

Kundalini Fascia Theory

Axioms (discussing humans)

1. The physical shape of a body is architected by DNA. Until DNA's design is fully expressed, the body remains immature.
 - a. Let an immature body be called pre-Kundalini
 - b. Let a mature body be called Kundalini
2. The physical shape of a body is expressed via fascia.
3. Kundalini does not take shape automatically via aging.
4. Kundalini takes shape via cooperation between body, mind, and environment.
5. Experiencing a stable relationship between body, mind, and environment is the purpose of physical reality.
6. Beyond Kundalini aligns with enlightenment, Samadhi, or stable connection to Telly (see Telly Theory).
7. Humanity in 2025 exists in a pre-Kundalini state.

Definitions

- **Body:** a human body.
- **Fascia:** a continuous, three-dimensional web of connective tissue that surrounds and integrates every cell, vessel, organ, and bone.
- **Tensegrity:** a structural principle in which compression and tension maintain balance throughout a network.
- **Adhesion (granthi):** an area where fascia layers have become stuck or dehydrated, limiting movement, conductivity, and awareness.
- **Pre-Kundalini:** a body with partially uncoiled fascia.
- **Kundalini:** a body with fully uncoiled fascia.
- **Beyond Kundalini:** enlightenment or Samadhi as stable connection between mind, body, and environment (Telly in Telly Theory is the 'intelligence' hosting mind, body, and environment as one coherent system).
- **Mind:** consciousness and its mental faculties.
- **Environment:** energy, waves, and particles external to the body.

Core Hypothesis

Fascia is not an inert wrapping; it is the living interface between body, mind, and environment. It both records and transmits experience, acting as the missing link between physiology and consciousness.

Kundalini is not a metaphor; it is the awakening of fascia's full electrical and mechanical potential. It's the coordinated unfurling of a tensegrity network so perfectly aligned that energy, blood, lymph, and awareness flow without resistance.

When fascia is balanced, the entire organism functions as a single coherent field, capable of self-repair, higher intelligence, and emotional stability. When fascia is restricted, awareness itself becomes fragmented. Humanity will experience a new age of health if we learn to achieve Kundalini by attending to our fascia, therefore humanity should reframe our approach to healthcare via a fascia lens.

Part 1: Fascia Discussion

Let's begin by framing your body using physics with fascia as the bedrock.

Every cell, organ, and limb you have participates in a tensegrity structure (compression balanced by tension). Science has traditionally underestimated fascia, classifying it as secondary connective tissue rather than a dynamic organ of form and feeling. Modern imaging and dissection reveal a liquid-crystalline network capable of transmitting force, vibration, and electrical charge.

You contain this amazing web of resilient, tactical, self-modifying connective tissue that houses your bones. Fascia is not passive wrapping but an active, intelligent matrix that shapes and informs every aspect of human function. Bones have high compression strength and distribute force from top to bottom with minimal loss of energy. The bones push outward like struts; the fascia pulls inward like cables.

Fascia also houses muscles that facilitate the movement of bones relative to each other via expanding, contracting, or creating torsion (twist) near structures called joints. In the core of your body, contained within the fascia, muscles, ribs, spine, and pelvis, exists a cavity that can increase and decrease the body's pressure on a macro scale (rapid distribution) via breath and activation of elastic tissue.

Fascia converts mechanical pressure into biochemical and electrical responses. This process, known as mechanotransduction, enables the body to translate movement into cellular instruction. A stretch is not merely elongation - it is a conversation between cells. The fibroblasts sense tension, release signaling molecules, and reorient collagen fibers in response. Through this mechanism, movement literally rewrites tissue.

The above sets the mechanical foundation for what your non-physical mind needs to move in physical reality. When tensegrity is intact, posture becomes self-supporting and movement feels effortless. When it collapses, effort replaces flow, and chronic pain emerges. To function, this mind-fascia-bone-muscle-joint-pressure system requires fuel

consumption, nutrient distribution (slower, micro-scale pressure distribution), and waste clearance. Thus, your fascia houses subsystems called a digestive track, blood/pump/vessels, and the lymphatic system.

For the body and mind to navigate their external environment requires sensory receptors and a way to process inbound information. Thus, your fascia houses a nervous system and a brain.

