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Happy FeetTM

Developed by
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Introduction

Dr. Camden Clay has been in practice as a Chiropractor since 1983. By the end of 2017, he had taught 284 “Assisted Stretching Postures from Thai Massage” workshops for the massage profession. In 2012, Dr. Clay studied the feet all year (he commonly studies one body part per year.) He combined his vast knowledge of chiropractic foot adjusting, Assisted Stretching and foot anatomy and created “Happy Feet”!

Treat one of your feet and walk around the room(Also, when treating others, ask them to walk around the room after treating one foot). Make note that almost every time, people agree that the foot that has been treated feels “alive, flexible and amazing” while in comparison, the untreated foot feels “numb, like a wooden peg leg”!

“Happy Feet” was originally developed as a section of Dr. Clay’s “Assisted Stretching Postures from Thai Massage” workshop.

Dominik Pesola said “People well trained in ‘Happy Feet’ should go to health fairs with a sign that reads ‘Right foot free, left foot \$20, show me the \$’. This is a great marketing strategy to “make new friends and influence people.”

Doing both feet takes around 5 minutes.

Dr. Clay has developed seven “Master Fixes”. These “Master Fixes” usually make all weak muscles found through Targeted Muscle Testing instantly strong. “Happy Feet” is a “Master Fix”. It is possible that the reason all muscles usually get strong following “Happy Feet” is releasing the connective tissue in the feet may cause massive connective tissue relaxation throughout the body. Our arteries, veins, nerves, lymphatic channels and cerebral spinal fluid spaces all travel through and are supported by the connective tissue system. When the connective tissue system is relaxed, life flows better. “Happy Feet” is especially awesome for dancers, runners, tennis players and anyone who has feet.

You are invited to become certified to teach “Happy Feet”.

- 20 students is a good size for a class.
- Class is 2.5 to 3 hours long.
- The teacher does each “Happy Feet” procedure to as many participants as possible during class.
- Review Skeletal Anatomy of feet over and over using foot skeleton.
- Ask how many people have discomfort in their feet before and after “Happy Feet”.
- All participants evaluate balance standing on one foot (Tree Pose) and then the other foot before and after “Happy Feet” treatments. 0 is poor balance, 10 is great balance.
- When teaching at Yoga studios, ask all participants to evaluate “Down Dog” for any discomfort before and after “Happy Feet”.
- All participants stretch their own right foot.
- Walk around room and notice how different the treated foot feels versus the untreated foot.
- All participants stretch each other’s left foot.
- All participants walk around the room and notice how balanced their feet feel now.
- All participants stretch each others right foot.
- All participants stretch own left foot.
- Freestyle (when time permits)- students choose whether to focus on treating own feet and/or other people’s feet. Students may leave class early when they feel confident in their ability.

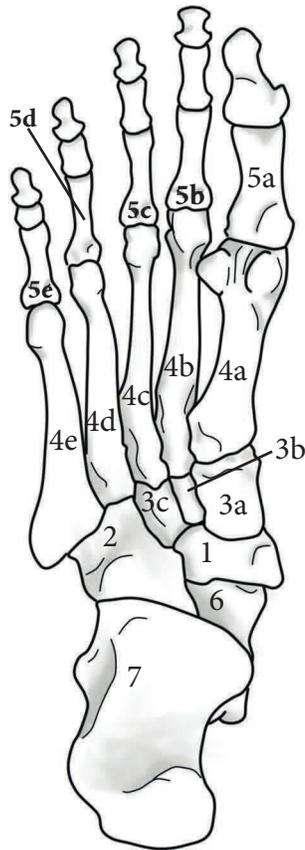
Watch the “Happy Feet” self treatment video and study the “Happy Feet” Book which are available at QuickSelfFixes.com.

