

treatment many patients report a kind of detached awareness, this is similar to a meditative state where you feel alert and aware but emotionally detached enough to see what is going on in your life with increased clarity.

### **How Does This Treatment Work?**

A combination of physical and emotional trauma can shock parts of your body. When your body is unable to dissipate the shock the tissues contract as if they were trying to wrap around the injury. Such contractions which have been "stored" in the body will restrict normal motion, and going back to osteopathic principles, will compromise function.

The craniosacral motion will be absent or modified around injured areas in the body. This will lead the therapist to problem areas in the body.

### **Commonly Treated Conditions**

Cranial osteopathy is my first choice of treatment for very young patients. I find that babies and children respond well to the gentle techniques and the effects of birth trauma like colic, sucking problems, breathing difficulties, restlessness and irritability can be eased quickly. Young children with "drainage" problems, such as glue ear also respond well to this approach.

Adult patients that I treat cranially tend to fall into one of four categories:

**Injured:** Victims of recent violent injuries (deliberate or accidental), typically falls, sports injuries or car accidents.

**Ongoing:** Chronic or developing conditions such as migraine, headaches, jaw (TMJ) and face pain. Some types of arthritic or rheumatic pain respond well to cranial osteopathy, others respond better to acupuncture.

**Transient:** Temporary conditions such as pregnancy where sciatica, pelvic and back pain can be eased. For morning sickness I find acupuncture works best.

**Stressed:** Sufferers from too much of the "wrong" kind of stress. This includes people who are physically and/or emotionally exhausted and suffering a whole range of stress related conditions like insomnia, depression, mood swings and feeling "run-down" or overwhelmed. There can be physical pain from muscles and joints due to maintaining a "stress posture" and often digestive problems.

There is arguably a fifth group: those who are using cranial treatment as part of a program of personal development, I tend not to think of this group as patients but rather as individuals who are focused on increasing self awareness and who have a deep interest in mind-body relationships. This group have generally moved beyond physical problems and have a deep interest in mind-body relationships.

### **What to Expect after Treatment**

The therapeutic effects continue after treatment as the body responds to change at its own pace. On the evening after treatment be guided by how you feel. If you feel like resting, then rest. If you feel like being active, be active. Just don't force yourself to do anything that you don't feel like doing.

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Bill Ferguson

### **REGISTERED OSTEOPATH**

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Sports Injuries*

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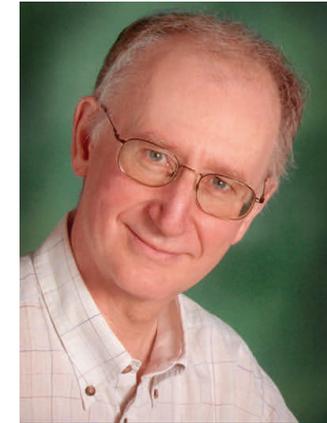
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# Cranial Osteopathy



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### Registered OSTEOPATH

Osteopathy

Cranial Osteopathy

Acupuncture

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## What is Cranial Osteopathy

I think of cranial osteopathy as a particular "style" of working. Compared to the more physical techniques that all osteopaths learn as students the style of working "cranially" is extremely gentle and subtle and takes a long time to learn.

Cranial osteopaths talk about "listening to the body" and working with a strange phenomenon called the CSR (the cranial sacral rhythm), also known as the IVM (involuntary motion). We talk about still points and tides and fulcrums. We have models that we use to attempt to explain the movements and sensations that we routinely work with. Many of my colleagues find the whole cranial approach too esoteric and prefer not to work in this area. Personally I have no doubt that working cranially has helped many of my patients and I see and hear almost on a daily basis how people improve when treated this way.

## Why is it called Cranial

The inventor of cranial osteopathy, Dr Sutherland (1873-1954), worked out a system of correcting cranial bone restrictions using manipulation. He used carefully focused pressure held for as long as necessary to get the correction. He experimented on his own head, creating and releasing distortions of the kind that he imagined could exist in his patients due to accidents or traumas such as dental extractions. He kept careful notes of his experiments and gradually refined and later taught his techniques to his students and peers.

Although originally the focus was on the bones of the skull, it soon became obvious that the rest of the body could be treated using similar techniques.

## What about the Sacrum

Sutherland's model was developed further by John Upledger and others in the 1960's to try to explain the observation that altering the bones of the skull affects, in particular, the sacrum, and vice versa. The sacrum is the bone that joins your spine to your pelvis. If your pelvis is twisted, tilted or unbalanced or the lumbar/sacral articulation is compromised it will have an effect all the way up to your head. This interaction between the cranial bones and the sacrum is small but persistent.

In practice I find that a restriction at the level of the sacrum and lowest lumbar vertebra has the effect of depressing the patient's energy levels. You will "run out of steam" quickly and will feel tired after activity. This will often be the first area I work on. I tell people that walking around with a jammed up sacrum is like driving your car with the handbrake on; it can be done but it is wearing and wastes fuel.

## Is it like Reiki, Touch for Health, Spiritual Healing etc

During treatment I will often have my hands in one place for minutes at a time as I wait for adjustments to take place. It can look like the "laying on of hands" and I often get asked "is what you are doing the same as . . ."

My answer is "probably, if you don't look beyond the hands". The difference I believe is in the mindset. When I am treating I am visualising anatomy, I am told that Reiki therapists visualise symbols, spiritual healers may use prayers or religious symbols.

So when I work "cranially" I am combining my knowledge of anatomy with my healing intention and using my hands to monitor how the body changes during treatment and if you feel heat or tingling or things moving, don't be

surprised.

## Is Craniosacral Therapy different to Cranial Osteopathy?

Craniosacral therapy provides ways of "reading" the emotional and psychic state of the patient. Craniosacral Therapy is a valuable tool for developing self-awareness and even spiritual awareness.

The main difference between cranial osteopathy and craniosacral therapy is the therapist. Cranial osteopathic treatment will be provided by an osteopath. Craniosacral therapy may be offered by anyone who has followed a training course. At the moment there is no compulsory register for craniosacral therapists in the UK but this may change soon. Whether this is a good thing or not depends on who you ask.

## How Does it Feel

Apart from your shoes, you can remain fully dressed. You will be lying on a treatment couch on an air mattress. Most people are surprised at the gentle contacts and lightness of touch during the treatment. It is easy to fall asleep but if you can stay awake, you will get more benefit from the treatment because you will start to recognise how it feels to be relaxed. Many people I treat have forgotten how it feels to be relaxed!

The first treatment is generally a chance to clear out "clutter", accumulated tensions that may be recent or long term. Some will disappear after the first treatment others will be revealed at the second visit as more persistent restrictions needing more attention. By the third or fourth treatment, most people report feeling much better "within themselves" in addition to changes in any presenting symptoms. By the fifth or sixth