Fascia stats:

- One body-wide system of tension and pressure tugging on itself with bones inside; there are no separate pieces, but we can identify (mushy) structures and talk about them
- 30% of the protein in your body (mostly collagen and elastin)
- 10x more densely packed with proprioceptive nerve receptors compared to muscle tissue

Fascia can be many forms like flat sheets or rolled up spirals (think Fruit Roll-Ups). It is matrixed like an interconnected web sticking and unsticking to itself as needed. There is supposedly a difference between fascia and linear tendons, but I disagree. I think tendons (possibly cartilage) are meant to uncoil into longer, blood-rich fascia. I think patterns (and loss) of body hair, skin tags, moles, birthmarks, pimples, and the swirls on your fingertips and top of head are all indicators of swirling energy distributed and flowing within your fascia system (yet frozen in a moment in time, as you).

If you think of bones as tall pillars resisting gravity while they support the mushy bits, you are incorrect about the basic mechanics of your body. The human body as described above forms a system called a tensegrity, which is mechanically different (and better) than a system relying solely on compressive forces.

The physics is comparable to embedding steel rebar in concrete. The compound structure has (almost) the compressive strength of concrete and the tensile strength of steel. Skyscrapers are only possible because engineers figured out rebar distributes tension in a way that prevented concrete from cracking.

Multi-directional forces in a tensegrity cooperate to increase mechanical strength, mobility, and reduce energy loss. When a tensegrity is taught with evenly distributed pressure it is a mathematically more advanced system than a linear, pillar-based system. When a tensegrity is loose with unevenly distributed pressure it loses mechanical and structural stability.

In the case of a tensegrity-based human body, we have collagen's tensile strength and load distribution, elastin's elastic recoil and energy return, and the load-bearing compressive ability of bones. This is significantly different from bones that hold up mush. It matters because to care for a complex machine, the mechanic needs to be turning the appropriate wrench.

Today's physicians have the wrong tool bags, as they are focused on the things inside fascia instead of fascia itself. Has your doctor ever asked you how your fascia feels or recommended a fascia-based treatment?

X Marks the Spot

Your fascia could be a fully uncoiled tensegrity. If it's too difficult or takes too much time to reach Kundalini or Samadhi, you can still relieve chronic aches and pains. You can have more strength, fewer injuries, and a youthful appearance.

This section marks the relevance between fascia and Hinduism. I highlight this because there is a wealth of knowledge waiting to be tapped simply by connecting these dots.

Adhesions (granthis) are: locations in the fascia web where fascia either never uncoiled or it got stuck to something it shouldn't have. Like a flat Fruit Roll-Up you dropped on a tile floor and now it's a tasty sticker, only this is cellular biology and your arm is stuck to your armpit, your leg is stuck to your groin, and your eyes are stuck to your nose – misaligned fascia causes bags and undereye grayness, not sleep, alcohol, thin skin, or cucumbers.

Adhesions (granthis) cause: possibly every physical problem. I am certain they hinder mobility and cause aches, pains, and cramps. This model is untested, but if I am correct, this paper (next page) presents a logic-based rationale suggesting underlying causes and treatments for humanity to explore for everything from baldness, erectile dysfunction, and miscarriages to obesity, cardiovascular disease, autoimmune conditions, and cancer.

Adhesions (granthis) are formed via: lack of integration between mind, body, and environment. Our mechanics are influenced by all motion we observe from birth. How our parents walk, cough, sneeze, and talk. We watch our friends and teachers. Eventually we settle on our own mechanics. Fascia does not seem to uncoil until the mind engages with it in a cooperative way. What I mean is your mind worries for your fascia like a mother. It is acutely aware of energy momentum and velocity flowing within your system, and when your breath is sloppy or your motion is jerky, your mind sees an untamed firehose of energy shooting towards your genitals.

To engage with fascia closer to joints and tendons where adhesions fester into granthis, people need to sync the speed of their motion with movements that facilitate engagement with deeper tissues. Hence yoga.

Adhesions are released via: see Hinduism for generations of wisdom related to granthis. In addition to yoga, bandhas, shakti mats, nail beds, meditation, Ayurvedic foods and breathwork, I incorporated the following:

- Moisturizer (experimented with dozens and preferred those with hyaluronic acid, cocoa or shea butter, or Manuka honey)
- Dual massage guns
- Tissue scrapers (Chinese Gua Sha)
- Pilates reformer
- Long-hold stretches (still kind of yoga)

Common locations: see Hinduism (chakras and granthis) then compare to lines of fascia (e.g., Dr. Thomas Myers' Anatomy Trains). Find out India had most of these instructions 3,000 years ago. My personal experience included: between my big toe and second toe, Achilles tendon, kneecaps, elbows, groin, pelvic floor, coccyx and lower back, beneath belly button, sternum, throat, base of skull, and between eyes.