Skeletal Anatomy of the Feet

The Foot bone's connected to the ankle bone

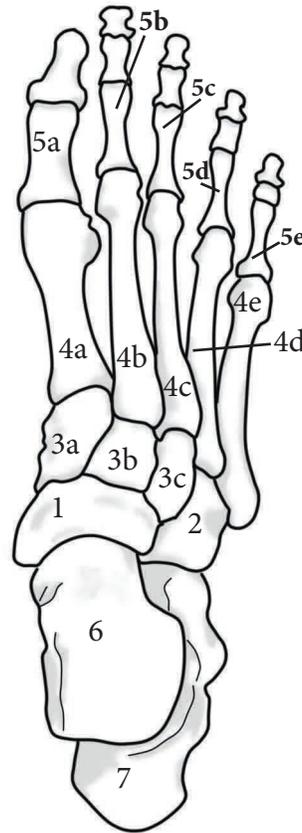
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Bottom View



1. Navicular
2. Cuboid
- 3a. 1st Cuneiform
- 3b. 2nd Cuneiform
- 3c. 3rd Cuneiform
- 4a. 1st Metatarsal
- 4b. 2nd Metatarsal
- 4c. 3rd Metatarsal
- 4d. 4th Metatarsal
- 4e. 5th Metatarsal
- 5a. 1st Phalange
- 5b. 2nd Phalange
- 5c. 3rd Phalange
- 5d. 4th Phalange
- 5e. 5th Phalange
6. Talus
7. Calcaneus

Top View



***With sustained holding stretches, be patient and hold until the associated connective tissue softens under your contact (It takes longer for older people). If you do not feel it relax, hold for 10-15 seconds.**

Happy Feet Class Syllabus

- Knee Fix

- Meniscus Fix

- Soleus Massage Fix

- Navicular:

With thumb on thumb contact, push navicular(1) medial to lateral and hold.

- Cuboid:

With thumb on thumb contact , push the cuboid(2) lateral to medial and diagonally downward and hold. (For self treatment, use index finger on index finger contact.)

- Cuneiforms:

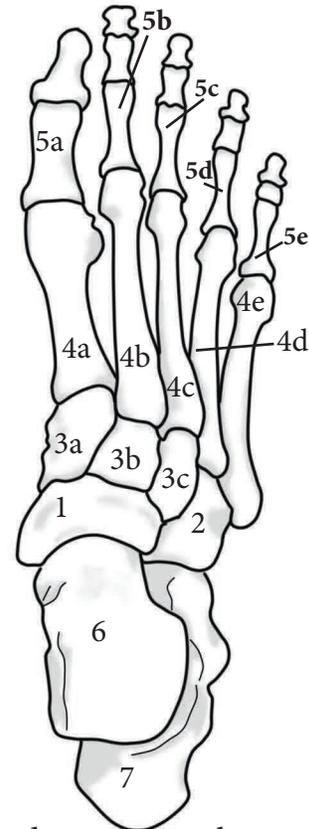
Use thumbs with thumb nails touching to pry the first cuneiform(3a) and second cuneiforms(3b) apart. Thumbs contact the bottom of the foot, while the other fingers contact the top of the foot. Pull the first and second cuneiform bones apart and hold. Shift contacts laterally and repeat the procedure to stretch the ligaments between the second cuneiform(3b) and third cuneiform(3c).

Note: This may be painful

- Metatarsals:

Grip the foot with thumbs on the bottom and index fingers on the top. With this grip, contact the first metatarsal head(4a) with one hand and the second metatarsal head(4b) with the other hand. Hold the second metatarsal head stationary, and roll the first metatarsal head in full circles bringing full tension between the first and second metatarsal heads. Continue this circular motion until noticeably bigger circles occur.

Top View



Bottom View

Repeat the metatarsal circle procedure while contacting:

- The second metatarsal head(4b) and third metatarsal head(4c)
- The third metatarsal head(4c) and fourth metatarsal head(4d)
- The fourth metatarsal head(4d) and fifth metatarsal head(4e)
- Hold the fourth metatarsal head(4d) stationary and roll the fifth metatarsal head (5d).

- Toes (Phalanges):

Pull the fifth toe(5e) straight forward and away from the body and then superior to inferior and hold. Repeat this procedure for the fourth(5d), third (5c), and second(5b) toes.

Note: Only pull big toe(5a) posterior to anterior and not superior to inferior due to small sesmoid bones under the big toe.

- Calcaneus:

Hold both sides of the talus(6) with one hand. Cup the calcaneus(7) in the other hand. Rotate the calcaneus in clockwise and/or counter-clockwise circles. Repeat this motion until the circular motions become noticeably bigger circles.

