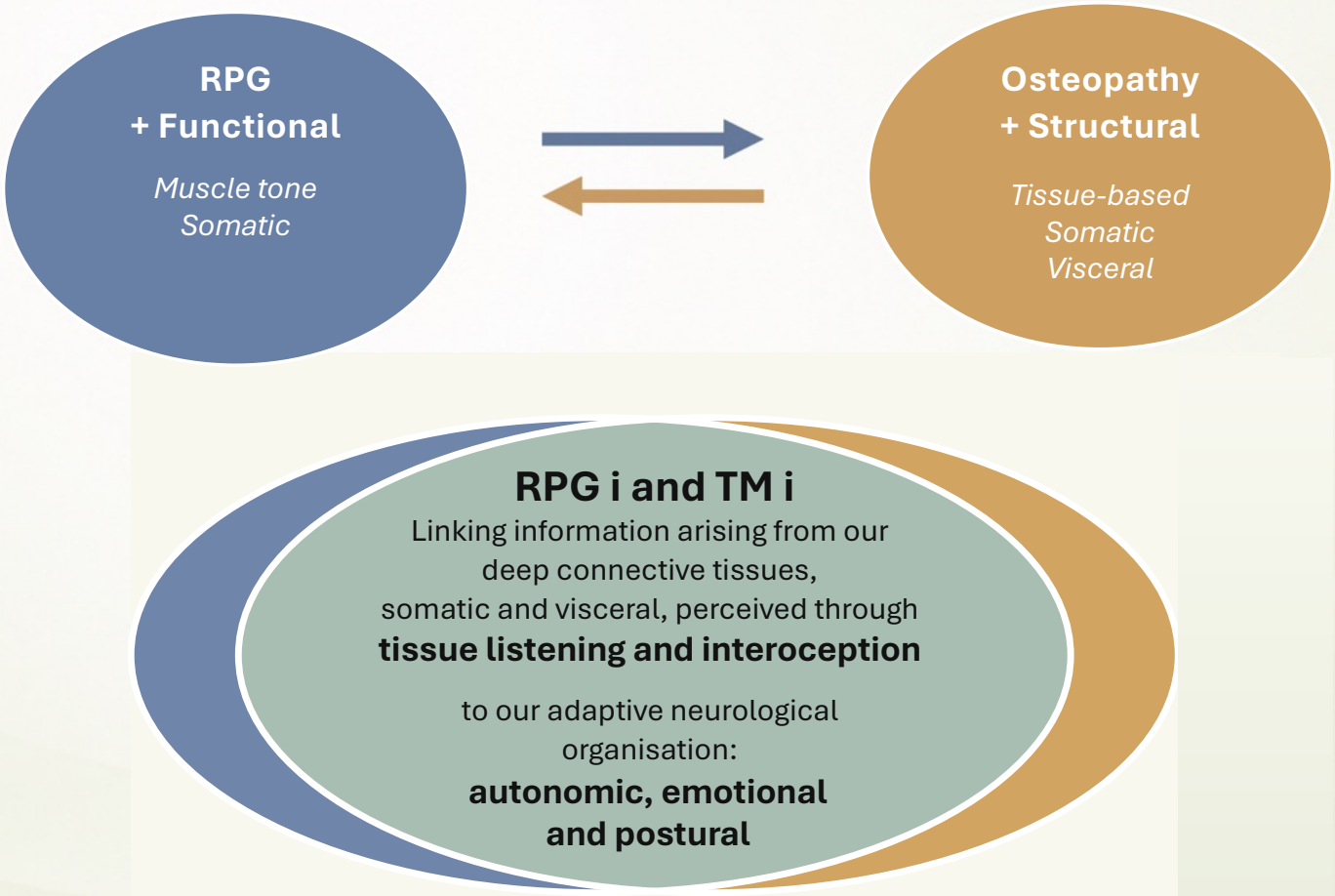
Origins and objectives of TM i and RPG i training

