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**DEEP OSCILLATION®**  
**WWW.PHYSIOPOD.CO.UK**  
NHS APPROVED SUPPLIERS

1st February 2021

Good Afternoon Everybody

Welcome to the Feb 2021 PhysioPod NewsMagazine! Julie and I are thrilled to bring our 6th issue to you.

We do hope it follows in the footsteps of previous issues. It is our aim to provide you with original, interesting and creative content, that will enrich your day, week or err hum, month (yes, we know - they are getting longer but there is so much to report!)

We are now regularly contacted to include personal narratives and case studies. If you too would like to share something, anonymously or not, then [just drop us a line](#). Julie and I would love to hear from you.

This week, I found the words of Mrs White, the Head Teacher at Coates Lane Primary School to her Parents most inspirational, if you didn't see the letter, you can read it [here](#). We all need kind words of support in these difficult times, especially parents trying to juggle work, life and home schooling.

Hang in there everyone, keep warm and "[stay safe](#)".



With our best wishes

**Julie Soroczyn and Mary Fickling, Sisters and Directors of**  
[PhysioPod UK Limited](#) and [PhysioEquipment UK](#)



10 YEARS WITH DEEP OSCILLATION AND PHYSIOPOD UK

**"My first encounter with DEEP OSCILLATION® was in 2007. A Physiotherapist colleague from Germany used it in her practice in Paris.**



**Franziska Schmidt-Dengler**  
**Physiotherapist MSc Osteopathy Vodder MLD DLT**

To be honest, it was difficult not to use it! If someone was in pain then they would almost always get better after we used deep oscillation. Only in the hot

Back working in London, I knew I had to get my own unit and I still remember my lovely encounter with Julie and Mary in 2011, when they came to train me in the clinic I was working at late on a Friday night after my clients had left. I'm still impressed with their courage, enthusiasm and honesty in bringing this product to the UK. Their support throughout the years has been really helpful. They informed me that I could drape cling film over the area if a client was a little hot.

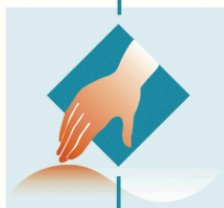
I have moved on to study Osteopathy, which has taught me to understand the body and pain in a much better way, yet deep oscillation is still part of my treatment.



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**DEEP OSCILLATION® is recommended by:**  
[www.lymphedema-clinic.com](http://www.lymphedema-clinic.com)

**WITTLINGER**



**LYMPHEDEMA CLINIC**

**Dr. VODDER AKADEMIE INTERNATIONAL**



**MANUAL LYMPHDRAINAGE ORIGINAL METHOD**

Center for excellence in lymphedema treatment  
 Lymphedema rehabilitation center - Treatment Academy - Training - Research



It is very common for Physiotherapists to use machines but deep oscillation is the only one I use. It is very rare for an Osteopath to be using any machines, but still, I use deep oscillation.

its advantages on numerous patients but I was still surprised when I used on the fresh scar of a patient, the reduced swelling of the scar tissue improved the function of the muscle affected enormously; an effect a conventional treatment approach might have taken much longer to achieve.

It does not replace manual treatment, it purely enhances it and my Deep Oscillation Personal is a device that I would not be without.

I am very grateful for the existence of deep oscillation and I am hoping to see it being used more commonly and widely; it is effective and its application pleasant and I'm really grateful for Julie and Mary, who continue to share all the research behind the therapy, as a clinical evidence base is very important to me.

I look forward to at least another decade with Deep Oscillation and Physiopod UK and I look forward to seeing future research, to support the results I regularly see in my work."

[READ MORE](#)

.....

## LATEST NEWS FROM L-W-O COMMUNITY

**L-W-O**  
Lymph-What-Oedema  
Lymphoedema exists, we exist

**ADDED TO NEW VASCERN APP**  
[vascern.eu/what-we-do/mobile-app/](http://vascern.eu/what-we-do/mobile-app/)

The advertisement features a light green background. On the left is the L-W-O logo with a stylized figure. In the center is a blue link icon and a green plus sign. On the right is the text 'ADDED TO NEW VASCERN APP' and the URL 'vascern.eu/what-we-do/mobile-app/'. Below this is a photograph of a hand holding a white smartphone displaying various app icons, with a laptop blurred in the background.

"I was excited to see L-W-O being added to the VASCERN app which is downloadable as one of 13 resources in the UK for lymphoedema and lymphatic malformations this was facilitated by Pernille Henriksen and our video promoting the app was designed by Mary Fickling. This is an amazing step forward for a patient support group like L-W-O.