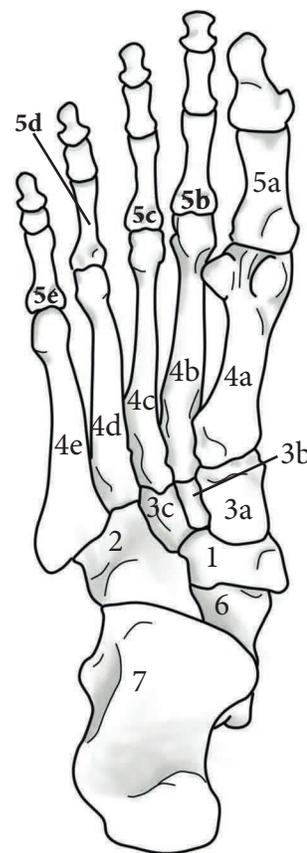
- Ankle Fix**- Plantar Fascia:**

The plantar fascia connects the calcaneus(7) to the five metatarsal heads(4a,b,c,d,e) on the bottom of the foot. It's thick and tough. Dorsiflex the foot to bring the plantar fascia to tension, then slowly cross fiber friction the plantar fascia from the calcaneus to the metatarsal heads. Next, plantar flex the foot and repeat cross fiber friction to the plantar fascia. Repeat this procedure several times. This may be painful.

- Long and Short Longitudinal Ligaments:

Apply strong thumb pressure deeply into the arch of the foot. Apply pressure through multiple points along the central, longitudinal section of the plantar fascia from the calcaneus(7) almost to the metatarsal heads(4a-4e). While maintaining this deep thumb pressure; dorsiflex and plantar flex the foot multiple times at each level. This stretches the long and short plantar ligaments. **Note: This may be painful.**

Note: Treat one foot and walk around the room. Commonly people agree that the foot which has been treated feels “alive, flexible and amazing” while the untreated foot feels “numb, like a wooden peg leg”!



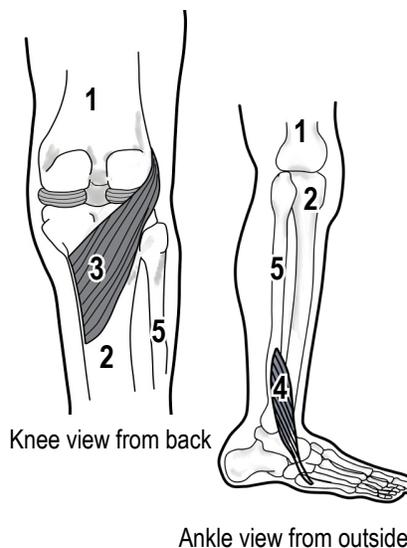
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Knee Fix (from Quick Self Fixes Program)

KNOW YOUR BODY

This fix helps prevent knee and ankle instability and pain.

The Knee Fix supports proper alignment between the thigh bone (femur) (1) and shin bone (tibia) (2) and makes the popliteus (3) and peroneus tertius (4) muscles strong. Because the popliteus muscle crosses behind the knee, it contributes to knee instability when weak. The peroneus tertius muscle comes off the bottom one-third of the fibula (5) and has a tendon which crosses the outside of the ankle, inserting on top of the foot. When the peroneus tertius is weak, it causes ankle instability and increases the potential for ankle sprains.



Together, the Knee Fix and/or the Meniscus Fix, on the following page, make the popliteus (3) and the peroneus tertius (4) muscles instantly strong!

A strong peroneus tertius (4) helps stabilize the ankle and foot.

Note: Do not do this fix within one year following any kind of knee surgery. If you have had knee surgery, ask your surgeon if the Knee Fix is safe for you.

THE SET UP

1. **(Photos A and B)** Place your forearm, thumb facing up, under your knee joint (use the arm on the same side of the knee you are treating). Hold the forearm firmly close in behind the knee. Your wrist should not be in contact with your knee joint. With your other hand, hold your lower leg close to your ankle.

2. Do two light gentle bounces of your lower leg to loosen the knee joint and ensure the fit of your forearm directly behind your knee joint.

