

# Flex Therapist CEUs

## COPD Manual Diaphragm Manipulation

1. The musculoskeletal changes inherent to the aging process:

- A. Hinder rib cage expansion.
  - B. Increase the work of breathing.
  - C. Reduce functional capacity.
  - D. All of the above.
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2. In the present study, the Manual Diaphragm Release Technique produced statistically significant improvements in all of the following in people with COPD, except for:

- A. Maximum expiratory pressure
  - B. Diaphragmatic mobility
  - C. 6-minute walking distance
  - D. Inspiratory capacity
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3. Cumulative but not immediate benefits were noted in vital capacity, maximum expiratory pressure, and sniff nasal inspiratory pressure.

- A. True
  - B. False
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4. Direct measurements support that the manual action on the underside of the last four costal cartilages allows the traction of the lower rib cage in a cranial direction and that the manual compression of the tissues in the area of insertion of the anterior costal diaphragm fibers lengthens the diaphragm in its insertional zone.

- A. True
  - B. False
- 

5. Change in abdominal volume in people with COPD have been shown to account for, on average, \_\_\_\_\_ of diaphragmatic displacement in the zone of apposition during quiet breathing in the seated position.

- A. 89%
  - B. 76%
  - C. 22%
  - D. 1%
-

**6. The Manual Diaphragm Release Technique applies manual pressure under the costal margin, with the intention of stretching the lower thoracic cage and the insertional fibers of the anterior diaphragm.**

- A. True**
  - B. False**
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