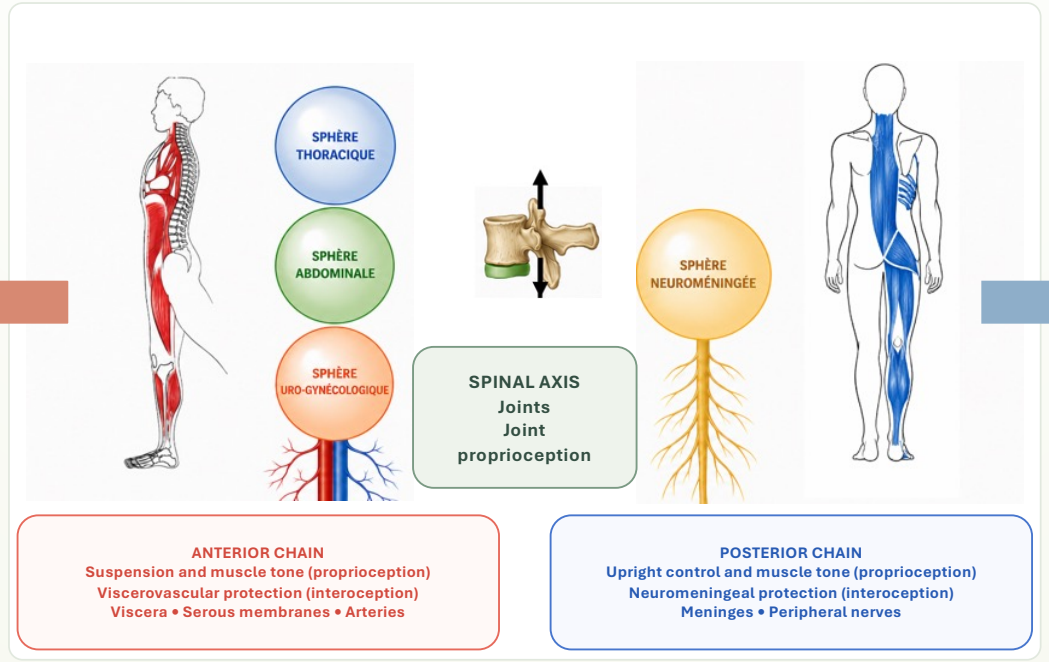


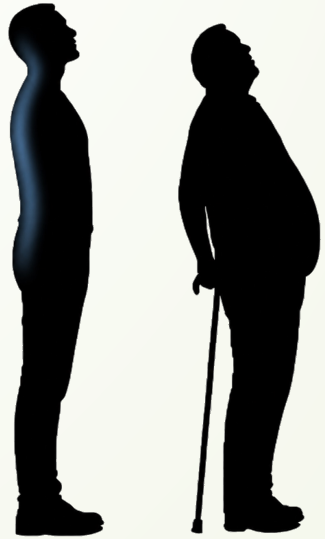
For more than 30 years,
I have integrated into
my practice
the principles of RPG
and osteopathy.

This approach gave rise
to the courses
RPG i and TM i.

From interoceptive background noise to postural organisation

"We do not adopt a posture by chance: posture reflects the body's deep adaptations."





FLEXION PATTERN

EXTENSION PATTERN

Postural amplification helps explore these defence and compensation strategies even before symptoms appear.

THE PREVENTIVE DIMENSION OF RPG i AND TM i

Depending on individual needs, 2 to 8 sessions per year may help maintain visceral and somatic mobility and support adaptive capacity.

Decompensation: when adaptive reserve is no longer sufficient

Symptoms may appear late, when adaptive capacity has been exceeded.