For those that do not know:

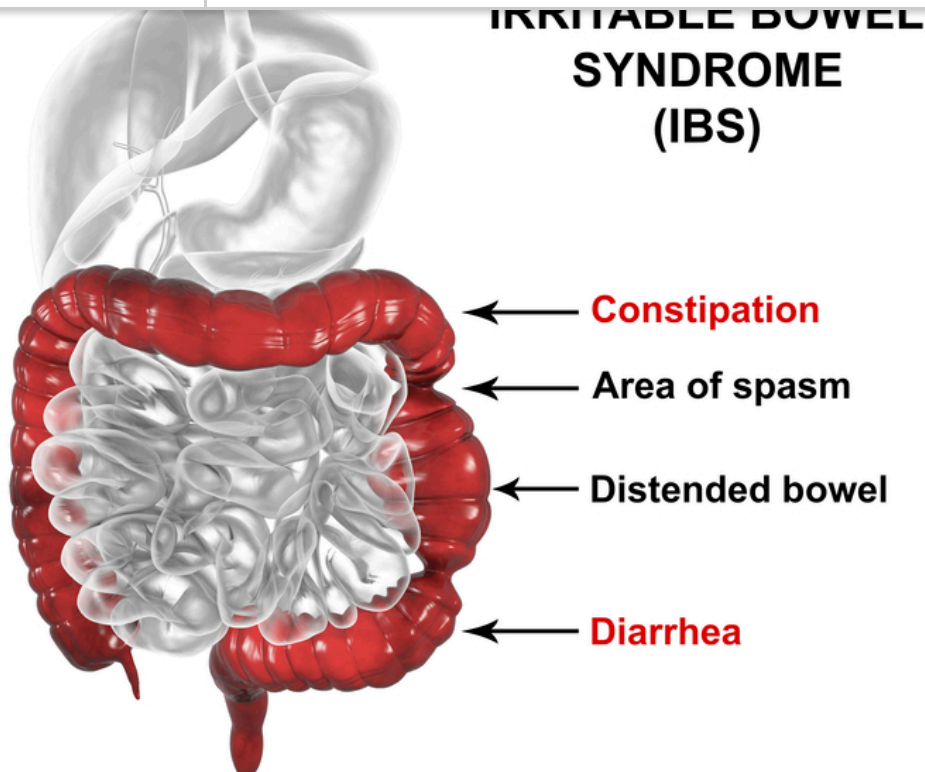
"VASCERN is the European Reference Network on Rare Multi-systemic Vascular Diseases, is dedicated to gathering the best expertise in Europe to provide accessible cross-border healthcare to patients with rare Vascular diseases (an estimated 1.3 million concerned). This includes arterial disease (affecting the aorta to small arteries), arteriovenous anomalies, venous malformations, and lymphatic disease."

[READ FULL NEW BLOG FROM GAYNOR LEECH FOUNDER OF LWO](#)



## Deep Oscillation for Digestive System

**Mrs R is 73 years of age and was diagnosed with Irritable Bowl Syndrome (IBS) in 2015. A highly-stressed lady, who has a tendency to over-think situations and get herself worked up.**



'Although the cause of IBS is unknown, in some cases it seems to be linked to a stressful life event, anxiety or depression'

## Client History

Mrs R was diagnosed with depression in 2012 and has been prescribed with anti-depressants. Despite dietary advice, Mrs R continues to consume a high percentage of fatty foods and is constantly bloated. She does not have a daily bowel movement; her stools can be loose and she is sometimes constipated. If she has to go out during the day, Mrs R will not eat, in case she cannot find nearby facilities and has the feeling of 'urgently needing to go'. A heavy smoker until end of 2019, though she has cut down during the course of the last year.

## Pre-treatment

A waist measurement was taken together with a photograph (taken with Mrs R's permission).

