



Well it was over a year in the making, but finally they ran my feature on NEWS-Line for PT's & PTA's.

Thanks NEWS-Line for the feature. If you or someone you know would like to be featured you can contact them through the link below. The more of us practicing in an integrative fashion that get our stories out, the more we become mainstream and eventually will be the standard!

Friday, April 16, 2010



Feature Story



Q&A with Matthew J. Taylor, Owner and Founder of Dynamic Systems Rehabilitation Clinic and Method

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Matthew J. Taylor, PT, PhD, is the owner and founder of Dynamic Systems Rehabilitation Clinic and Method, past president of International Association of Yoga Therapists, a board member of the Academic Consortium of Complementary and Alternative Health Care, and an APTA member in the Orthopedic and Private Practice sections. He graduated from the California Institute of Integral Studies, in San Francisco, in 2006, with a PhD emphasizing Individual and Organizational Transformational Learning and Change. He has also earned his master's in Physical Therapy, his BS in Psychology, and his Professional Yoga Therapy Certification. Matthew's approach to therapy is focused on whole systems personal rehabilitation, using the Dynamic Systems Rehabilitation Method.

Q: What motivated you to become a physical therapist?

A: Long ago, as an undergraduate, I was attracted by the possibility of solving problems with people using life science, critical thinking, and short-term outcomes with immediate results. This directed me toward acute care orthopedics, a large part of my US Army/Baylor training.

I was also involved early in my career with corporate wellness and fitness. This eventually led to my opening my own integrated PT clinic/health club in 1993.

Despite addressing general wellness issues, I discovered very often those "resistant" patients had other needs that affected their ability to move and function. That notion, coupled with my own progressive low back dysfunction that didn't respond to traditional care, "encouraged" me to look deeper for the source of my pain.

Q: What kind of facility is Dynamic Systems Rehabilitation Clinic? What is the facility's mission?

A: It is small with two PTs and two staff members.

Our mission is to treat the whole person by assessing and addressing the systems that are affecting the person and their health challenge. People are fascinated to learn how their sleep dysfunction, low back pain, and IBS are all related problems.

Our niche is supporting the people with the most complex, chronic challenges in a facility with one dusty old

ultrasound unit and a swiss ball in the closet—nothing else.

It is literally empty room therapy.

The therapist and patient together discover what influences and contributes to their health.

Q: What types of patients do you usually encounter?

A: I see patients with chronic pain, multi-site, and multiple diagnoses, usually ages 15-90. I also see patients diagnosed with the chronic neurological challenges of MS, Parkinson's, etc. Persistent neck/spine pain is probably 40% of the caseload.

Q: Why do you think your approach to rehabilitation is different than other clinics?

A: We offer private, focused intensive care in a beautiful location with a single therapist that knows the patients intimately—a whole person and their systems rehabilitation approach. We generally see people for 60 minutes weekly over two to three months.

Q: Why did you decide to focus specifically on whole systems personal rehabilitation?

A: The patients experience benefit from the whole systems personal approach by calming the almost universally hyper-vigilant central nervous systems. From that base, we introduce painless, gentle movement strategies and work to create home lessons to explore the process further and for future visits. People get one or two things to work on and are expected to spend 20 minutes a day working on it.

We listen to their story, and help them examine and reformat their story based on education and experience. Most are amazed that this is the first time anyone has looked at their entire health challenge spectrum and showed them from science how they are all either the result of, or directly impacted, by the sympathetic dominance in their nervous system.

This whole person, or integral insight, makes deep sense, restores order and perspective in what so often is chaotic and fragmented care without a central leadership or perspective—that is the Dynamic Systems Rehabilitation Method. It works, its of value to the patient (one part of the EBM triad), it honors clinical mastery (another part of the triad), and its all firmly rooted in evidence and science (the third aspect of EBM).

Q: What is the most important part of your work in rehabilitation?

A: Restoring hope in what is often viewed as a hopeless situation for my clients is important. Giving them meaning gives me meaning—a nice feedback loop. The meaning they apply to the situation is theirs (an empowerment approach), the tools are simple, non-violent, and effective—so, they use them, and they are tools that harness the technologies of change, generating increased comfort, efficacy, and function in the real world.

If it has to be complicated, awkward, or ineffective, it wastes both of our time, has no meaning, and diminishes the richness and "sacredness" of healing for both of us.

Q: Are there any challenges to the DSR Method?

A: Training other PTs in the DSR Method is a challenge, as I can't provide service to meet the market demand. We're forming a curriculum and an institute to remedy that situation and have brought in our first intern. Daily, it is a challenge to be present for the clients and to teach/create content for the training and keep it fun. The tension between the urgency of the need and the reality of change over time is a discipline that requires patience, resolution,

and trust.

Q: Are you currently involved with any research projects?

A: Yes, I am currently involved in two. One project is at the Courage Center in collaboration with my colleague, Matthew Sanford. The Courage Center wants to become the first mind-body-based rehab center in the country. We've completed a two-year study, which was an organizational change study that I designed, meaning the subjects were the employees. By empowering them with a richer mind-body relationship with themselves, it transformed many aspects of care and HR dimensions in the organization.

The second project is again with Matt Sanford, and this time we're in collaboration with Dr. Barry Komisaruk, PhD, assistant dean of Psychology at Rutgers University.

We're trying to identify the extra-cordal pathway, which Matt utilizes to sense his balance and position that allows him to do things other complete T4 paraplegics can't.

Q: What are you worried about when it comes to the physical therapy profession?

A: The great concern I have is the belief that various systems forces seem to cause many PTs to compromise their spirit by working in situations that limit or prohibit them from practicing with any creativity. This situation is not sustainable long-term and requires individuals to reassess and act responsibly to change their local environment.

We are the system, it isn't "other than us," and when we begin to act like we are the system, change will occur. To blame insurers, physician-owned practices, or patients, is missing the mark.

Q: What is the most rewarding part of your job?

A: It is rewarding to celebrate the changes, discoveries, and tears with my clients as we move through our time together. They are heroines/heroes and they are the sages—not me or any other PT.

Q: What is the most important thing you've learned so far?

A: The more humility and awareness I bring to the time with clients, the more surprises and happy discoveries I make when I quit pretending like I'm the healer or fixer in the relationship. Then, we both leave the encounter more embodied and more energized than when I came in the room. I've had many great teachers to thank for that insight and feel a responsibility to share with others now.

Q: What advice do you have for other therapists?

A: First, start your own personal practice of reclaiming your mind-body awareness—nothing beats working on our own challenges first. My back pain led me to what I now know.

Second, question every assumption and test them. Too often we imagine that others have some higher authority.

Third, take a couple evenings to go back and reread the original work on evidence-based medicine and some of the literature around clinical mastery. What we're being shoveled as EBM is distorted and disempowering. As professionals, we have a responsibility to not just take what is presented as truth, but critically reflect and discern for ourselves.

Finally, know that you are inviting change by practicing the technologies of change that are millennia old—so, change will happen and it will surprise. You'll feel more alive and more engaged than you have in a long time and

maybe even ever!