operation. Chris performed the "raro" technique on me as well as full therapeutic massages including using his massage 'body' tool. Within a couple of months I was off the pill, having periods again and with much less pain than ever before. I went for massages monthly for 2 years to keep the pain at bay. At 30 years old I fell pregnant and we had a healthy wee boy, Ethan, who is nearly 2 now. About 11 months after having Ethan, my pain was slowly getting worse again so I went for another massage, this time with Danny, he also did the same technique and soon after I fell pregnant with my second boy Dylan. I really feel if it wasn't for Chris and Danny my dream of having children would never have come about. I have a new found passion for massage and the benefits it can provide without having to go through surgery. I have as a result done a course in massage so I too, may be able to help people like this in future. I also have no hesitation in recommending a lot of friends and family with similar problems to Wellness @ Work.

Thanks a million to both Chris and Danny, you have worked wonders with me!

Kind Regards  
Pip Lodge (Mum)



To whom it may concern,

My menstrual history prior to being diagnosed with endometriosis didn't include heavy bleeding or even that much pain, but I did have a history of irregular periods since coming off the pill and there were several occasions when I felt excruciating stabbing pain that would last a few minutes and then go away. I was concerned about this at the time and at one point I went to hospital where they did some tests but nothing was picked up so it became something that I 'normalised' with.

The actual diagnoses of my Endometriosis came about after experiencing a second Spontaneous Collapsed Lung in 2005 which had me in Auckland hospital on morphine for a week and a tube inserted into my chest cavity to drain the fluid. After a follow up appointment with a Cardiothoracic Surgeon, he referred me to a Gynaecologist after suspicion of possible endometriosis. I was told there is a link between the right-hand side of a woman's lung collapsing and possible endometriosis.

Soon after being referred to my Gynaecologist she performed a laparoscopy on me. I was diagnosed with severe, aggressive, widespread endometriosis - almost on it's way into the fallopian tube. She felt I had endo since I was 15 years old. I was 23 at this stage.

Post surgery, things improved temporarily but it wasn't long before I started suffering from more pain and additional health issues. I wasn't pain free, if anything I was in more pain than before. After having an MRI scan I was diagnosed with Adenomyosis which is endo in the uterus muscle which cannot be removed. My periods were consistently excruciating, sometimes so bad I would howl my head off in bed, completely debilitated, unable to move, my head would feel like it was going to explode, my eyes would swell up and I felt like a walking zombie drugged up on pain killers, unable to string a proper sentence together.

There were occasional times when I would throw up, have to crawl to the toilet and sometimes I would have diarrhoea or be constipated. I used to find travelling long distance in the car and going around corners would activate the pain, I often had blood with bowel motions, stabbing pain like someone had a screwdriver inside me wrenching my organs, throbbing, heavy pain and I was prone to constant cystitis infections, a weakened immune system and was constantly picking up viruses and infections. I was suffering depression, exhaustion and feeling very isolated. I often felt like no-one really knew and understood how intense everything really felt for me, even those closest to me. I started to become quite introverted and found it hard to enjoy life.

During menstruation the pain would spread from my abdomen right down to my knees, to my back and often came with a migraine. I used to take panadol which very quickly led to paradex and then codeine and synflex and sometimes tramadol. Gradually over the years I built up a strong resistance to painkillers and they actually stopped working, hardly providing minimal relief. Pain on this level takes you to places you really don't want to go. I felt very scared, fearful and sometimes found it very hard to remain hopeful. There was a time when I had to have penicillin injected into me after experiencing a ruptured ovarian cyst on the way back from Auckland. I was rushed to the doctors screaming my head off with some of the most intense pain I had ever experienced in my life. I've been told it's on a similar level to labour pain. I almost passed out in the car and lost my voice from screaming so loud.

I would have to say that most months were a living hell for me and those around me and dealing with endo took it's toll on my emotions and my moods, my relationships and my friendships. I have searched high and low for things that would bring me relief and this has been a really strong theme for me in my life from 2005 until present. I have tried a lot of different therapies and have spent thousands and thousands of dollars.

In October 2009 my gynaecologist performed a second laparoscopy. There was little endometriosis found but a lot of adhesions and scar tissue which had my ovaries completely glued down. They had to remove an endometrioma from underneath my left ovary and break up the adhesions which were quite extensive. I was told by my surgeon that there was a possibility that I might have reacted to a product that was used in my first operation called 'spray gel' which is meant to prevent adhesions, but in my body it may have caused the adhesions, but apparently this can't be proven. I don't know much about this but I have heard that it was a product that hadn't been tested properly. I felt very upset and angry about this because I had been putting up with horrendous periods for so long and wondered what my life would have been like if I didn't have this to contend with every month.