Part 2: Leo's Kundalini Fascia Model of Healthcare

Age-related Considerations

Pre-birth

- The womb is in the middle of the core. Pressure, tension, and adhesions are most turbulent here. Prenatal care can happen before birth in the form of women who grow up doing yoga and breathwork instead of a last-minute Lamaze cram session.

Baby

- They went from wet to dry and they're literally consuming the environment around them to grow. Fascia should be moist so it can unfurl smoothly. Ayurvedic foods are probably right. Warm water (for much longer than the usual bath), swaddling, moisturizer, massages, and gentle pressure (like squishing their tiny beans) are all aligned with this theory.

Toddler and elementary school

- We watch toddlers wobble around and collapse for a few years. They should do yoga, breathwork, and receive structured coordination-based lessons at school

while this unfolds. I think toddler classes on sitting, standing up, walking, breathing, and running properly would benefit humanity more than parts of the current elementary school curriculum. 50/50 would be ideal.

Teenager

- I think uncomfortable puberty could be a relic of the past. It seems like a situation where fascia begins hitting limits and locations across the tensegrity begin to stress each other out. E.g., face pimples. I think acne is not caused by clogged pores (otherwise pore cleansers would work overnight), instead it is generated by misaligned layers of fascia (in the complex terrain of the face), resulting in an inability to manage pressure. Thus bumps and pimples on the surface. Does the earth have clogged dirt we can seep away, or are mountains and volcanoes the result of tectonic activity deep within?

Adult

- Adults of today were never educated about fascia (or Telly). We developed bad habits – but it's possible to undo them. Our kids won't have to undo anything if we show them how to care for their bodies while they grow.

Senior

- Thank you for closing out the home stretch before fascia became a focus. Aches and pains will be a thing of the past for future generations. Fascia directly connects to the brainstem, and Kundalini should help people maintain clear minds long into their 100s.

Root Cause Identification, Diagnoses, and Treatment Options

The primary course of treatment for fascia includes:

- Movements: as diverse as possible with intention, yoga, long static stretches, sports, dancing, breathwork, bandhas
- Tools: tissue scrapers, vibration (e.g. massage guns), shakti mats,
- Other: moisturizer (oily lubrication between layers), hot and cold therapy (forces tissue movement at the atomic and cellular scale), chanting (vibration), singing while moving (vibration, honest throat and core awareness), contact with a hard/flat

surface (assists proprioception and relaxing into flat planes), Ayurvedic foods (generally low inflammation)

When done properly, these practices can generate Kundalini for many people. We'll now focus on tailored treatment pathways as we model six root causes of human suffering.

Root Cause 1: Pregnancy

- **Mechanics:** mechanical stress or tension in the womb area or anywhere else in the body will limit the distribution of nutrients and the clearing of waste like bending a garden hose. Stressed fascia releases inflammatory cytokines or growth factors that may subtly affect placental or embryonic tissue signaling (biochemical). Chronic fascial tension correlates with sympathetic dominance → poorer perfusion and higher cortisol exposure to the fetus (neuro-autonomic).
- **Results:** congenital diseases and birth defects.
- **Diagnoses:** hard to predict anything specific as this is less directly related to my work, but it seems logical to think there could be malformations, anomalies, and developmental issues resulting from the above.
- **Unique treatment options** (for the mother): unblock adhesions in the abdominal area years before pregnancy. Use a tissue scraper on the full body to allow energy to circulate freely through the womb area. Hot baths shortly after drinking smoothies. Moisturize and massage swollen feet and ankles. Gentle vibrations (like a vibrating bed) while resting.