## Protocol

Device: DEEP OSCILLATION PERSONAL PRO

Frequency: 40 Hz - 115 Hz

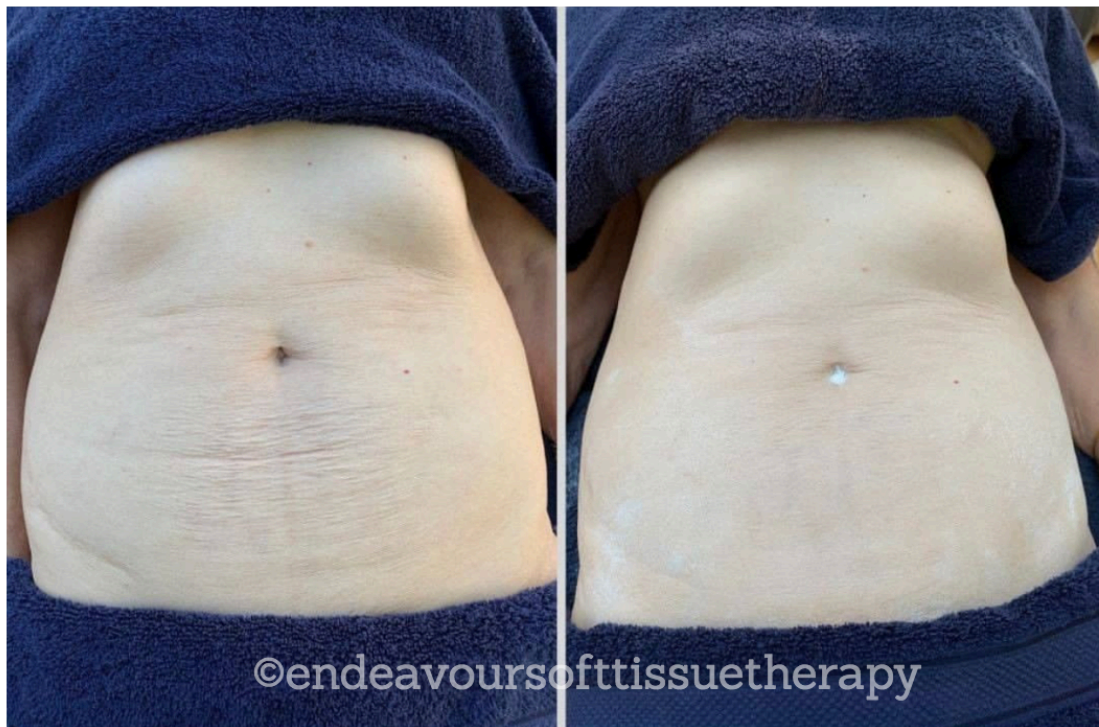
Mode: 3:1

Duration: 20 mins

- Working in the direction of intestinal peristalsis to provide relaxation of the stomach muscles and stimulation.
- The gloves hands on method was used on abdomen and groin, before switching to the applicator for a better hold and to prevent from slipping.
- Figure of eight movements over the small intestine, gravitating towards the large bowel with pressure, then on the large bowel and right down into the right groin, circling upwards and out, working deep into the hip bone to trigger the deep inguinal nodes, then right up and under the ribs across the diaphragm.
- Across and deep down inside the left hip bone to the left groin, following the path of faecal transport along the large bowel. (In Bowen and in Infant massage these are the pathways for constipation and coli).

## BEFORE

## AFTER



**20 mins MLD/Deep Oscillation Therapy  
Irritable Bowl Syndrome**

**Before 37.3 inches**

**After 36 inches**

"After the treatment a second photograph was taken and Mrs R's waist was re-measured, she had dropped 1 inch. She did not feel the need to use the toilet. I

'explosion' and that it felt like something had unplugged in her gut and she could not stop going to the loo all day. There was no tummy aches or cramps at all and the stools were watery.

 **ACCESS FULL ARTICLE** [CLICK HERE](#)



### FIELDS OF APPLICATION - DEEP OSCILLATION - A QUICK LOOK



The fields of application for deep oscillation are enormous. It can be used in acute conditions and pre and post surgery to enhance rehabilitation.

This video shows just a small selection of applications. It is gentle, pleasant and yet it permeates an 8cm depth without putting on any pressure, saving the practitioners hands too.

**GREAT IDEA FROM LOHMANN RAUSCHER**



Lohmann Rauscher have created a very handy **Red Flags Card** to download and print for confident self care of legs at home. Great initiative - well done guys! Familiarise yourself with the important red flags to look out for. Download, print and share away! <https://lohmann-rauscher.co.uk/assets/red-flags-eps.pdf>

Patient name: \_\_\_\_\_



**Red flags to look out for:**

- New redness and swelling of the skin around the ulcer which can be accompanied with a high temperature (fever) and/or a feeling of being unwell or loss of appetite
- Any other persistent new discolouration of your legs or toes
- A green or unpleasant discharge or an unpleasant odour coming from the ulcer
- Increased leg pain or discomfort that doesn't resolve with your normal pain killers
- Increased numbness, altered sensation (feeling) or pins and needles that doesn't ease with movement
- Increased swelling to your legs or toes that is unusual for you
- A new wound
- Increased leaking from the leg and/or an existing wound that cannot be contained in your current dressing or compression garment

Signs of an infection according to NICE (<https://www.nhs.uk/conditions/leg-ulcer/symptoms>)

**If you notice any of these red flags it is important to contact your healthcare professional immediately.**

Name: \_\_\_\_\_ Tel: \_\_\_\_\_ Email: \_\_\_\_\_

M2779 V1.1



**Young Chef Newly Diagnosed with Stage 1 Lipoedema**

*"I am 21 and have just been told I have Stage One Lipoedema.."*



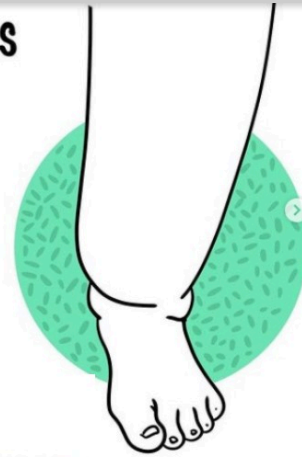
*I didn't realise I had Lipoedema and I wonder how many other women don't know they have it either?*



Looking back, I think I have had Lipoedema for many years, going back to my primary school. I have never had ankles and have always had bigger legs than others my age, but I thought nothing of it until a neighbour commented a few months back ....