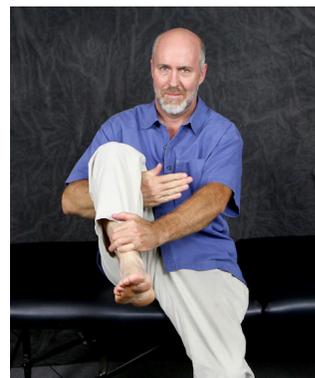
Note: Do not cause pain. Move slowly. Be gentle.

THE FIX

3. **(Photo C)** Make one final, slightly firmer pull to bring the heel closer to the back of your thigh.

Note: This fix may also be done while lying on your back.

When treating others, for safety reasons, have them do the Knee Fix for themselves.



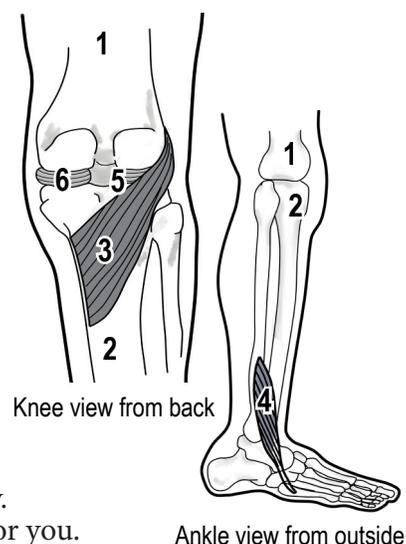
Meniscus Fix (from Quick Self Fixes Program)

KNOW YOUR BODY

This fix helps prevent knee and ankle instability and pain.

The two menisci (plural for meniscus) are two C-shaped cartilage discs that cushion your knee joint between the thigh bone (femur) (1) and the shin bone (tibia) (2). There is one meniscus on the outside (lateral meniscus) (5) and one on the inside (medial meniscus) (6) of your knee. They often get fixated.

The Meniscus Fix and/or the Knee Fix, on the previous page, make the popliteus (3) and peroneus tertius (4) muscles instantly strong!



Note: Do not do this fix within one year following any kind of knee surgery. If you have had knee surgery, ask your surgeon if the Meniscus Fix is safe for you.

THE SET UP

1. Sit near the edge of a chair or bed.
2. **(Photos A and B)** Place the meaty thumb side of each palm on both sides of the bent knee joint at its hinge where the menisci are located. The hinge is the pivot point for the knee joint.
3. **(Photo B)** Push in and hold very firmly toward the middle of the knee using strong and equal pressure on both sides of the knee joint with your hands.
4. **(Photos A and C)** Gently swing your lower leg partially forward and backward twice from the knee to ensure the proper hand placement and a firm hold at the hinge of the knee joint.

Note: Do not cause pain. Be gentle.

THE FIX

5. **(Photo C)** Keep this firm hold and at the same time, straighten your leg at a slow to medium speed.

Note: Be sure to keep firm hand pressure on both sides of your knee during the motion. Do not allow your hands to slip off.

When treating others, for safety reasons, have them do the Meniscus Fix for themselves.

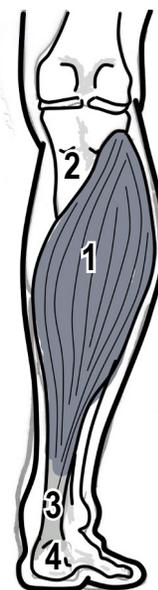


Soleus Massage Fix (from Quick Self Fixes Program)

KNOW YOUR BODY

This fix helps prevent achilles tendonitis and/or plantar fasciitis.

The soleus muscle (1) is between the tibia bone (2) in front and the overlaying gastrocnemius muscle in back (not pictured in illustration). The soleus and gastrocnemius muscles join to form the achilles tendon (3). The upper part of the soleus usually feels soft, but commonly the bottom one-third of the soleus muscle feels very tight and/or sore to the touch. Touch your soleus muscle (as shown in photo A) and see if this is true for you. When the soleus is tight, it pulls the achilles tendon too tight, contributing to achilles tendonitis. The achilles tendon pulls on the heel bone (calcaneus) (4), which in turn pulls the plantar fasciae on the bottom of the foot, contributing to plantar fasciitis. The plantar fasciae is a wide, thick, tough ligament that connects the heel bone to the front of the bottom of the foot. It is acceptable if the soleus massage is reasonably uncomfortable to perform. The most helpful points to massage will be very tight and/or sore to the touch. Stay within your acceptable pain threshold and do not bruise the area.



