

LEARN THE METHOD

What Makes Neurofascial Adaptation Method™ Different

Most performance and rehabilitation programs manage symptoms. Fewer resolve the system generating them. Neurofascial Adaptation Method™ was built for the second category — and built to be measured.

THE SYSTEM ISSUE, NOT THE SYMPTOM

Restriction, reinjury, and execution breakdown are not tissue failures. They are protective outputs of a nervous system reading threat through fascia — the body's primary sensory network. Treating the output without correcting the system produces temporary gains and recurring cost: repeat injuries, plateaued athletes, inconsistent execution under pressure.

What shows up as tightness, reinjury, or inconsistency is the output. The nervous system is the cause.

WHAT IT CORRECTS

Neurofascial Adaptation Method™ recalibrates the brain-fascia relationship directly — changing what the nervous system reads as threat, load, and safety. Restriction resolves at its source instead of returning on a cycle of repeat treatment. It is a structured, sequenced protocol, not a technique layered onto existing programming.

MEASURED IN: Range of motion. Balance Testing, Symptom Inventory, Brain Health Assessment, Return-to-play timelines. Injury recurrence. Execution consistency under load.

WHERE IT STANDS APART

Conventional Rehab / Training	Neurofascial Adaptation Method™
Treats restriction and reinjury as tissue failures.	Treats them as nervous system outputs — protective, not mechanical.
Applies force to change tissue: stretch, mobilize, strengthen.	Applies specific input to change what the nervous system reads as safe.
Success measured by session-to-session symptom relief.	Success measured by ROM, return-to-play timelines, and recurrence rate.
Requires ongoing management to hold gains.	Targets the generating pattern, so gains hold without ongoing dependency.

BUILT FOR INSTITUTIONAL STANDARDS

Thirty-plus years applied across NFL, NHL, and Olympic-level programs. Research-informed and clinically grounded, Neurofascial Adaptation Method™ is structured for integration alongside existing medical, performance, and training staff — designed to strengthen a program's outcomes, not replace its infrastructure.

When the system changes, the output changes — and it holds. That is the method.

FAQ

Q: What is the Neurofascial Adaptation Method™?

A: A clinical framework developed by Simone Fortier

that recalibrates the relationship between the nervous system and fascia, addressing the system generating restriction, reinjury, and execution breakdown — rather than treating those as isolated tissue or symptom problems.

Q: How is it different from traditional fascia release or myofascial techniques?

A: Traditional techniques apply force to change tissue directly. The Neurofascial Adaptation Method™ changes what the nervous system reads as threat and safety, so restriction resolves at its source rather than returning after the session ends.

Q: Is the Neurofascial Adaptation Method™ evidence-based?

A: Yes. Its protocols are documented in the Journal of Bodywork and Movement Therapies and have been independently reviewed by a Mayo Clinic Board of Trustees member with over 1,000 clinical trials to their name.