REDUCE THE ADAPTIVE LOAD — RESTORE CONDITIONS FOR REGULATION

1 RESTORE

The quality of communication pathways and supporting structures in the symptomatic region

2 SUPPORT

Metabolic and inflammatory regulation and a reduction in protective muscle tone

3 IDENTIFY

Factors that were already using adaptive reserve before the stressor or decompensation

THE CURATIVE AND SYSTEMIC DIMENSION OF RPG i AND TM i

RPG i and TM i: one shared intention — connecting interoception, the autonomic system, proprioception and postural organisation

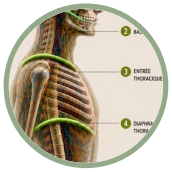
	RPG i	TM i
Audience	Specifically designed for RPG practitioners	Designed for physiotherapists, osteopaths and RPG practitioners
Structures addressed	Deep structures addressed within RPG postures	Specific work on deep structures
Conceptual framework	Integration of deep-structure work into the adaptation and defence mechanisms defined by Philippe Souchard	Connecting deep structures with neuromuscular and postural organisation
Organisation *To organise a course:* ***reisdanielformation@gmail.com***	Organised by official RPG associations worldwide.	Organised by Daniel Reis at the Centre du Mouvement in Rodange (Grand Duchy of Luxembourg), or with other training organisations or group practices.

* Fascia • microcirculation • nerves and meninges • viscera and serous membranes

TM i training: 8 weekends over two years

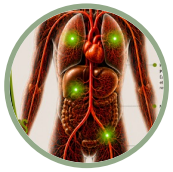
Introduction

Discovery



WE 1

Diaphragms

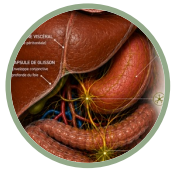


WE 2

Arteries

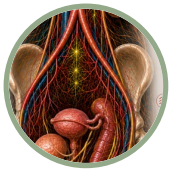
WE 3

Thorax



WE 4

Peritoneum



WE 5

Pelvis

WE 6

Peripheral nerves

WE 7

Craniosacral 1

WE 8

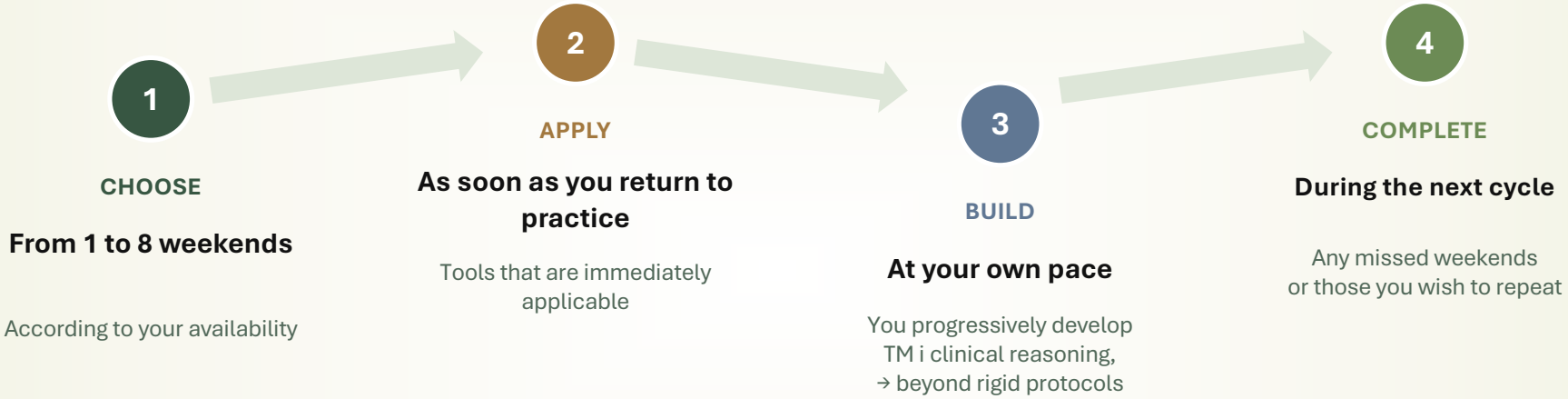
Craniosacral 2

Before each weekend: online anatomical preparation

Between each weekend: time is provided to prepare for the next and integrate the previous into clinical practice.

Modular training — a progressive pathway

Each weekend can be attended independently and integrated into a progressive pathway.



Each weekend progressively enriches your practice with TM i principles and techniques.

