

History of the Graston Technique

The Graston Technique, researched at Ball Memorial Hospital and Ball State University in Muncie, Indiana, was conceived by an athlete who suffered a debilitating knee injury while water skiing. Frustrated at the lack of rehabilitation progress following surgery and conventional therapy, he applied his professional background in machining to create the initial Graston Technique instruments to treat his soft tissue injury. In 1994, TherapyCare Resources Inc., parent company of Graston Technique, opened an out-patient clinic in Indianapolis, where outcome data was gathered on a wide range of chronic and acute injuries. Five years later, the company turned all of its attention to teaching and training clinicians and research on the technique. Today, there are more than 1500 clinicians--including athletic trainers, chiropractors and therapists--who use the Graston Technique protocol to effectively detect-treat-resolve a myriad of connective soft tissue dysfunctions. This growing list of practitioners and clinics comprises what now is known as the [GT Provider Network](#). Graston Technique is part of the curriculum at four colleges/universities and is actively engaged in research projects at Texas Back Institute, New York Chiropractic College and St. Vincent's Hospital in Indianapolis. The company has five U.S. patents on the instruments and technique method. Michael I. Arnolt, TCR president, is a founder of the 11-year-old company.

Research Findings

Research conducted by Graston Technique trained clinicians at Ball Memorial Hospital and Ball State University, Muncie, Indiana, found that the controlled micro trauma induced through the Graston Technique protocol, increased the amount of fibroblasts to the treated area. That amount of inflammation to the scar tissue helps initiate the healing cascade. The structure of the tissue is rearranged, and damaged tissue is replaced by new tissue. Ice is then applied to reduce the pain and exercise is implemented to increase function and range of motion.

Other clinical studies continue to document the success of the Graston Technique, generally achieving better outcomes when compared to traditional therapies, and resolving injuries that have failed to respond to other therapies.

Six stainless steel instruments form the cornerstone of Graston Technique

"The Graston Technique Instruments allow a deeper, more sensitive palpation and treatment of fibrotic restricted tissue."

—Warren I. Hammer, MS, DC, DABCO

The curvilinear edge of the patented Graston Technique Instruments combines with their concave/convex shapes to mold the instruments to various contours of the body. This design allows for ease of treatment, minimal stress to the clinician's hands, and maximum tissue penetration.

The Graston Technique Instruments, much like a tuning fork, resonate in the clinician's hands allowing the clinician to isolate adhesions and restrictions, and treat them very precisely. Since the metal surface of the instruments does not compress as do the fat pads of the finger, deeper restrictions can be accessed and treated. When explaining the properties of the instruments, we often use the analogy of a stethoscope. Just as a stethoscope amplifies what the human ear can hear, so do the instruments increase significantly what the human hands can feel.