

### Test and Treatment of the Costoclavicular Ligament according to Barral



Fig. 17.8

#### Starting Position

The patient is in the supine position. The practitioner stands on the side to be treated.

#### Procedure

Palpate the costoclavicular ligament for sensitivity.

To treat, apply frictions or inhibitions to the sensitive areas until the pain has disappeared. Pressure on the sensitive areas should therefore be just strong enough to barely cross the pain threshold. Treatment success can then be evaluated sufficiently.

### Compression and Decompression of the Clavicle Along the Longitudinal Axis according to Barral

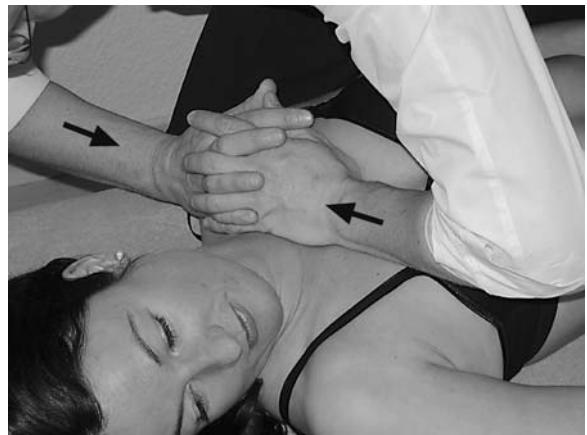


Fig. 17.9

#### Starting Position

The patient is in the supine position. The practitioner stands on the side to be treated.

#### Procedure in Compression

With the lateral hand, hold the acromial end of the clavicle between the thenar and hypothenar. With the medial hand, hold the sternal end of the clavicle in the same way. Place the fingers of both hands on top of each other over the clavicle.

#### Testing Sequence in Compression

Compress the clavicle simultaneously with both hands. Take note of intraosseous and fascial tensions as well as of sensitivity to the compression. In a second step, translate the clavicle laterally and medially.

#### Treatment in Compression

Translate the clavicle mediolaterally.

For an additional treatment option, you can apply fascial unwinding to the clavicle under compression.

You can conclude treatment with a recoil: increase the compression for one or two breaths during exhalations and maintain during inhalations. When you have reached the greatest possible compression, abruptly release it at the start of the next inhalation.