After my second operation I was still not pain free. I had new pain and some old familiar stabbing pain. I was still searching for something outside conventional medicine to bring me the relief I so desperately craved. I was so sick of living on painkillers. Eventually I was very fortunate to be given the opportunity to undergo some treatments with Danni Orani from Wellness at Work. I believe this has been the icing on the cake for me in coming out the other side of my condition.

Danni performed 3 deep tissue treatments on me one week apart and then a follow up a month later. The first session for me made me realise just how much pain I was storing in my body. I was so tender, even just touching my lower abdomen felt extremely overwhelming, would make me tense up and want to cry. The first session had me screaming in agony as the stored pain was being released. The following day I noticed that it had completely got rid of my chronic back pain which was a new symptom after my operation and it has not come back since.

The second session released a huge amount of deeply buried stored emotion. I cried the whole way home after that treatment. I had held on to so much for so many years trying to be brave and felt a massive emotional and physical release.

The third session I really noticed that the amount of pain I endured when he performed the techniques wasn't as bad as the first two and I actually noticed dramatic improvements instantly which got better and better after each session. When I had my fourth session I still had this one stabbing pain which felt like it was coming from my uterus and Danni managed to find an adhesion that was attached to the uterus and carefully break through it. Since then I have been almost 100% pain free. I am a new person now! I feel so much more balanced mind, body and soul. I no longer live with the anxiety and extreme stress that I used to. I am able to exercise again, something I wasn't able to do for about 9 months. I can do the things I love, I can plan trips away and have faith that I won't fall sick and feel guilty that I have let everyone down by having to cancel at the last minute because I'm not feeling well.

I am so extremely grateful for their work. I would not hesitate to recommend these treatments to anyone suffering from pain. It really does work!!!!!!

Danni and Chris are very dedicated individuals and their passion for seeing people get well really does come across.

I wish that more women suffering from endometriosis could experience their treatments - I have found them truly life changing.

(Name withheld)

August 2010

### A Husbands story...

For the last five years or more my wife has been suffering from all sorts of health problems. She initially hurt her back while working for me carrying some heavy boxes. We tried everything you could imagine, and literally spent tens of thousands of dollars in the process. While we had some success with some of the treatments her symptoms never fully disappeared, and always returned with a vengeance. She has been out of work since the original injury and has had on going depression as a result, often taking out her frustrations on me. I am an easy going guy but it is fair to say I was pushed to my limit. We were forced to sell a successful business as the stress of taking care of her and running the business took its toll on me.

After my wife had a couple of miscarriages she was diagnosed with endometriosis by her gynaecologist and had a lapoprasky. Her endo was severe and we were told it was all removed. The following days she felt great and we were on top of the world...until the drugs wore off and the pain returned. We were told all the endo was removed and sometimes the nerves remember the pain, so while the pain is not really there it is real to the patient. My wife ended up taking the maximum dosage of gabapensin which along with the high doses of paracetmal that she has been taking made the pain bearable. At this stage my wife was hopeless, she suffered from severe fatigue and often spent about 20 hours a day in bed, or watching tv lying down.

A natural therapist later diagnosed my wife with fibromyalgia. By chance Stephen Burden mentioned to me the success that Danny and Chris were having with fibromyalgia and endo. I phoned up and talked to Chris and was immediately excited he said "what have you got to lose except for her pain" and he told me "if she doesn't get better we will give you money back", that's how confident they were. We went and talked to Brenda at contours in Hamilton who had had the treatment and couldn't say enough good things about Danny and Chris, her results sounded like a miracle, and that's what we needed. She warned us that the treatment was painful, but I think each treatment is different, Brenda is an athlete and has a lot of muscle, my wife is very fragile and normally can't handle much pain, remarkably her treatment in the main was pain free.

When we first meet Danny I knew he was a special character, something about him lets you know he can heal. I had been massaging my wife over the years and have taken her too many treatments but I have never seen her melt into a massage table like she did with Danny, and never seen her so relaxed. Because we had such a long history of pain the first session ended up been a consultation and no healing was done, Danny wanted my wife's full medical history before starting including the surgeons report and results from a MRI scan and back specialist. My wife was very disappointed that no healing took place, but it is comforting to know that Danny wanted to know everything about her history and didn't just charge in, a very professional approach.

