PNF NETWORKING – PNF VERNETZT

Networks developed through sympathetic and synaptic connections, frequently used, are leading to a synaptic potentiation (Atwood MacKay, ‘94) and thus to the facilitation of acting and behavior.

Networking, the intelligent exchange of relationship and information.

PNF focuses on neuromuscular-sensorimotor networks providing insight to motor learning and motor control mechanisms. Famous networks were described by, Lurija AR, Bernstein N, Mesulam MM, Hebb DO, Penfield W, Sherrington C, Henneman E, Antonovksy A in the last century, Pruimboom L, Mulder T, Shumway-Cook A & Woollacott AH a.o.m. in this century. We are using these networks for understanding the motor control mechanisms and its transfer into the practical application of PNF in our patients.

A ‘frame – net’ for therapists is the Triad of the Evidence Based Practise (EBP) (Sackett et al, ‘96) in combination with an update Clinical Reasoning (Jones’94; Klemme B, Siegmann G ‘06).

Features of EBP & CR for

Cognition and Metacognition of biomedical knowledge about Physiology, Anatomy, Psychology, Pathology, Neuroscience, evident therapeutic approaches are ressources (also see ipnfa.com “PNF Literature”)

Clinical Reasoning, emphasizing narrative, interactive and ethic reasoning. Patients wish is the ultimative topic in evaluation and treatment procedure, ankered in the PNF eval concept

Experience, Empathy, critical selfreflection, knowing about Red flags, updated professional knowledge,
Clinical Reasoning emphasizing scientific, pragmatic und conditional Reasoning, Documentationsskills.
Ressource oriented appraoch in PNF by using good potentials in indirect treatments, a ‘Salutogen-modell’ is ankered in PNF Philosophy, which also adresses ourattitude.

EBP in combination with CR finally leads to the therapeutic diagnosis and the resulting treatment strategy, which could be PNF.
The **IPNFA Symposium** surely enriches our personal, internal and external therapeutic network. By information about biomedical knowledge of muscle spindles, Fascia, Immunology, organisation of balance. An extend of our expertise may occur through further information on “Red flags”, balance training in different causing factors, extended insight into EBP, the standardization documentation against the background of the ICF.

The open, wide ranging PNF Philosophy enables us to integrate new scientific findings into our treatment approaches. For development we need networking and exchange.

Let’s stay in contact, using our social and neural ‘synapses’.

**Literature**

- Klemme B, Siegmann G, Clinical Reasoning, Thieme Verlag, 2006
- Sacket DL et al, Evidence Based Medicine: what it is and what it isn’t, BMJ 1996

**Figure:**