### TYPICAL SIGNS

Ankle cuff "cankle"



*why have you got lines around your ankles and why are your legs so swollen?*

READ MORE..

## NEW LYMPHATICS RESEARCH

# knowable MAGAZINE

FROM ANNUAL REVIEWS



CREDIT: SCIENCE PICTURE CO. / SCIENCE SOURCE

By [Helen Santoro](#) 01.20.2021

## Emerging research suggests that even mild hits to the head may damage the tiny lymphatic vessels that clear toxic chemicals and cellular debris from the brain.

'Although it's clear that concussions damage the brain, exactly how they do so is still largely a mystery — especially when it comes to long-term problems. An intriguing new clue focuses on tiny tubes sandwiched between the meninges, a set of membranes that surrounds and protects the brain and spinal cord. These tubes, called meningeal lymphatic vessels, help to clear cellular and molecular waste from the brain. A mouse study published in September in the journal Nature Communications reported that after minor blows to the head, the brain swells and pins these vessels up against the skull. Like putting a kink in a hose, this diminishes their ability to drain properly.' [Read full article](#)

**DOWNLOAD FULL STUDY**

CLICK HERE

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## The Concept of "Rehabilitation" in Palliative Care - Physical Therapy in Cancer

### MODALITIES FOR PATIENTS WITH LYMPHOEDEMA AND CANCER.



**Dr. MSc. Luis Felipe Medina Cabezas.**  
**Lic. TF, Clinical Consultant, Physiomed**

Starting from this old medical adage, every provider of services within a health care system must recognize, in other words, the interpretation for himself, of this adage, “sometimes heal, often confront, always attend” .

In Palliative Care, professionals must certainly recognize that expectations of cure are not curable or exceeded the period during which they were susceptible to cure. But a professional obligation is always established, where health care providers do not give in to the concept of health care in such terminal circumstances, but rather manage to understand the high concept of modifying their character. The obsession to heal can be such that professionals can offer disproportionate and decontextualized measures that precipitate them into irrational, incompetent and equivocal therapeutic fury.

There is no doubt that healing is generally the best ways to confront and attend, but when it is no longer possible to do the first, the rest continues to be an accompaniment of human concern and solidarity.

It is important to clarify that “curative” and “palliative” treatments are not mutually exclusive, but rather a matter of emphasis at different times of the disease." ...



**ACCESS FULL ARTICLE**

[CLICK HERE](#)

**"My Precious Life and My PhysioPod" by Janet**



and despite what can now only be described as a bit of a 'faulty chassis' - I seemingly came with an excellent “warranty” that has facilitated my being regularly repaired by various excellent NHS consultants and nurses, and returned to life in surprisingly good working order!

It's a shame that warranty didn't extend to marriages! The first, married far too young, stumbled painfully along to an irretrievable end after thirteen years. But it did, however, produce two wonderful children, a pigeon pair and a constant joy to this day. My resolution to “never go there again!” gradually disintegrated and six years later I married “the love of my life” and we all strode happily along as a family for the next 20 years.

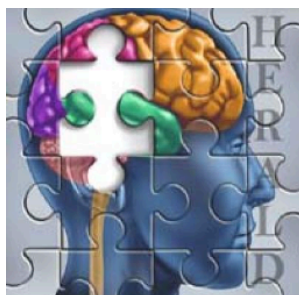
Together with being a two-time breast cancer survivor, I was also diagnosed with Multiple Sclerosis (MS) in my 20s, hence the 'faulty chassis' - but which has remained miraculously asymptomatic for the last 50 years.

**The Breast Cancer treatment did however, leave me with scarring on my lungs from Radiotherapy and the scar tissue from surgery caused secondary Lymphoedema in my left arm, the focus of my narrative...."**

[READ MORE](#)



## NEW DEEP OSCILLATION STUDY



Neurorehabilitation Algorithms in Parkinsonism:  
Impact of Electrical Stimulations and  
Deep Oscillation on autonomy and quality of life.

J Alzheimer's Neurodegener Dis 6: 043.