Flexible pathway • Continuity of learning • An open learning environment

Each weekend follows the same clinical approach

1 ASSESS

Postural amplification

Tissue listening

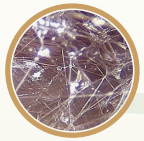
From symptoms to underlying causes

2 TREAT ALONG 4 AXES

IMPROVE
- metabolism

RESTORE
- tissue gliding

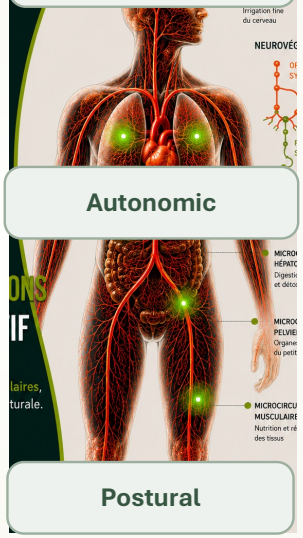
BALANCE
- muscle tone



RESTRUCTURE
- connective tissues

3 OBSERVE THE EFFECTS

Emotional



Autonomic

Postural

4 INTEGRATE

INTO POSTURE

Postural integration of deep changes

In your usual practice

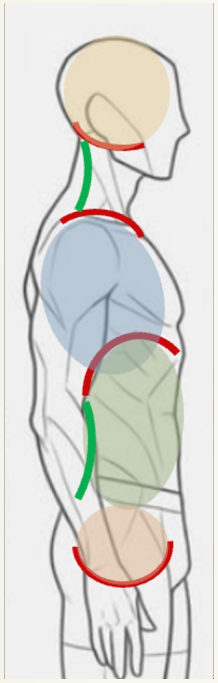
Adapt the tools to your patients, your sensitivity and your experience

A shared approach — applications adapted to each deep functional sphere

Postural adaptation reflects the interaction between the deep centre and the superficial periphery

DEEP CENTRE

Infections • Diseases • Dysfunctions



- **Cranium and meninges**
- **Thorax**
- **Abdomen**
- **Urogenital region**

The diaphragms

The lordoses

TWO-WAY INTERACTIONS

POSTURAL EXPRESSION

Centre → periphery

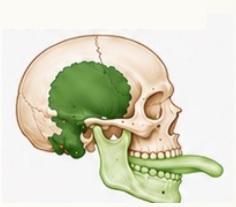
POSTURAL ADAPTATIONS

DEEP IMPACT

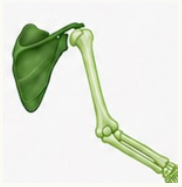
Periphery → centre

SUPERFICIAL PERIPHERY

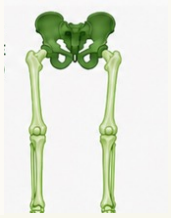
Trauma • Mechanical constraints



1 Cranial girdle



2 Shoulder girdle



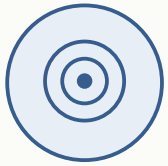
3 Pelvic girdle

Deep-centre dysfunctions first express themselves through the diaphragms and lordoses, then at a distance in the limbs.

Peripheral constraints first act on the girdles and may progressively disrupt deep-centre organisation.

A peripheral or central symptom may arise from several levels of causality.

Scope and limits of TM i training



SPECIFIC FOCUS

TM i training explores the relationship between interoceptive information from deep tissues* and postural organisation.

COMPLEMENTARITY

Exteroceptive** and vestibular inputs are considered, without being the central focus of the training.

Proprioceptive and articular information is integrated to complement each participant's existing skills.

SCOPE OF PRACTICE

TM i addresses functional dysfunctions.

Lesions and diseases require medical diagnosis and treatment. Manual therapy then plays a complementary role.