After the first treatment my wife was a different person, as a friend's wife said wow she is back to been the girl you married. Her energy returned after about one day and she went back to a standard 8 hours in bed a day. She went out and met friends that she hadn't seen for ages and was able to go shopping, cook and even clean something she had struggled with for years. She told me that she still had pain but the fatigue had gone.

We have just completed our fourth treatment and so far so good, she is feeling much better, the fatigue is still at bay and the pain in her back is all but gone. She still has slight sciatica nerve pain, but this has improved a lot and I am confident when we see Danny in a month he will deal with it. My wife who has had lots of knock backs in the past and had a lot of hope for recovery still thinks it is too good to be true and tells me that it is early days and let's wait and see, the pain might come back. But this doesn't wash with me, every since meeting Danny and Chris I have had nothing but 100% faith in them and their techniques and nothing I have seen has lead me to change my mind.

From a desperate husband thanks guys for giving our life back. My wife's life literally improved over night, our relationship has been saved and I feel I can start living again. I have been out of the workforce now for 2 ½ years, and now my wife's health has improved I can look forward to returning to work. Shock horror she is even talking about working, which is something I had given up on years ago.

It has almost been a month since her last treatment and I am looking forward to seeing you again on Friday. Any husband or partner who has a wife in a similar condition to mine was is welcome to contact me, but at the end of the day what have they got to lose except for the pain. With thanks

Nathan

## Too Hot to Handle?

Not long after I got my first period at the age of twelve, I started experiencing menstrual cramps. As time passed by, the pain ramped up with each cycle and I started to see a pattern – there would be this heavy, dragging pain in my lower abdomen that would commence 2-4 hours before the flow started – that is what is often called in homoeopathic terms the “aura” or preceding event. By age 14, I knew what that pain meant and what it would entail – I would need to go to the ‘Sick Bay’ at school (where they would give me a hot water bottle to ease the pain) while I waited for my mother to collect me and take me home to bed with another warm ‘hottie’ to help ease the pain. As the years went by, this became routine practice – the first day of every cycle, she would need to pick me up and take me home to bed.

When I started work at age 17 in a medical laboratory, the story was no different – each month, I would need to take a day off or immediately take myself home from work when the ‘aura’ of pain started. I knew I had a narrow window to get home, fill the hot water bottle and put myself to bed before it felt like I would pass out with pain. I clearly recall one particular day my colleagues at morning tea watched as I turned paler and paler and I explained that I had my period. I started to feel faint with the pain and hypoventilate and then my hands started to curl over of their own accord (a symptom associated with respiratory acidosis). Fortunately given my line of work, a pathologist was on hand and was able to assist. Needless to say I was sent home and this time I didn’t return to work for another three days.

My boss at the time saw the patterns of my leave from work (and the reason cited) and suggested I start taking a drug called Ponstan – she herself was no stranger to this problem, so was offering the solution that had best worked for her. Despite being the most drug adverse person I know, I went and got a prescription and while it took the edge off the pain, it did not cure the problem. It did however mean I could stay at work and for several years that became my reluctant, yet much needed staple medication each month.

At age 25, I discovered I had a wheat allergy. With observation, I noticed that almost exactly 5 hours after eating wheat (for example pasta for dinner), I would wake with pain in the night. As with period pain, heat in the form of a ‘hottie’ would help ease the discomfort along with passing a bowel motion – the body in its innate wisdom wanted the reactive food gone as soon as possible.

Food allergy testing confirmed I had a wheat intolerance and I started to remove all wheat from my diet. Much to my delight, I no longer had abdominal pain and another huge bonus was that my period cramps stopped too. Occasionally I tripped up and ate something with wheat in - not deliberately, rather because of the hidden wheat or gluten in foods such as flour in vegetable soup to thicken or soy sauce on chicken when dining out. Once I became vigilant in looking at food labels and quizzing restaurants for wheat content, I was able to eat a 100% wheat-free diet. My world was totally different without wheat and for the next 15 years, I had pain-free menstrual cycles that were as regular as clockwork.

When living in America doing research, I started putting a ‘hottie’ on my lower abdomen to keep my core body warm (particularly in the snowy winter months) which also helped warm my peripheries and relax me. After returning to New Zealand I adopted the same pattern of having a hot water bottle on my abdomen and would regularly refill throughout the day. This eventually became habitual practice irrespective of the seasons.

Just over a year ago, I started experiencing period pain again. I knew this time it had nothing to do with wheat, so was quite perplexed. Given my age, I couldn’t rule out that hormones may be playing a role and that I might be walking the path of early menopause. This time the pattern was a bit different – the pain would start 7-10 days before my cycle and then when I started my period, the pain would completely disappear.

