Clarity

Clarity = clearness or lucidity as to perception or understanding

I have been fortunate enough to have spent the last 10 years growing and learning through the PRI "process", and an incredible process it has been. Over those years, I have remembered and made notes of some key phrases which at times I would just stare at Ron, James or Mike and it might not really register what they were trying to get across. As I have become more proficient and gained an enriched knowledge of PRI, some of these statements have come through with such *clarity* that I feel like at times I have an "Ah-ha!" moment which only further enriches my understanding.

I thought I would share some of them as I am sure many of you have heard them as well. By no means is this a complete list, but a good start. They are listed in an order of progression of principles, not courses.

Guilty until proven innocent

 When asked from other clinicians and practitioners about "the carry over" and "how I integrate PRI activities into treatments", I will often say that I can't NOT look at things from a PRI perspective anymore. Whenever I say that, I am brought back to this statement I remember Ron stating years ago with significant conviction—and I didn't thoroughly appreciate it until recently. It's true...

Relative symmetry

 As we all know, the human body is not anatomically symmetrical, nor can it be. When we discuss symmetry, we are really talking about *relative symmetry* and I use this phrase often when discussing what we are trying to achieve.

Neutral means you are in a state of transition

 We can achieve a state of neutrality which is ultimately what we are looking to move through and around. In this state, the systems are optimally positioned, inhibited and/or facilitated in order to transition into the next phase of. . . whatever it is they are going to do.

You have to create instability before introducing stability

Another phrase I was unable to truly appreciate until just recently because that is not what we have ever been taught or desired in our patients. "Super stiffness" and other buzz words is what the goal of many programs entails. I liken the spine as one of those Chinese Finger Traps where as things get twisted and torque is produced, compression and impingement occurs. We need to unravel these layers in order to work into "stability" training.

• The brain is the generator and the thorax is the power source

"The body was designed for movement but the brain was designed for efficiency" (<u>Born To Run</u>, McDougall). Our systems are in a constant state of activity, albeit some of them more passive than others, and the brain further enables our ability to make it happen it just may not be in an optimal pattern. Improving one's ability to integrate these systems is our ultimate goal.

Exhalation requires a good state of exhalation and inhalation requires a good state of exhalation or You need good exhalation activity during inhalation

Taking the concept of eccentric activity to its most basic level. If the pelvic floor, internal intercostals, obliques and some of the abdominals are in a contracted state and thoracic volume is restored by elastic recoil of the diaphragm, than they need to maintain some degree of muscle activity in an eccentric fashion as the body begins to re-inhale. If not, than that is extension and hyperinflation.

Walking is breathing and breathing is walking

 Brilliant. One cannot achieve and maintain a Z of A without proper reciprocal activity in a pattern of reduced thoracic and pelvic extension. Optimal diaphragmatic excursion happens with equal arm and leg swing where the foot, ankle, knee, hip, pelvis, thorax and cranium pronate and supinate through the gait cycle.

• Integrate activities at times when you are most integrated

o I will take compliancy with someone's home program whenever I can get it. I will often have patients do their HEP in the morning and at the end of the day to "get ready for the day and then to clean up any mess they may have made". That being said, the above statement rings very true. If someone's system is not turned on—either properly or improperly, metabolically or cognitively—than the body will likely have a difficult time knowing what to turn on or off.

One really needs to develop a good understanding of how NOT to use the floor

Feedback can come from a number of different sources. Certainly the ground gives us excellent tactile, neuro and proprioceptive information to work with. Many treatment plans as well spend a lot of time working in closed-chain training as well. However, what is the body able to produce when it does not have access to this medium? That is where a lot of trouble occurs.

PRI is about developing reciprocal activity

That just about sums it all up. . .