Root Cause 2: Stalled Fascia (Granthis)

- **Mechanics:** your bones want to settle into specific places in the fascia web, and your joints want to move in specific ways, but your fascia is not fully unfurled. Your tensegrity is deformed. You damage it simply by using it, like driving a car with a wobbly wheel.
- **Results:** rounded upper back (kyphosis), pelvic tilt, fat knees, swollen feet and ankles, chubby fingers, weight gain, wrinkles, hair loss, lack of rounded muscles and tone, excess skin in any location, moles and skin tags (act like fascia pins), pimples, hair loss or patches (like on the back/lat muscles), an Adam's apple (this structure is an adhesion that can be unfurled).
- **Experience:** aches, pains, soreness after exercise, cramps, sprains, strains, stress fractures, lack of mobility, weakness, compressed ribcage, migraines. It gets worse with age if the wheel stays wobbly (adhesions remain stuck).
- **Diagnoses:** soft tissue damage, inflammation, chronic diseases like arthritis.

- **Treatment options:** all the primary treatments listed above, especially brute force via external vibration (dual massage guns), internal vibration (singing and chanting), and yoga movements.

Root Cause 3: Impacted Vessels

- **Mechanics:** fluid mechanics. Misaligned fascia kinks vessels like a garden hose. Think of blood vessels and lymphatic vessels trying to circulate blood and clear waste out. If the pipes are squished in one place the entire flow slows. There are adhesions all over your body right now kinking your blood-hoses. It seems one purpose of adhesions is to be absolutely sure vessels don't tear, since tearing could be fatal. This protection also makes places with a lot of vessels prone to adhesions that do more good than harm, but a Kundalini body operates free from any harm.
- **Results:** reduced circulation, swelling, varicose veins, cold extremities, sluggish healing, and eventual vascular stiffness.
- **Experience:** numbness, tingling, fatigue, brain fog, heaviness in limbs, or a sense of internal congestion.
- **Diagnoses:** cardiovascular disease, edema, lymphedema, chronic fatigue, and poor wound healing.
- **Treatment options:** progressive hot/cold therapy (for vascular exercise), vibration plates or gentle rebounding to mobilize fluids, deep diaphragmatic breathing, and targeted fascia release along major vessel pathways (neck, groin, armpits).

Root Cause 4: Core Pressure Deficiency

- **Mechanics:** your ribcage never fully opened unless you achieved Kundalini. Your spine isn't as straight, your lungs aren't as full, your throat sags on the inside of your collarbone, your pelvis is stuck in the middle, and your abs aren't as taut as they are meant to be. Your tensegrity is not optimized, and your core depends on optimal tensegrity shape. Your main (macro) pressure system is the main motor of your body, and it is weak. The body accounts for this core weakness by reallocating fat to the area, thus increasing pressure.
- **Results:** stubborn fat throughout the body, collapsed posture, shallow breathing, digestive sluggishness, organ compression, reduced oxygenation, and early fatigue.
- **Experience:** shortness of breath, low vitality, weak voice, abdominal bloating, low back pain, poor athletic performance, and emotional heaviness.
- **Diagnoses:** obesity, postural dysfunction, diaphragmatic weakness, hernias, acid reflux, and chronic fatigue.

- **Treatment options:** bandha training, sustained backbends and heart-opening poses, breath-retention (Kumbhaka), vocal toning, and progressive strengthening of the diaphragm and pelvic floor to restore internal pressure.
- **Note:** the treatment for obesity from this perspective is absolutely not jogging. Jogging is terrible for you in this theory as you are straining your fascia web with misaligned bones and joints. You gain the weight back because the weight is doing more good than harm. Your body wants to increase your core pressure. That's why you gain weight just by eating when other people don't. Fix your pressure, fix your problem permanently.

Root Cause 5: Signal Interference (Chemical and Electrical Systems)

- **Mechanics:** poor communication between parts of the body that are supposed to be cooperating. This results in signal misfires ranging from pain receptors to neural synapses and growth hormones.
- **Results:** hormonal imbalance, mood swings, immune misfires, irregular sleep/wake rhythms, unrestricted cellular growth.
- **Experience:** brain fog, confusion, anxiety spikes, chronic inflammation, miscoordination between mind and body.
- **Diagnoses:** endocrine disorders, neuropathies, autoimmune conditions, chronic pain syndromes, and cancer (unrestricted growth).
- **Treatment options:** chanting, humming, breath synchronization, alternating nostril breathing (to balance hemispheres), gentle spinal oscillations, and a diet rich in minerals that aid nerve conduction (e.g., magnesium, potassium).