In 2009, a friend of mine had introduced me to Bodywall and I was so impressed with the benefits from each work out that I traded my weekly personal trainer for Bodywall sessions. Chris's enthusiasm was nothing short of contagious and we soon started sharing medical insights and information. When I told him about my renewed period pain and he saw it first hand during a workout session, he suggested I go see Danny for some deep tissue massage.

I had my first appointment in late April of this year – 3 sessions over a 3 week period, then a follow up session a month later. After the fourth session, I had to honestly confess that I didn't really feel any different – the pain was still there with the same periodicity of 7-10 days before my period started. In talking about it to Chris, I shared that I still needed to resort to my 'hottie' to take the edge off the pain, just hotter than I normally had on my abdomen when researching. Bingo! The lights went on for Chris and he shared with me the absolute 'No No' about heat and myofascial pain. Unbeknownst to me, I was undoing all of Danny's deep tissue work.

Consequently, Chris suggested two more deep tissue massage sessions provided I ditch the 'hottie' completely and use the "Bodytool" instead when I experienced any pain. I had no idea how addicted I was to my trusty 'hottie' until I had to part with it. Not only was it used to being on my lap up to 10 hours a day (5 days a week) with research, I also took a fresh warm hot water bottle to bed each night to put on my stomach to sleep.

I was committed to giving this my best shot so abstained and hid the 'hottie' in a draw out of eyesight. Following the next session with Danny (over a month without the 'hottie'), there was a remarkable reduction in pre-menstrual pain. I only had ½ hour of pain a few days before my cycle started (versus several days of pain that lasted several hours at a time). The next period was equally impressive with only minor, transient discomfort that wasn't anywhere close to the usual intensity. The magic of deep tissue therapy (and of course Danny's brilliance) really took effect when I wasn't sabotaging the good work with extreme heat to my lower abdomen.

It has now been over two months since my last session with Danny and I am still pain free ('hottie' free) and feeling fantastic. There is an old saying that goes something like "Life is not what you can live with, it is what you can live without" - I can now live without my hot water bottle and I can definitely live without my pain.

So, I give a big hearty thanks to Danny and Chris and the Bodywall team for their medical magic. I only wish such options existed when I was a young woman – my world would have been completely different and so many folk (family, friends, colleagues and bosses) would not have been impacted by my physical situation.

There are from a conventional perspective, very few options available for women that share my previous health complaints and such women are increasing in numbers as the decades pass by. If you are one of those women or know one, then I encourage you to visit the Bodywall team – you have nothing to lose but pain!

Corene Humphreys  
QTA, BHSc, ND, DipMed Herb, DipHom

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My name is Celia Watson and at the age of 14 years old my menstrual cycle got increasingly unbearable. Every month I spent a week in truly tremendous pain causing me to throw up for days and nearly passing out. The pain killers my G.P prescribed ( ponstan and codine) didn't even touch it. I was completely incapacitated. I pushed to see a specialist and ended up under a gynocologist at Ascot Hospital. Here I was diagnosed with suspected endometriosis. The only solution was surgey when I was older, which didn't help me at all because my body and mind could not handle anymore of this pain. We tried another pill supposedly not promoting weight gain. At 15 my life was getting miserable. I had pain all the time, heaps of time off school, unable to go to parties and hang out like most teenagers do. I was almost giving up hope and starting to accept the fact this is my life. I responded to a radio add for "Wellness at Work" that described my symptoms and misery promising a cure. This gave me hope of being a normal teenager. I was booked in a week later and started a series of deep tissue massage type treatments. Yes it hurt. I cried during one session but came out feeling much better each time! After one session a week for 4 weeks I was 80% cured. I had one tight muscle that was easy to identify so went back to get it fixed. So 6 treatments transformed my life. I don't want this to sound like a commercial or anything but take my word for it, please. I don't look back on life because now I have changed completely! The relief

physically, socially and mentally is amazing. Honestly, if anyone has severe menstrual pain like I did Wellness at work is where you should go. Surgery is not even an option, there is no need for scars and weeks recovery. It can all happen in a little amount of massages! Unsure at all? Talk to me.

I would like to give Wellness at work a huge thank you for transforming my life for the better. I can't thank you enough for all you have done for me! The work you do is so inspiring, changing peoples lives and one day i hope to be in a position where I can do the same. Thank you.

Celia Watson, now aged 15. I am completely cured and still can't believe the transformation.