Calf view from back

THE SET UP

1. **(Photo A)** Sit and position your leg against a sturdy surface and allow the ankle to move freely. Position one thumb over the other thumb to double the pressure. Contact the soleus muscle on the inside of your calf just behind the tibia bone (2).

2. **(Photo A)** Do a warm-up massage by applying pressure in small segments up and down the bottom one-third of the soleus muscle while searching for tight and/or sore spots.

3. **(Photo A)** Hold deep thumb-on-thumb pressure on each of these tight and/or sore points that you find.

Note: Move slowly.

THE FIX

4. **(Photos B and C)** Next, repeatedly flex the foot up and down to move the muscle underneath your thumb pressure. This stretches the soleus against your deep stationary thumb pressure.



When treating others, do the Soleus Massage Fix for them.

Happy Feet Ligament Stretches

Navicular

With thumb on thumb contact, push the navicular(1)(See page 2) medial to lateral and hold.

SELF

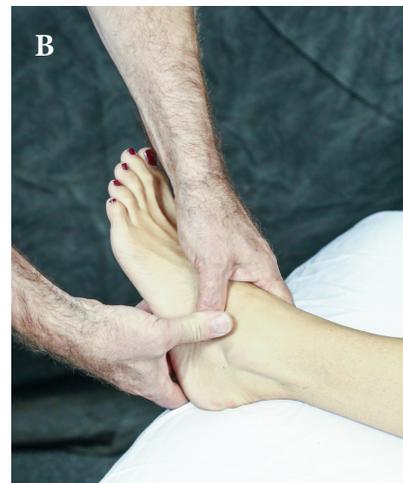


OTHERS



Cuboid

With index finger on index finger, push the cuboid(2) (See page 2) lateral to medial and diagonally downward and hold. **When treating others, use thumb on thumb contact and hold.**

SELF**OTHERS**

Cuneiforms

Use thumbs with short thumb nails touching to pry the first cuneiform(3a) (See page 2) and second cuneiforms(3b) apart. Thumbs contact the bottom of the foot, while the other fingers contact the top of the foot. Pull the first and second cuneiform bones apart and hold. Shift contacts laterally and repeat the procedure to stretch the ligaments between the second cuneiform(3b) and third cuneiform(3c).

Note: When treating others, inform them that this may be painful.



SELF



OTHERS



Metatarsals

For self, grip the foot with thumbs on the bottom and index fingers on the top. For others, grip the foot with thumb on top and index fingers on bottom. Contact the first metatarsal head(4a) (See page 2) with one hand and the second metatarsal head(4b) with the other hand. Hold the second metatarsal head stationary, and roll the first metatarsal head in full circles bringing full tension between the first and second metatarsal heads. Continue this circular motion until noticeably bigger circles occur (this happens pretty fast).

Repeat the metatarsal circle procedure while contacting:

The second metatarsal head(4b) and third metatarsal head(4c)

The third metatarsal head(4c) and fourth metatarsal head(4d)

The fourth metatarsal head(4d) and fifth metatarsal head(4e)

Hold the fourth metatarsal head(4d) stationary and roll the fifth metatarsal head (5d).

SELF



OTHERS



Toes (Phalanges)

Pull the fifth toe(5e) (See page 2) straight forward and away from the body and then superior to inferior and hold. Repeat this procedure for the forth(5d), third (5c), and second(5b) toes.

Note: Only pull big toe(5a) straight forward and away from the body and not superior to inferior due to small sesmoid bones under the big toe.

SELF



OTHERS



Heel Bone (Calcaneus)

Hold the lower leg with one hand when treating self.

Hold the top of the foot with one hand when treating others.

Hold the calcaneus(7) (See page 2) with the other hand.

