

DNM REFERENCES

[DermoNeuroModulating \(THE BOOK\) in English](#)

[In French](#)

[In Japanese](#)

[In German](#)

[Dermoneuromodulating.com](#)

S. W. Mitchell (1829-1914), [Injuries of Nerves and Their Consequences](#). (FULL TEXT) Out of copyright. Excellent descriptive text of nerves and pain symptoms related to nerve damage.

Good overview of neurons, en français. Use DeepL Translator or Chrome browser to translate. [Neurobranchés](#).

[Good description of peripheral nerve and nervi nervorum, implications for neuropathic pain.](#)

A very long and good [deconstruction of DNM](#) during a Facebook discussion, June 2016, started by Bronnie Lennox Thompson.

PainResearchForum: [News archive](#)

IASP [terminology page](#)

Treede R-D, Rief W, Barke A, Aziz Q, Bennett MI, Benoliel R, Cohen M, Evers S, Finnerup NB, First MB, Giamberardino MA, Kaasa S, Korwisi B, Kosek E, Lavand'homme P, Nicholas M, Perrot S, Scholz J, Schug S, Smith BH, Svensson Peter, Vlaeyen JWS, Wang S-J, 2019, [Chronic pain as a symptom or a disease](#). Pain Jan 2019 - Volume 160 - Issue 1 - p 19–27

A 21-page essay by Dr. Harriet Wordsworth on the history of pain through the centuries. [The History of 'Biopsychosocial' Pain – A tale of Gladiators, War, Papal Doctrine and a Wrestler.](#)

[The interoceptive turn: The science of how we sense ourselves from within, including our bodily states, is creating a radical picture of selfhood](#) (Aeon, June 2019)

SCIENCE AND PHYSIOTHERAPY: PHYSIOTHERAPY AND SCIENCE

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DNM RESEARCH

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2. Nishar Basha, K A (2019) [A Study on the Effectiveness of Dermoneuromodulation on Neck Pain and Disability among Patients with Cervical Spondylosis](#). Masters thesis, RVS College of Physiotherapy, Coimbatore.

Jan/2020: [German] Roth, M. [Chronische Schmerzen und Dermoneuromodulation \(DNM\)](#). *Manuelle Medizin* (2020)

Jan/2024: [Egypt] [Effectiveness of Dermoneuromodulation Techniques in Patients With Non-specific Chronic Neck Pain: A Randomized Controlled Trial](#)

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THE BASIC PREMISE:
MANUAL PHYSICAL THERAPY MOVES NEURAL TISSUE, HELPS PEOPLE MOVE.
MOVEMENT FEEDS NEURAL TISSUE, HELPS PREVENT CHRONIC PAIN:
EXERCISE CAN HELP PREVENT DISEASE, REGULATE MOOD

PREDICTIVE PROCESSING

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EXERCISE AND PAIN

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(From Bronnie Thompson's blogpost, [Taking a Peek Under the Hood](#))

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TOUCH AND PSYCHOSOCIAL ASPECTS

From Ayah Ismail's blogpost Nov 17'15, "[What our hands do](#)"

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Current def: An unpleasant sensory and emotional experience associated with actual or potential tissue damage, or described in terms of such damage.

Proposed def: Pain is a distressing experience associated with actual or potential tissue damage with sensory, emotional, cognitive, and social components.

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Fig. 3. The boot and nail as it penetrated the boot while worn by a 29-year-old builder. The nail passed directly through the builder's toes without causing any tissue damage but the builder expressed considerable pain and distress before the boot was removed (*From Fisher JP, Hassan DT, O'Connor N. Minerva. Brit Med J 1995;310:70; with permission.*).

From Fisher et al. 1995:



A builder aged 29 came to the accident and emergency department having jumped down on to a 15 cm nail. As the smallest movement of the nail was painful he was sedated with fentanyl and midazolam. The nail was then pulled out from below. When his boot was removed a miraculous cure appeared to have taken place. Despite entering proximal to the steel toe cap the nail had penetrated between the toes: the foot was entirely uninjured.—J P FISHER, senior house officer, D T HASSAN, senior registrar, N O'CONNOR, registrar, accident and emergency department, Leicester Royal Infirmary.

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OLD BUT GOLD - [CLASSIC PAPERS](#) COLLECTED BY FIRMANSYAH PURWANTO

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(Particularly for women.)

EXCERPTS:

“Of the initial 1043 studies, 144 studies were included, containing 227 cases. 117 cases described male patients with a mean age of 45 (SD 12) and a mean age of 39 (SD 11) for females. Most patients were treated by chiropractors (66%). Manipulation was reported in 14 95% of the cases, and neck pain was the most frequent indication. Cervical arterial dissection (CAD) was reported in 57% (P=0.21) of the cases and 45.8% had immediate onset symptoms. The overall distribution of gender for CAD is 55% (n=71) for female and therefore opposite of the total AE.”

“The majority of patients with reported major AE were treated by chiropractors (65.6%), 5.3% by non-clinicians, 4.8% by osteopaths, 3.1% by physical therapists, 2.6% by other medical professions (e.g. general practitioner), 2.2% (= 5 cases) by self-treatment, 0.4% by manual therapists. For 15.9% of the cases the profession was not described.”

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BENEFITS OF MASSAGE (Bodhi Haraldsson)

- 1) Reduce the α -motoneurone pool excitability <http://goo.gl/8tZbrn>
- 2) Neural correlates of a single-session massage treatment <http://goo.gl/YdMb2V>
- 3) Massage *may* modulate immune parameters <http://goo.gl/Ha7Bnu>
- 4) MLD provides acute neural effects that increase relaxation in subjects with psychological stress <http://goo.gl/tMWtLx>

5) Provides acute neural effects that increase relaxation and decrease anxiety and pain intensity in patients <http://goo.gl/oLvDrK>

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