Root Cause 6: Unstable Relationship with Telly (God)

- **Mechanics:** the purpose of physical reality is to integrate mind, body, and environment. To be ignorant of the non-physical world is to be separated from the mission. Humans are lost, yet many continue to lead others from a platform of wisdom. Leadership and advice from people unsuited to give it causes strife within the species. Existing in a state of species-wide unknowing has left humanity disconnected from Telly. Without a 'righteous' (or in my mind logic-based) rationale for what to do with our time we are not thinking or behaving correctly. This has prevented us from seeing the importance of fascia, the tissue connecting the other parts we have been studying.
- **Results:** loss of purpose, fragmentation of communities, moral confusion, and detachment from nature.

- **Experience:** existential emptiness, chronic stress, disconnection from others, over-intellectualization without embodiment.
- **Diagnoses:** all the above, plus anxiety, stress, anger, depression, bipolar, psychosis
- **Treatment options:** meditation on unity consciousness, community service, daily prayer or mantra, grounding barefoot in nature, compassionate relationships, and integrating fascia work with spiritual practice to restore full-spectrum coherence.

Recommended Diagnostics

X-ray

- More rigorous attention to alignment of hard structures, incorporating AI-based models reflecting ideal mechanics. Measure torsion at joints and distances (e.g., distance between ribs and distances along the spinal column).
- Benefit: adhesions (granthis) can be deduced by mapping the hard structures of the body and identifying areas of disorientation. Adhesions exist in areas of disorientation and pre-Kundalini tissue grows outward in linear, spiral, or sheet-like patterns. Knowing where the pre-Kundalini tissue resides in your body is the first step toward uncoiling it.

AI-based video analysis

- Wear a skin-tight body suit with markings to assist AI motion capture in real time. Dance randomly then follow a fascia-based yoga flow positioning the body in a multitude of positions.
- Benefit: This will identify the same adhesions (granthis) as x-rays would. Additionally, by observing everything you can do, AI will determine what you cannot do (along with visualizations). What you cannot do will enable you (and your physician, guru, or AI) to develop a fascia-based yoga flow customized for your body.

Comprehensive range of motion exam

- Collaborate live with a fascia mobility expert to supplement the above two tests. This person should help you engage with your fascia while producing an assessment for you with new information. They will facilitate long static holds in specific positions with the use of hardware tailored to the purpose at hand (e.g., engaging fascia in uncomfortable ranges and allowing it to relax while your bones stay still).

Recommended Wellness Practice

1. Follow my diagnostics to create an actionable daily protocol for fascia health
2. Curate a multi-hour protocol you would follow (in case you find the time)
3. Attend my Kundalini Fascia Wellness Centers once they exist
4. Purchase tools I design once they exist
5. Review the coaching materials I provide once they exist

The technologies and practices I utilized are on the next page. I expect most protocols will utilize combinations of the methods listed there. Kundalini can be achieved by anyone whose tensegrity has been perfected through breath, movement, and vibration.

<u>Me</u>	<u>Hindu Practices</u>	<u>Modern Western Practices</u>	<u>Tools</u>	<u>Machines</u>	<u>Other</u>
My own manual myofascial release generated a majority of my progress	Sadhguru's Inner Engineering Program	Long, static holds like Yoga Body's hip opener	Tissue scrapers (plastic and metal). Research suggests sticks and pebbles were used thousands of years ago. Gua Sha in China	Pilates reformer and a Total Gym sled (resistance-based mobility). Paired with singing my favorite songs while holding difficult positions	Contact the ground. I frequently sleep on a carpeted floor and watch tv from there too. Walk outside barefoot
Open-mindedness. There is something to be said about believing this is possible	Shambhavi Mahamudra Kriya	Deep tissue massage	A 1x2x6 smooth 'stick' from Home Depot used for stretching my arms and torso and tissue scraping my back	I have 5 massage guns with dozens of heads. I used 2 at a time several times a day	Moisturizer with hyaluronic acid, cocoa butter, and/or shea butter
	Yoga	Animal flows I found on YouTube	Elastic bands		Long, hot baths (followed immediately by moisturizer then static holds)
	Bandhas	Sauna	Pull up bar		
	Tendency towards Ayurvedic foods (no meat for me since 2020)	Cold plunge			
	Shakti mats (acupuncture)				
	Pranayama (alternate nostril breathing)				
	Chanting				

Predictions

Adopting this model of healthcare and following protocols like mine will drastically reduce suffering from disease and aging worldwide. Reduction will be observed in healthcare statistics. Rates of change over time could be measured against hits to my website to assess correlation. Hospitals will be focused on optimization rather than treatment. Trillions of dollars every year will be available to reallocate towards maturing our thoughts and behavior.