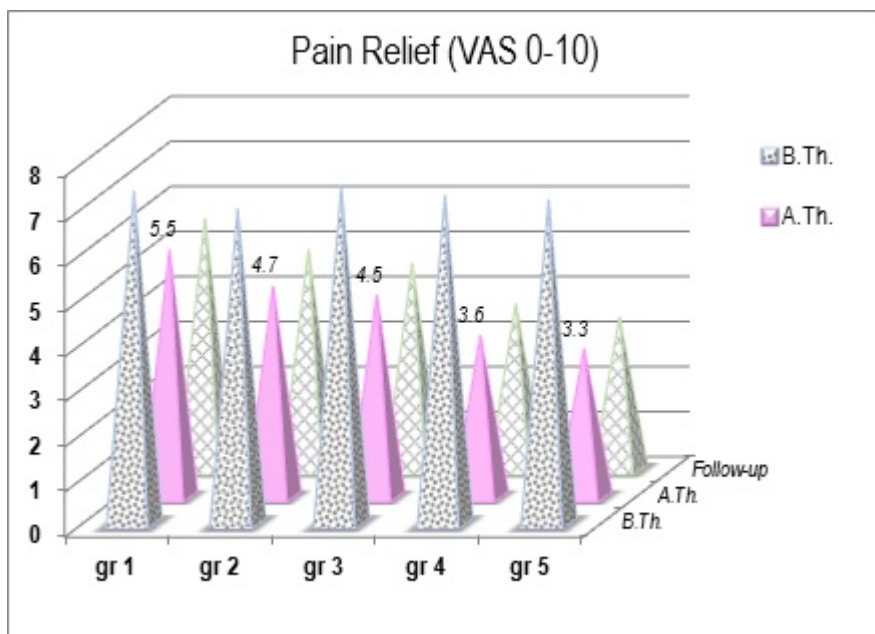
Holeva IB, Yoshinov BR, Yoshinov RR (2020)



Depression and anxiety  
 Paravertebral pain  
 Rigidity (muscular & articular stiffness)  
 Parkinson posture

Most significantly influenced  
 in Group 4 and Group 5  
 (DEEP OSCILLATION)

"The paravertebral pain, due to specificity of Parkinsonism-posture, interferes with for patient's quality of life. We evaluated the intensity of paravertebral pain by the Visual Analogue Scale (VAS 0-10). The below Figure 8 presents the decrease of pain sensation, most important in gr-4 and gr-5 (treated with Deep Oscillation).



**Introduction:** Parkinsonism (Prk) is a neurodegenerative disorder, considered as a socially important disease with serious decline in autonomy and quality of life of patients.

**Objective:** During last years, we estimated the efficacy of application of different physical modalities and neurorehabilitation methods on independence in activities of daily living and on quality of life of these patients.

The GOAL of current study was to evaluate qualitatively and quantitatively the impact of some preformed physical modalities [as Electrical Stimulations (ES) and Deep Oscillation (DO)] in the complex neurorehabilitation (NR) program in Prk-patients.

**Materials & Methods:** We observed 170 Prk-patients, covering the criteria of the Unified Parkinson's Disease Rating Scale (UPDRS); randomized into five therapeutic groups (gr). In gr-1 we applied traditional physiotherapy (control group); In gr-2 a complex NR-programme, including physiotherapy, Ergotherapy & patients' education. In patients of next groups, we added preformed physical modalities: In gr-3-electrical stimulations (ES) for feet extensors and flexors; in gr-4-Deep Oscillation (DO) paravertebrally; in gr-5-ES and DO.

**Results:** Results demonstrate statistically significant amelioration (in allexperimental groups) concerning: brady-hypo-kinesia; gaitstability, pulsionphenomena (especiallyretropulsio); Hoehn and Yahr scale; Depression and Anxiety. Paravertebral pain, Rigidity (muscular and articularstiffness) and Prk-posture were most significantly influenced in gr-4 and gr-5. In gr-3 and gr-5 weperceivedmostimportantimprovement of autonomy in differentactivities, Timed Up and Go test, etc.

For database management we used parametrical analysis (t-test-analysis of variances ANOVA) and non-parametric distribution analysis (Wilcoxon signed rank test); performed using SPSS package. The treatment difference was considered statistically significant if the P value was<0.05.

**Conclusion:** We recommend our own NR programme, including Physiotherapy, Occupational therapy, Electrical Stimulation and DEEP OSCILLATION; useful for the autonomy in activities of daily living of Parkinsonic patients.

## DEEP OSCILLATION® PROTOCOL

APPLICATION

Paravertebrally

FREQUENCY (HZ)

140-200

MINUTES

15-30

REGULARITY

Daily

TIME PERIOD

1 Month

NO OF DAYS

20



**ACCESS FULL ARTICLE**

CLICK HERE





## Magcell Microcirc Reducing Muscle Stiffness in Paraneoplastic Neuropathy

**Mrs K has been using Deep Oscillation since the beginning of September 2020 in the comfort of her own home which has been helping to manage symptoms of Secondary Lymphoedema and Paraneoplastic Neuropathy. At the end of October Mrs K added Magcell PEMF therapy to her protocols. Her feedback follows:**

"PhysioPod kindly let me use on loan the Magcell Microcirc, which is pre-set for a 5 minute cycle of use. It arrived on 29/10/20 and I have to admit that I really didn't think this little gadget that made a whirring sound would do anything.

knees. I used it daily, in addition to the Deep Oscillation Personal Pro.



