

Heart Failure and CranioSacral Therapy

By: Christopher Slate

Personal Information: Sixteen year old female.

Symptoms: Severe myocardial distress. Recent heart failure landed her in pediatric ICU, connected to a heart pump, awaiting a heart transplant. Client would not eat. She was extremely weak, malnourished and in life-threatening danger of being too fragile to have the heart transplant surgery. Doctors were very concerned and parents were extremely worried. Client was psychologically and emotionally overwrought.

Pertinent medical history: Previous to her heart failure, the girl was a healthy, active, "normal" teenager with no major medical conditions. There were genetic predispositions on her mother's side of the family (myocardial infarction). Previous treatment following heart failure was from physicians and specialists at UCLA Mattel Children's Hospital and ICU.

Evaluation: Bedridden at the ICU, the client was emaciated and extremely weak. She was in severe emotional distress, slightly subdued by medications. She was talking rapidly, and complaining constantly to her distraught and helpless parents. She did not initially want to be touched, distrustful of having any further invasive procedures. Initial palpation revealed extreme energy depletion and disorganization - her system and tissues had a lifeless feel to them.

Tools used: Initial contact was energetic and off the body. Touch was initiated at her feet. Intention of contact was extremely light, non-invasive - and neutral. Primary tool used was intention -- extreme caution and respect in the melding process. Once melded, I asked her system what it needed. The response was gentle energy. Primary tool used here was listening, to modulate amount of energy needed. From bottom of foot, directed energy up her legs - listening carefully to see how far up the legs her system wanted the energy. Progress was slow and gradual. Tissues absorbed energy in first session only up to pelvis. Next session, continued offering energy into her system, starting at feet. I was advised by my friend and mentor, Valerie Hunt, to connect with her will, and strengthen it with my own. I did this, and continued sending energy, which traveled up through her midline from pelvis to the heart. Energy had qualities of white light and spiritual strength. This process continued in next session until her system eventually filled with energy, from feet to top of the head. The energy moved through her midline and out her crown. This occurred on her last session before transplant surgery. Following surgery, stillpoints, grounding, energy work through meridians, and nonverbal SER were used to help her recover from shock, and integrate the new heart into her body.

Objective results: Client's system seemed to absorb the energy much like a dry soil absorbs water in nourishing a withered plant. Her body began to grow stronger and more vital after the first session. With each successive treatment, her energy and vitality increased significantly. Her nervous system and demeanor grew more calm and relaxed. She began eating after the first session, and continued to eat regularly. She also began having friends visit, which lightened her mood. Within 10 days, she was able to have a successful heart transplant surgery. Following surgery, she initially struggled with recovery, not sleeping and displaying behavior doctors termed "ICU psychosis". Follow-up sessions had marked effect on calming and re-organizing her system, inducing sleep and aiding recovery, so she could be moved from ICU. Her recovery improved until she was discharged from the hospital. Client lived in another city, so my work ended after her discharge from hospital. In phone

communications, she reports good recovery and return to "normal" life, albeit with new parameters.

Subjective results: Client felt results of nurturing touch, and requested/welcomed sessions throughout her time in the ICU and hospital. Although she was relieved at her improvement, she did not express specifics of how she felt. This was partially due to her still weakened and medicated state, partially due her teenage personality of not being openly communicative, and partially due to her pre-occupation and worry regarding her future. Her parents, of course were extremely thankful for her successful surgery and recovery, but also preoccupied with the "road ahead" in terms of returning home and continuing with in-home treatment, nursing etc.

Average length of sessions: 60 min.

Number of sessions: 7