## TESTIMONIAL FOR WELLNESS AT WORK

In October 2010 I started having increased headaches. These were becoming increasingly more frequent and lasting on average 3-5 days. My GP had diagnosed them as tension headaches. I was given diazepam, which although making me feel drowsy did little for the headache, I followed this with physiotherapy to my neck, back and shoulders, which in the short term gave some relief, but within 3-4 weeks the headaches were back. This time when the pain became severe I was given pethidine, again with a similar drowsy effect (and now added nausea) but little effect on the headaches.

I was becoming more and more unhappy in my everyday life as I was having to take time off work, the headaches were increasing in frequency and intensity and I couldn't seem to get any relief with simple or strong analgesia.

Finally at 5am one Saturday morning when the pain had kept me awake for almost 24 hours and had become severe I attended an accident and medical centre where I saw a locum Dr who again diagnosed tension headaches. This time, when I asked what I could do to give me some relief I was told that analgesia would do little for the headaches as I needed to treat the root of the problem which he believed to be from a back injury I had sustained 11 yrs previously and had been having problems with since. I had been having physiotherapy for this 3-4 times a year for at least 5 years.

The Dr suggested several different options to me one of which was deep tissue massage. From the little he told me I felt the reasoning behind deep tissue massage made sense and to be honest I was at the stage where I'd have tried pretty much anything for some relief.

So I was given Chris Toal's name and contact details.

Within a week I was booked in to see Chris for my first deep tissue massage. The first session was pretty painful but by the end of this session I could already notice my headache was markedly improved. Within 24 hours I would say the headache was all but gone and I was starting to feel much happier. I was actually looking forward to the next session. I had 2 further sessions of deep tissue massage and since then I have not had any further tension headaches, in fact I can't think that I have had any headaches. The back pain I had lived with for 11 years has all but gone. I have had no time off work due to either headaches or back pain and I no longer think about the pain, which in hindsight took up a lot of my time and energy.

At the initial session Chris had asked lots of questions and during this we discussed a very unsightly scar I had on my abdomen from surgery when I was 3 months old. This scar was deep, solid, and did not allow any of the skin around it to move or stretch. I have always just lived with this as I did not think it was particularly significant or that there was much I could do about it. I also explained that I had been diagnosed with Polycystic Ovarian Syndrome (PCOS) since the age of about 15.

I was having around 4 periods a year and had been told that at 37 years old should I try, my chances of conceiving naturally were slim.

Chris advised me that he could work on my scar and on the PCOS at the same sessions when I was having deep tissue massage on my back. After just one session when Chris used the ScarsAway for a short time the difference in appearance was noticeable immediately. The scar appeared to be dis-attaching from the underlying tissue and instead of the 'normal' redness I was used to, the scar was whiter and less visible. When I showed my partner and sister they were amazed at this change in such a short time. Chris also worked on my PCOS at 2 of these sessions and advised me that for the first time ever, I should start to have a normal menstrual cycle. After the second session of working on my PCOS, Chris warned me to be careful if I did not want to get pregnant in the next month as I would be very fertile.

I was due for one further session with Chris on my return from a trip overseas for Christmas, however I had to cancel this appointment as Chris was right to warn me....I had fallen pregnant the first time we tried! My skepticism at Chris' warning was put well and truly into check and my partner and I are over the moon as we had truly believed we would be looking at a future of fertility treatments.

I am now 25 weeks pregnant, my scar I would say is 80% better than it was in appearance, I have no headaches, my back pain is almost gone ( I will have that final session after this pregnancy).

I feel like I have my life back. I know that sounds like I had no life before, but so much time was taken up with managing pain, backache and headaches and attending physiotherapy that not having to do this and enjoying pregnancy is wonderful.

I have told many people about Wellness at Work and the changes I have experienced through deep tissue massage and ScarsAway and would have absolutely no hesitation in recommending their services.

Julie Avery

BA(Hons) Applied Psychology, RN, DipHE

## Reference Material

More information on CPPS / Endometriosis can be found at these links:

<http://vimeo.com/7519907> <http://vimeo.com/7521530> <http://vimeo.com/7521727>

More information on Wellness at Work Ltd can be found here: [www.wellnessatwork.co.nz](http://www.wellnessatwork.co.nz)

<http://tvnz.co.nz/close-up/break-through-skin-treatment-2790967/video>

<http://tvnz.co.nz/content/2793244/video>

More information on Bodywall® can be found here: [www.bodywall.com](http://www.bodywall.com)

More information on ScarsAway® can be found here:

[http://www.azollahealth.com/index.php?route=product/product&product\\_id=44](http://www.azollahealth.com/index.php?route=product/product&product_id=44)

Further understanding of stress related contracture formation can be obtained here:

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