With Paraneoplastic Neuropathy, positive changes happen very slowly and after using it for a few months I wasn't certain if it was the Magcell or the Deep Oscillation making changes or both. After about 5 weeks of use, I decided to have a period of two weeks treating only one side to determine if it was making a difference and I concentrated particularly on my right foot and hand. I noticed that my right foot felt more connected and I could feel the floor more than I could my left. My knees however, without treatment became painful, puffy and stiff.

*Once I started using the Magcell on my knees again these symptoms reduced. I did this experiment at the end of November 2020. After that, I decided to buy a Magcell to use alongside my Deep Oscillation treatment. I have had more sharp shooting pains/electrical shock feelings in my fingers and toes in the last couple of weeks (January 2021), than I have for three years when damage to my nervous system happened. On good days I have more sensitivity, I can feel the floor, the inside of my slippers, if I wiggle my toes I can feel the base of my shoe and I have less of a burning sensation, which I can only describe as like having severe sun burn, as though the area is on fire, which affects my feet, legs and hands on bad days.*

My husband has noticed that I move more naturally when walking and when using my hand. However, it is still intermittent, as fatigue knocks me back, but the fact is, it's changing and improving. I also use the Magcell to help reduce tension in my muscles/knees after doing my physio exercises. The effect is immediate particularly on my thighs and sides of knees, almost as if someone were massaging the tightness away.

I honestly don't know where I would be without the pro or Magcell now. My recovery, we are certain, has been helped significantly by using both pieces of equipment.

Mrs K"

[VIEW PREVIOUS ARTICLE ON DEEP OSCILLATION](#)

**PERSONAL PRO**

**DYNAMIC**

**NEW**

**FEATURES**

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TECHNOLOGY FOR THERAPY

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## "Delighted with Deep Oscillation Personal Basic For Secondary Lymphoedema"



I was diagnosed with Secondary Lymphoedema in my right arm 18 years after all my lymph nodes had been removed following my breast cancer diagnosis in 2000. I've no idea what triggered it and they do say you are

It was in the hot summer of 2018, that I suddenly noticed, whilst out walking, that my hand and lower part of my arm had swelled. My hand subsequently went down but my lower arm stayed swollen all the way up to the elbow. I tried everything to get it down, I slept with it raised on a pillow, had it strapped by the Lymphoedema nurse and wore my arm sleeves religiously.

Sadly, I noticed recently that my arm had started to thicken. My Lymphoedema nurse suggested I look for a cheap vibrating massager, as she felt my arm would benefit from being agitated. My research lead me to the Deep Oscillation Personal, which sadly, was not cheap. I realise then that this was the same equipment my MLD therapist had used on me previously. I had stopped my MLD sessions as I could see that I needed them more frequently than I could afford long term

“

It takes a while for it to sink in, that Lymphoedema is a life-long condition, which requires sustainable treatment and management going forward.

I had three options:

1. Continue with one handed self-massage, which to be honest is not great and very tiring for the other arm/wrist;
2. Consider the pioneering surgery at a rough cost of £19k approximately, with no guarantee of success;
3. Give the Deep Oscillation Personal a go.

I looked at the PhysioPod reviews, watched the YouTube personal Videos and professional presentations and had a long chat with Julie from PhysioPod UK. I decided to invest in one.

*Very, very, happy with my purchase.*

The cost equated to 50 MLD sessions with my Therapist, so if it works, definitely worth it. I have used the device religiously for two 50 minute sessions a day. I measured my arm before I started and at the end of the first week. I

elbow. Where my arm had been quite round and solid, it was now much more bendy at the wrist and the definition along the bottom of my arm had returned. I am excited about future results!

Just finished a complete session with 50 mins in the machine. I covered the applicator tightly with cling film. I can see how this would protect the life of the applicator. I used the talc which definitely aided the 'glide' over the arm. I was surprised how quickly 50 minutes went. Will do another session later today. Will aim to do it 2-3 times a day, and will measure my arm after a week to see if there is any change.

P.S I've been focusing the machine quite a bit on my elbow, as I remember the therapist saying "hmm there seems to be a blockage at your elbow" which would make sense as my upper arm doesn't have Lymphoedema. Think I may be breaking up that concrete ?? Very, very, happy with my purchase.