Rotate the calcaneus in clockwise and/or counter-clockwise circles.

Repeat this motion until the circular motions become noticeably bigger circles.

SELF



OTHERS



Ankle Fix (from Quick Self Fixes Program)

KNOW YOUR BODY

This fix helps prevent ankle, knee, and hip joint instability and pain.

The talus is the ankle bone upon which your skeleton balances. It often needs a little help in finding its optimal position. Only ligaments hold the talus bone in place. The talus articulates with the tibia on top, the fibula to the side, the navicular to the front, and the calcaneus (heel) on the bottom (see illustration on right).

Note: Do not cause pain.

Note: Do not do this fix with an acute, swollen ankle sprain.

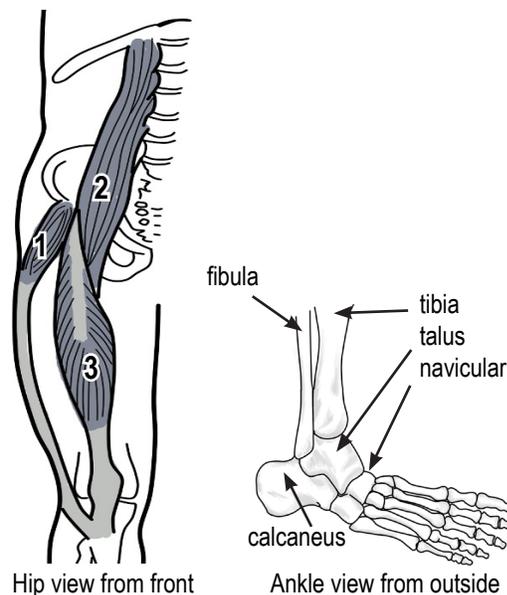
THE SET UP

1. **(Photo A)** While sitting, grip both hands above the ankle.

THE FIX

2. **(Photos B, C, D and E)** Shake this foot firmly and rapidly side to side. The foot should swing loosely and wildly at the ankle for two to three seconds. Your foot, ankle, and lower leg remain passive. You are not using your foot or leg muscles to create movement. You are using your hands to shake the foot from side to side.

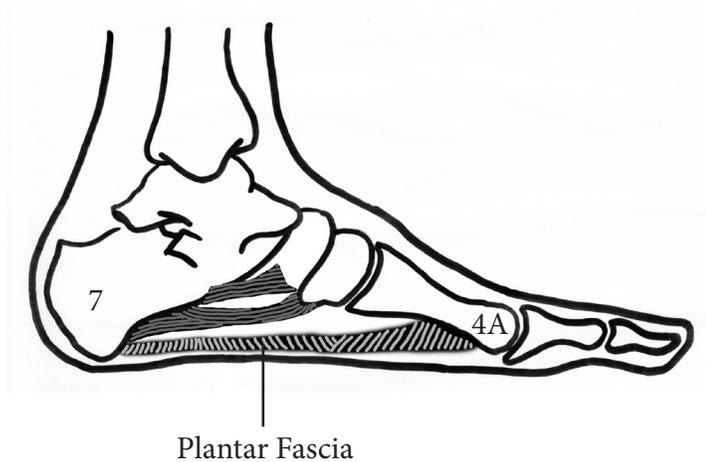
When treating others, for safety reasons, have them do the Ankle Fix for themselves.



Plantar Fascia

The plantar fascia connects the calcaneus(7) (See page 2) to the five metatarsal heads(4a,b,c,d,e) on the bottom of the foot. It's thick and tough. Dorsiflex the foot to bring the plantar fascia to tension, then slowly cross fiber stretch the plantar fascia from the calcaneus to the metatarsal heads. Next, plantar flex the foot and repeat cross fiber stretch to the plantar fascia. Repeat this procedure several times in several locations in the arch of the foot.

Note: When treating others, inform them that this may be painful.