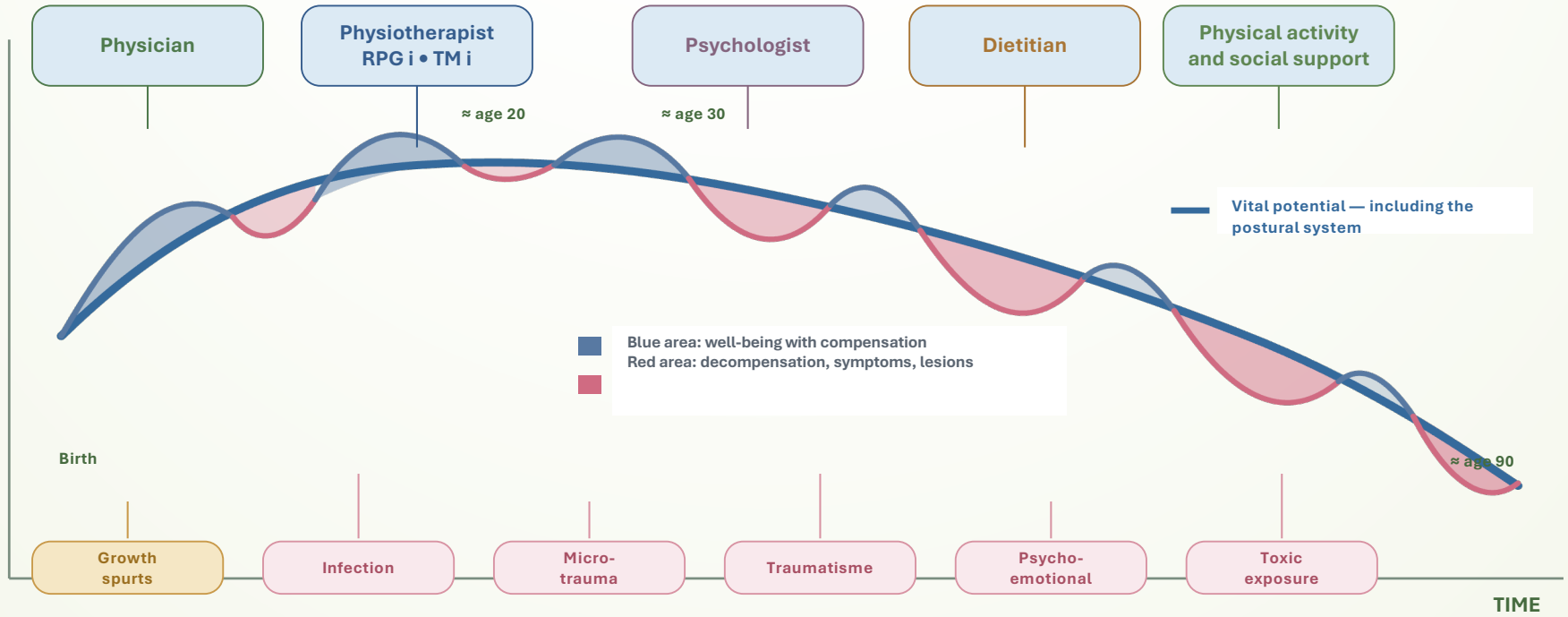
*** Fascia, arteries and microcirculation, nerves and meninges, viscera and serous membranes.**

**** Vision, hearing and cutaneous sensation.**

Deepen without replacing — integrate without distorting each practitioner's expertise.

Supporting health over time: a collaborative, systemic approach

Health evolves through constraints, decompensations, recoveries and care.



The patient remains the central participant: professionals coordinate their interventions according to individual needs and the different stages of the care pathway.

RPG i and TM i are part of a COLLABORATIVE • SYSTEMIC • LONG-TERM APPROACH

And to assist me… and sometimes much more

A complementary team committed to clinical practice and teaching

Anthony Ferriol

Present at almost every training weekend

Physiotherapist
RPG • RPG i • TM i
Master's degree in structural osteopathy

Angeline Wartigue

Mainly involved in the visceral and cranial modules

Physiotherapist
CREDO osteopathy • P. Tricot tissue approach
RPG • RPG i • TM i

Hubert Mugnier

RPG foundation-course instructor

Physiotherapist
RPG • RPG i • TM i
Master's degree in structural osteopathy
RPG instructor for the stomatognathic system

Three complementary backgrounds • The same clinical standards • The pleasure of teaching together