Mrs C


[Article on website](#)



**WORLD LYMPHOEDEMA DAY**  
**6TH MARCH 2021**

“

We strongly believe that those of us who live with lymphoedema have an expertise that most clinicians do not understand. Unless they have specialist knowledge or training of the lymphatic system



**L-W-O COMMUNITY**  
supporting those who live with  
Primary, Secondary &  
Lymphatic Malformations

**News Flash**

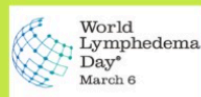
# World Lymphoedema Day 6th March 2021

L-W-O Community is working with European Patient Associations & Patient Representatives to raise public awareness, engage clinicians & put lymphoedema on the radar of politicians.

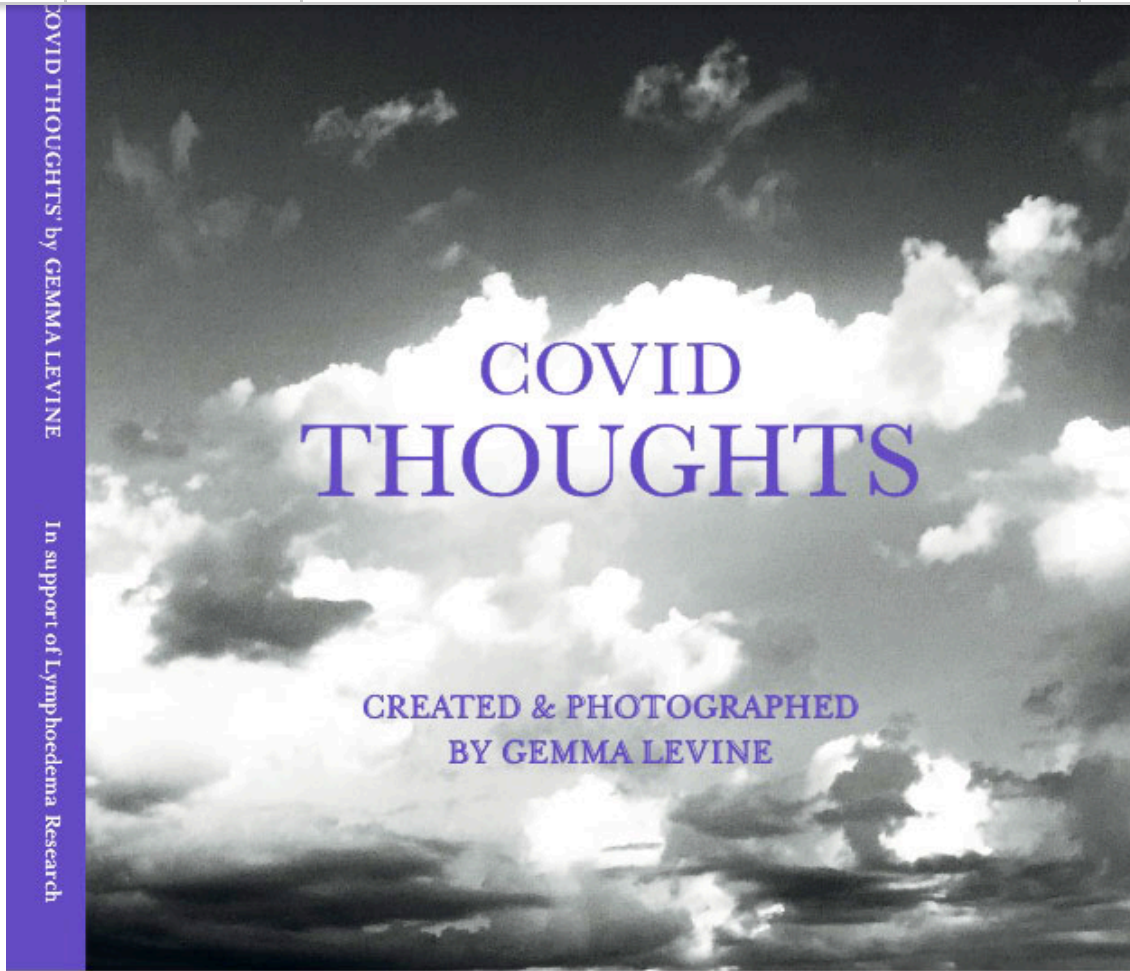
L-W-O would like to involve as many members, followers & supporters help raise the profile of WLD. This could be emailing leaflets, posters, writing letters, sending emails to MPs, GPs, HCPs or sharing press releases across your social media.



**CLICK HERE TO SHOW YOUR SUPPORT**  
[lymphwhatoedema@gmail.com](mailto:lymphwhatoedema@gmail.com)



## NEW BOOK PUBLICATION FOR WORLD LYMPHOEDEMA DAY 6th March 2021



All proceeds to Lymphoedema Research Charity at St George's Hospital.