SELF



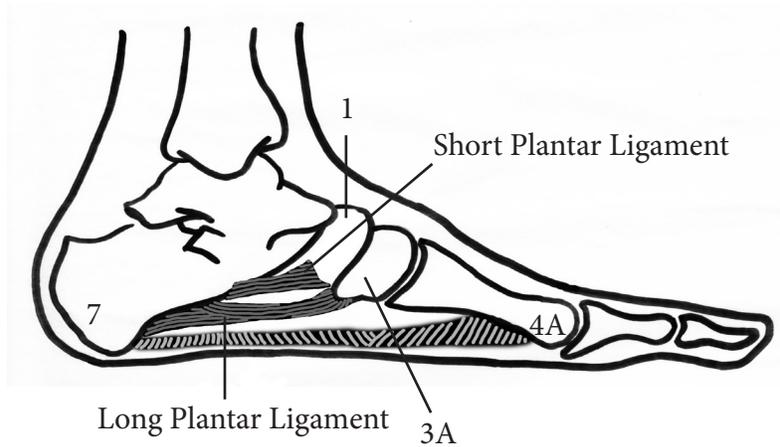
OTHERS



Short and Long Plantar Ligaments

Apply strong double thumb pressure to the deep ligaments in the arch of the foot. Apply pressure through multiple points along the central, longitudinal section of the plantar fascia from the calcaneus(7, See page 2) almost to the metatarsals(5a-5e). While maintaining this deep thumb pressure; dorsi flex and plantar flex the foot multiple times at each level. This stretches the long and short plantar ligaments.

Note: When treating others, inform them that this may be painful.



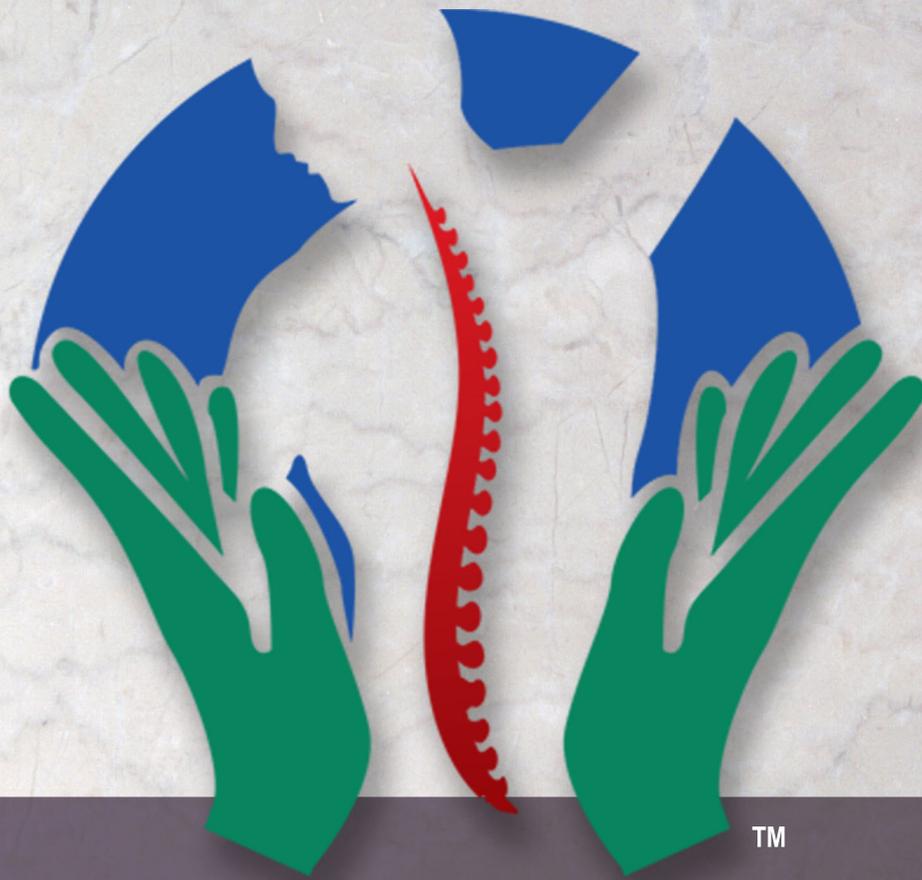
SELF



OTHERS



Treat one foot and walk around the room. Commonly people agree that the foot which has been treated feels “alive, flexible and amazing” while the untreated foot feels “numb, like a wooden peg leg”!



TM