

Upledger Institute Case Study

CranioSacral Therapy – Conception, Pregnancy, and Birth

By: Patricia Churavy PT

DATE- 8/2/17

PATIENT- Jennifer, female age 35

HISTORY

- having difficulty conceiving second child
- has a daughter age 21 months who was delivered via emergency C-section

SYMPTOMS

- reports feeling tense

EVALUATION- INITIAL VISIT

- POSTURE: within normal limits
- GAIT: within normal limits
- AROM: within normal limits throughout
- STRENGTH: 5/5 throughout
- WHOLE BODY CST EVALUATION:
 - restriction at pelvic diaphragm
 - facilitated segment T12-L1
 - sphenoid right sidebending lesion

TREATMENT- INITIAL VISIT

- significant release of energy cysts at pelvic diaphragm, right ovary and to a lesser extent left ovary
- release of facilitated segment T12-L1
- release of sphenoid
- respiratory diaphragm, thoracic inlet and occipital cranial base releases
- dural tube rock and glide

- L5-S1 three part release
- cranial pumping
- SER

OUTCOME- INITIAL VISIT

- Through dialogue patient forgave herself as she felt like she failed at her first delivery by needing an emergency C-section.
- Inner Physician assured her that her uterus is healed.
- Inner Physician assure her that she had no reason to fear need for a repeat C-section.

FURTHER EVALUATIONS AND TREATMENTS

- **SECOND VISIT:**
 - Patient did conceive shortly after initial visit but had a miscarriage. She returned for a second visit 3 months after the initial treatment complaining of feeling pressure from family to conceive again as well as right upper extremity pain from holding her now two year-old daughter.
 - Pain in right UE was reproduced with resisted abduction.
 - Facilitated segments at T5-6 and L2-3 were released.
 - Energy cyst at left ovary as released.
 - Regional tissue release was done left upper extremity.
 - All horizontal diaphragms were released as well as L5-S1.
 - Patient reported improved ease of movement right UE as well as a generalized sense of relaxation.
- **THIRD VISIT:**
 - Patient was now 14 weeks pregnant, complained of pain in her entire spine.
 - Facilitated segments were released at C5-6, T5-6 and L5-S1.
 - Significant release occurred with diaphragm release at respiratory diaphragm and occipital cranial base.
 - Sphenoid right torsion and right sidebending lesions were corrected.

- Significant release occurred in horizontal membrane with ear pull.
 - Dialogued with baby which led to a connection to mom's heart and pituitary.
- **FOURTH VISIT:**
 - Jennifer was now 37 weeks pregnant and noted generalized anxiety along with tightness/discomfort in pelvic, thoracic and shoulder areas.
 - Facilitated segment was released at T8-9.
 - Respiratory diaphragm was released.
 - Dural tube rock and glide was much improved by end of session.
 - Dialogued with baby's Inner Physician who agreed to remind mom to take deep diaphragmatic breaths when she begins to feel anxious.
 - **FOLLOW-UP:**
 - Patient birthed her second daughter 22 days after fourth visit via vaginal delivery.

OUTCOME

- **Subjective:** Jennifer was able to conceive and carry her second child with minimal discomfort. She was very happy to be able to have a vaginal delivery.
- **Objective:** Multiple restrictions in her trunk were released.

TOOLS USED

- 10-step protocol
- Arcing
- Facilitated segment releases
- Regional tissue release
- SER with dialogue, both with patient's Inner Physician and unborn baby's Inner Physician

LENGTH OF SESSIONS- One hour

NUMBER OF SESSIONS- 4

COST OF THERAPY PRIOR TO CST USE- zero

COST OF CST THERAPY- \$300.00

DISCUSSION

This case describes the support that CST provided to a young mother overcoming feelings of guilt over having to deliver her first child via Cesarean section, which first led to difficulty conceiving, next conceiving and then losing a child to miscarriage, then conceiving and carrying that child to term, and finally being able to deliver that child vaginally.