[Purchase online at £15](#)

EMAIL: [Rose.Bowen@stgeorges.nhs.uk](mailto:Rose.Bowen@stgeorges.nhs.uk)

LE&RN ANNOUNCE A VIRTUAL GLOBAL CELEBRATION  
FOR WORLD LYMPHOEDEMA DAY ON MARCH 6TH, 2021

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Lymphoedema Day. The event is presented by LEARN and hosted by LEARN Spokesperson Kathy Bates. It will feature the debut performance of the one-act play *Let's Talk Lymphoedema/Lymphedema* by Brian Daniels, based on the book *Let's Talk Lymphedema* by Prof. Peter Mortimer and Gemma Levine. The play is directed by Mark Armstrong and is produced in association with The 24-Hour Plays. This Celebration is generously sponsored by [Juzo](#).

Four viewing times are available to accommodate attendees from around the world.

SAVE THE DATE!

In honor of



World Lymphedema Day®  
March 6

# A Virtual Global Celebration

Presented by LE&RN

Hosted by Spokesperson Kathy Bates

Featuring the debut performance of the one-act play  
*Let's Talk Lymphoedema/Lymphedema*  
by Brian Daniels

Based on the book *Let's Talk Lymphoedema*  
by Prof. Peter Mortimer and Gemma Levine

Directed by Mark Armstrong

Produced in association with The 24 Hour Plays

*Celebrity toasts, musical interludes,  
a global community joined together!*

Sponsored by  **Juzo**

Tickets \$50.  
Buy a table of 10 tickets for friends or employees for \$400  
Single Ticket Discount: \$45 if purchased before February 10th.  
[Purchase Tickets Here](#)

Four broadcasts for convenient worldwide viewing!  
Saturday March 6, 2021:  
2:00 pm, 7:00 pm, 10:00 pm  
March 7th 2:00 am  
(All times Eastern Standard Time USA)



Lymphatic Education & Research Network



## COMPLEX REGIONAL PAIN SYNDROME (CRPS)

November 2020 was Complex Regional Pain Syndrome (CRPS) Awareness Month, a poorly understood condition, which affects 1 in 3800 people in the UK and for those affected, the pain is persistent, severe and debilitating.

We contacted [Burning Nights](#), the UK charity and support group, after seeing their informative daily graphics on their instagram page to see whether creating a video to keep these facts alive and in the public eye would be helpful?

Founder, Victoria Abbott-Fleming, ([whose story you can read here](#)) gave her permission and was very grateful for the initiative. Two videos follow, each containing 10 CRPS facts. One more video will follow on 1st March 2021.

There is currently no cure for CRPS, but the earlier treatment is received then the better the chances of achieving a remission. Perhaps you recognise these symptoms in yourself or you know someone who is suffering? We wholeheartedly encourage our readers to share this video and to visit the [Burning Nights website](#) which holds an array of information and support.

# Complex Regional Pain Syndrome (CRPS)



[www.burningnightscrps.org](http://www.burningnightscrps.org)

Part One of Three

# Complex Regional Pain Syndrome (CRPS)



[www.burningnightscrps.org](http://www.burningnightscrps.org)

Part Two of Three



## NEW DEEP OSCILLATION PRACTITIONER

# GENNY HURST THERAPIES LONDON

[gennyhurst-therapies.co.uk/](http://gennyhurst-therapies.co.uk/)

Canadian-born Genny has been in the UK since the 1990s, which was when her passion to study holistic therapies began. She has been working with Neal's Yard Remedies since 2004.

Genny provides high-quality bespoke treatments in an oasis of calm - working with a variety of techniques to help manage the effects stress can have on the body – and to help the body move towards balance. Genny's clients can rely on her to provide a high level of service with sensitivity and care to relieve stress from work, pain from computer use, repetitive strains, and posture-related aches and pains. She aims to uncoil stress and get energy flowing through the body once again. [Visit Gennys's page on PhysioPod](#)



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of training notes, one to one FaceTime or telephone training with Julie then training questions.

We provide a training certificate for your insurers and if Deep Oscillation isn't covered by your insurers then we have full documentation for their underwriters to get it on your policy. That said, most insurers now know of Deep Oscillation. If you are insured with Balens, then we automatically send the training certificate to them.

PhysioPod are the only training providers for Deep Oscillation in the UK and Ireland covered under Class 41 as part of Trade mark number UK00002632742 with the Intellectual Property Office.

We ask all Therapists to fill out a detailed website questionnaire, in order to create a high quality entry on our therapist map that lists all the therapies offered, a personal profile and links to social media platforms. Sometimes, a marketing video too!

All of this is included in the price, it is not extra, as we are often asked. We do this because, a) it is a sizeable investment and b) happy trained therapists provide the very best service to their clients. We are also on hand pretty much 24/7 for questions, guidance and support. Plus we take care of servicing and repairs. Email us on [info@physiopod.co.uk](mailto:info@physiopod.co.uk) if you would like any more information to go forward with investment.

**NEW DEEP OSCILLATION PRACTITIONERS**

announcing



**Deep Oscillation Practitioners  
Trained, Insured & On The Map**

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