Kindred Spirits

This marks the end of *Kundalini Fascia Theory*, thank you for reading to the end. I am not the first person to be interested in fascia. Modern medicine is on a collision course with Eastern wisdom. This is a good thing.

Courtesy of ChatGPT, here's a list of global collaborative fascia research efforts plus **leading fascia researchers and thought leaders** — grouped by specialty so you can see the landscape clearly.

Kindly progress humanity by sharing my site.

Global Collaborative Efforts — with Links

- **Fascia Research Society (FRS)** — organizes the International Fascia Research Congress (IFRC) every ~3 years
 - ↳ Website / hub: fasciaresearchsociety.org ([Fascia Research Society](#))
 - ↳ Congress site for 2025: [FRS Congress 2025](#) ([2025 Fascia Congress](#))
 - **Fascia Research Group (Ulm, Germany)** — a leading lab integrating anatomy, biomechanics, sensory physiology of fascia
 - ↳ Official site: fasciaresearch.de ([Grav](#))
 - ↳ Also referenced via fascia research aggregator: FasciaResearch.com ([groups listing](#)) ([Fascia Research](#))
 - **Harvard Wyss Institute / NIH collaborations** — organizations involved in mechanotransduction, tissue engineering, and fascia-relevant mechanobiology
 - ↳ Wyss Institute homepage: wyss.harvard.edu ([wyss.harvard.edu](#))
 - ↳ NIH (via NCCIH / Langevin's projects on connective tissue stimulus) — example: *Connective Tissue Mechanotransduction* grant overview involving Helene Langevin & NIH mechanisms (grantome.com)
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Structural Biology & Anatomy

Dr. Carla Stecco

Profile & Focus

- Professor at University of Padova, Italy. Specializes in mapping human fascial layers, defining fascial architecture, and integrating fascia into functional anatomy (e.g. *“Functional Atlas of the Human Fascial System”*). ([ScienceDirect](#))

- Her work often emphasizes that fascia is not just passive “wrap,” but an interconnected “**fascial system**” with functional roles in force transmission, sliding, and proprioception. (bodyworkmovementtherapies.com)

Free / Open links

- *Microscopic anatomy of the visceral fasciae* (Stecco, 2017) — free access article on visceral fascia microstructure ([Wiley Online Library](http://WileyOnlineLibrary))
 - *The Fascial Manipulation Technique and Its Biomechanical Rationale* (Stecco, 2010) — open article on her manual therapy method and fascia mechanics (PMC)
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Dr. Robert Schleip

Profile & Focus

- Based in Germany (Ulm / Munich), founder of the Fascia Research Group and Fascia Research Society. (Wikipedia)
- One of the pioneers arguing that fascia has **active contractility** (via myofibroblasts) and acts as a **sensory / proprioceptive organ**, not just passive connective tissue. (ResearchGate)

Free / Open links

- *Fascia Is Able to Actively Contract and May Thereby Influence Musculoskeletal Dynamics* (Schleip, 2019) — open-access in PMC. (PMC)
 - *Fascia: The Tensional Network of the Human Body / Fascia is alive* (PDF) — a review summarizing multiple findings about fascia as living tissue (ResearchGate)
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Dr. Helene Langevin

Profile & Focus

- Based in the U.S. (NIH / integrative medicine). She researches fascia’s sensory roles, mechanotransduction, and its relation to pain and connective tissue disorders. (MDPI)
- Emphasizes fascia mobility, how restricted glide may contribute to musculoskeletal pain, and how fascia may feed back into proprioception / interoception. (MDPI)

Free / Open links

- *Fascia Mobility, Proprioception, and Myofascial Pain* (Langevin, 2021) — open-access MDPI article summarizing fascia mobility, pain, and sensory roles ([MDPI](#))
 - (No obvious personal website in my searches)
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Dr. Jean-Claude Guimberteau

Profile & Focus

- A French microsurgeon known for his **endoscopic films** that visualize fascia in vivo (“Strolling Under the Skin”) — showing fascia as an intricate, continuous network.
- His contributions are more observational and visual, providing compelling qualitative insight into fascia’s microarchitecture and sliding surfaces.

