Touch taps spine's 'hydraulic system'

Craniosacral therapy heals body from inside out, Practitioners say

By KELLY BOTHUM, The News Journal
Posted Tuesday, February 13, 2007

Wendy Forrest strongly believes in the body's abilities to heal itself. Sometimes, though, it just needs a little help.

As a craniosacral therapist, Forrest provides that help in the form of gentle, low-pressure touching that allows the body to correct internal blockages of the craniosacral system, made up of the membranes and fluid that cover and protect the brain and spinal cord. Practitioners believe this physiological system -- typically not recognized in Western medicine -- is critical to the functioning of the central nervous system.

"Everybody has a self-healing mechanism," Forrest said. "I'm tapping into that. It's an inside-out thing. Western medicine is an outside-in thing. I'm going after the cause of the problem, not addressing the symptoms."

That's the premise behind craniosacral therapy, a hands-on treatment developed in 1975 by osteopathic physician John Upledger. He first noticed the rhythmic movement of the craniosacral system during a spinal surgery in 1970, although none of his colleagues could explain what was going on.

He later theorized that the craniosacral system operated like a hydraulic system, running from the skull bones to the sacrum, the base of the spine. Balancing the system by removing blockages, or restrictions as he called them, resulted in an increase in comfort and function for people with brain and spinal problems.

More than 30 years later, The Upledger Institute has trained 80,000 practitioners in craniosacral therapy. Craniosacral therapy has been credited with helping people who have migraines, traumatic brain injuries, depression, temporomandibular joint problems, chronic pain, fibromyalgia, and children with autism and attention-deficit disorders.

Dr. Bettina Herbert, a medical doctor with osteopathic training who works at the Jefferson-Myrna Brind Center for Integrative Medicine at Thomas Jefferson University Hospital in Philadelphia, uses craniosacral therapy with almost all her patients. She calls it "another way to listen to the body."

"The hands are the most diagnostic tool. If you are trained, you can treat with them as well," Herbert said. "But as M.D.s, most of us aren't trained to use them."

Finding the flow

Forrest, who trained with The Upledger Institute, describes her skill as a gentle touch to help the body remove restrictions in the craniosacral system. Most people are walking around with a body in "organized dysfunction," she said, meaning they are used to living with pain and discomfort. Her job is to get the body to "disorganize" to heal itself.

During a session, her hands cradle the skull, legs and sacrum. She does that to detect the rhythm of the cerebrospinal fluid. She notes whether it's expanding and contracting in a regular pattern or if it's unbalanced, perhaps moving too fast in one area and too slow in another. The off-kilter rhythm suggests a blockage.

If she detects a problem, she applies a light touch, usually no more pressure than the weight of a nickel on the skin. The slight pressure allows the body to adjust itself and the cerebrospinal fluid to return to a more natural flow, freed from constrictions that may have been imposed, she said, as a result of injury, medicines, childbirth and other problems.

"There is no manipulation," said Forrest, a massage therapist who treats patients at locations in Bear, Wilmington and Newark. "I'm not doing anything to you. I'm listening with my hands."

Patients come to her usually by word of mouth. They come back because of the results. Results don't happen instantly, she said, but it doesn't take long for patients to notice improvement. For brain-injury patients, it may be improved movement in an area they couldn't use. Someone suffering from migraines may need less pain medication. Parents may notice their autistic child smiles or is more functional than before the therapy began.

Abigail Marks was only 4 months old when her mother, Kristen, first brought her to Dr. Tamara Blossic, a Hockessin chiropractor who also specializes in craniosacral therapy. Abigail was born with serious food allergies to milk, soy, eggs and other foods that manifested themselves through severe gastrointestinal problems, including reflux.

Kristen Marks had used massage during her pregnancy so she understood the benefits of hands-on bodywork. But she was still nervous about using craniosacral therapy on her infant daughter. The improvement in Abigail's condition soon proved to her those concerns were unnecessary.

"I noticed a change pretty quickly," said Marks, 40, of Glasgow. "Craniosacral was able to release pain for her. Her GI was just tied up in knots before. ... All the other doctors, there wasn't really anything medical they could do for her."

By the time Abigail turned 3, she outgrew her food allergies. But she still sees Blossic every three weeks for a 25-minute craniosacral session. Marks also goes twice a week to Blossic's office for massage and craniosacral therapy.

Herbert said by the time patients visit her, they have exhausted the more traditional forms of medicine. Even if they haven't heard of craniosacral therapy, they're willing to try it, even if the results aren't instantaneous.

"People are used to antibiotics, something working quickly and suddenly changing something dramatically," she said. "It may take weeks to months, but they are getting better in the long term and they'll continue to get better."

Many benefits, few risks

Blossic, who has been a chiropractor for 17 years, said craniosacral therapy can greatly improve quality of life for someone living in pain or with a chronic condition. For a child with cerebral palsy, the therapy can reduce the tightness in the muscles that makes the condition so painful.

Although not widely accepted by mainstream medicine, many health professionals are learning craniosacral therapy, she said. They include dentists, physical and massage therapists, and chiropractors.

"It's a wonderful modality that blends with other therapies," said Blossic, who has been practicing craniosacral therapy for seven years. "It helps other therapies work better. It's not replacing anything."

The only people who shouldn't try craniosacral therapy are people with acute aneurysms, those with brain injuries who haven't been released from care by their neurologist, someone taking a blood thinner like Coumadin and patients with brain tumors, Herbert said. Those people can be affected by the change in cerebrospinal pressure.

Herbert said she once treated a young woman who had been seen twice by emergency room physicians and cardiologists for chest pain. Doctors couldn't find anything wrong. Herbert detected her craniosacral rhythm was off and treated her with the therapy. Her condition greatly improved.

To Herbert, the difference was making a connection with the patient. She actually touched her, examined her, listened to her complaints and found a way to help her. That's what doctors are supposed to do, she said, whatever way works. In this case, it was craniosacral therapy.

"It's like dancing with someone very closely and following them," Herbert said. "It's like someone is carrying a burden and you're saying, 'Here, let me hold this for you until you can carry it.' With craniosacral, it fixes itself."