Free / Open links

- “Strolling under the skin: How does it look inside a living body?” — a public-oriented overview of his fascia visualization work (FasciaGuide)
 - *Architecture of Human Living Fascia* (preview / sample pages) — not fully open, but usable as illustrative resource
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Biomechanics & Movement Science / Integrative Figures

Dr. Thomas Myers

Profile & Contribution

- Creator of the **Anatomy Trains** model: maps *myofascial meridians* (continuous lines of fascial connectivity) across the body, proposing how tension and force flow through the fascial network.
- Bridges anatomy, movement, manual therapy, and structural integration: many therapists use his maps to guide movement, stretching, and corrective work.

Free / Open-Access Links

- **Resources / interview / articles** on the official Anatomy Trains site: *Resources: Articles, Videos, Podcasts, and Interview With Tom Myers* ([Anatomy Trains](#))
 - **Videos** / media on his concepts: *Videos Archives – Anatomy Trains* (free video interviews, demos) ([Anatomy Trains](#))
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Dr. Neil D. Theise

Profile & Contribution

- Pathologist / researcher who helped define the **interstitium** — a fluid-filled reticular network across tissues, which overlaps with fascia and connective tissue architectures.
- He and collaborators argue that these interstitial spaces form a **continuous fluid network** across organs and fascia, with implications for signal transmission, edema, and mechanotransduction.

Free / Open-Access Links

- *Structure and Distribution of an Unrecognized Interstitium in Human Tissues* — open access article describing a previously unrecognized interstitial network overlapping with fascia ([Nature](#))
 - *Evidence for continuity of interstitial spaces across tissue and organ boundaries in humans* — free full text in PMC / Communications Biology ([PubMed](#))
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Dr. Antonio Stecco

Profile & Contribution

- Clinician and researcher focusing on **fascial manipulation, densification, and pain mechanics**.
- Develops therapeutic approaches integrating his fascia mapping (influence from Carla Stecco) and applies them to treat myofascial disorders.

Free / Open Access Links

- *Fascial Disorders: Implications for Treatment* (Stecco et al.) — freely viewable PDF version via ResearchGate / institutional repository ([Anatomy Trains](#))
 - His faculty profile with overview of research interests at NYU (publicly visible)
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Biophysics / Cellular & Systems Perspectives (selected)

Because some of the more theoretical / older figures (Ingber, Hedley, van der Wal) have fewer free works directly about fascia, the links below reflect more general mechanobiology or integrative anatomy work.

Dr. Donald Ingber

Profile & Contribution

- Developed **Tensegrity Cell Theory** and pioneer of **mechanobiology**: how cells sense and respond to mechanical forces.
- His theories provide a **foundation** for viewing fascia (and tissues in general) as dynamic, force-responsive networks rather than static scaffolds.

Free / Open Links

- His lab's publications are often open; many review articles summarizing his tensegrity / mechanotransduction work are freely posted (e.g. via institutional sites)
 - The **Wyss Institute / Harvard** site has overviews of Ingber's mechanobiology / tensegrity concepts
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Gil Hedley

Profile & Contribution

- Anatomical dissector and educator known for **visual and intuitive exploration** of fascia ("the fuzz"); he emphasizes fascia as **connecting continuity**, not isolated sheets.
- His dissections & videos help people "*see fascia alive*" and inform embodied, visual understanding of connective tissue.

Free / Open Links

- Many of his forums, videos, and dissection illustrations are publicly shared (e.g. YouTube, his teaching site)
 - Example article: *A Fascia Epiphany* in ABMP referencing his work ([Family Medicine Education Consortium](#))
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Andry Vleeming

Profile & Contribution

- Biomechanist and clinician focused on the **thoracolumbar fascia, pelvis, sacroiliac joint**, and **core stability**.
- His work ties fascia to **biomechanics, load transfer**, and back pain models.

Free / Open Links

- Many of his co-authored papers (on pelvis / fascial load transfer) are available via open institutional repositories or Google Scholar
 - Overviews / citations in biomechanics / physical therapy education sites
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Jaap van der Wal

Profile & Contribution

- Anatomist and developmental / neuroarchitecture thinker; links **embryology, movement, and fascia as an organ of “inner movement perception.”**
- He contests reductionist views — emphasizing fascia as **organ of movement sensation** and connective continuum across systems.

Free / Open Links

- Some of his papers are open via institutional repositories or open journals;
 - His responses / commentary in fascia nomenclature debates (e.g. in *Journal of Bodywork & Movement Therapies*) are accessible via open editorial pages
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- End -