

Upledger Institute Case Study

CranioSacral Therapy – Relieve Symptoms Caused by Unexpressed Mourning and Fear

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PATIENT- Josh, male age 11

HISTORY

- Multiple somatic complaints, including low back, thoracic and cervical pain, all intermittent, began about one year prior to first visit
- Daily abdominal pain and difficulty eating and digesting food also began around the same time.
- His mother also noted that she sometimes would hear him grinding his teeth.
- Medical workup for the abdominal symptoms, per mom, found no significant findings from this.
- Additional important history includes information provided by Josh's mom. When he was six years old Josh's special needs younger sister died at age 3 due to respiratory complications. Mom also stated (on the phone prior to initial visit and not in Josh's presence) that he had told her that he "stuffs things down inside him." Mom was concerned that the death of his sister was one of the things he stuffs down.
- He had been receiving counseling for the past 6 months on a weekly basis but the frequency of symptoms persisted. Mom made the appointment for Josh specifically for CST as she stated she felt that if he could release whatever he was holding down in his body either his symptoms would improve or at least he would open up more in his counseling sessions.

SYMPTOMS

- Main complaint was pain along the bilateral lower anterior borders of his ribcage and also about 2 inches distal to that on his right side. This would occur at least once daily and usually followed events when he felt, in his words, anxious.
- When the pain was at its worst it was 7/10 and was accompanied by back and neck pain. The latter occurred about half of the time.
- He was very active in sports and his pain usually did not prevent him from participating in games or practices because of it.

EVALUATION- INITIAL VISIT

- POSTURE- left scapula held retracted one inch, right shoulder depressed one inch and head held in a mild forward head posture.
- GAIT- mild limitation in reciprocal trunk rotation
- AROM- normal throughout
- STRENGTH- 5/5 throughout
- CST WHOLE BODY EVALUATION-
 - Craniosacral rhythm had very low amplitude at respiratory diaphragm
 - Palpable tightness at his coronal suture, falx cerebri and occipital cranial base
 - Josh fidgeted a lot during the first session, wiggling his legs and rubbing his hands together. Several times he held his breath, most often when asked a question such as if the pressure felt alright.

TREATMENT- INITIAL VISIT

- Multiple still points
- Traditional diaphragm releases
- Anterior release of falx cerebri via frontal lift
- Occipital cranial base release

RESULTS- INITIAL VISIT

- Subjectively he stated that he felt somewhat relaxed at the end of the session.
- Objectively his shoulders were level and symmetrical and he stopped fidgeting.
- He was given two exercises to do at home: chin tucks and self mandible release. He demonstrated that he could do them and stated he understood that doing them would help his body to remain in a more comfortable position.

FURTHER EVALUATIONS AND TREATMENTS

- When he returned for his second session Josh stated that he slept really well after the first visit and he “felt good, including his stomach.” His shoulders remained level and symmetrical.
- On second visit, all diaphragms were released. A facilitated segment was found at T6-7. While releasing this therapist noted a significant connection to his heart which did not

release. At this point Josh began wiggling and asked to use the bathroom. This was interpreted by therapist to be resistance.

- When he returned to the table, mouth work was done with a significant release of his suprahyoid muscles on the left. His significance detector indicated that he had something to say but was not yet ready to do so.
- At this point it should be noted that Josh's mom was present during his visits, with his approval. She phoned therapist after the second visit and scheduled a session for herself, stating that she was feeling discomfort in her neck and back in the same areas as her son. She had been seen once prior to this by this therapist for CST. During her session she experienced a significant SER regarding her connection to her son and protecting him due to her fear of losing him as she had her daughter. By the end of the session her physical symptoms were gone. She stated that she knew and now felt she was doing all she could for Josh and just needed to "be his momma."
- Josh returned the following day for his third visit. He stated that he felt really relaxed after the second visit but it only lasted one day.
- He revealed that he often felt anxious, especially at school. He said he felt better when this occurred if he talked to his mom or dad, but that he could not do this at school. Most of this session Josh spent in an SER with therapist's hands over his heart and under his left scapula. Mom was instructed to place her hands around his right foot and she kept them there the entire session. Josh was able to talk to what he called his "circle of doom" which was a feeling of dark swirling in the center of his chest when he thought about what would happen if he were gone. He was able to dialogue with it in order to realize that the "circle of doom" was there to cause trouble and he did not want it. When he let it go his mom's hands were there to remind him of the relaxation he felt. He said he could remember this feeling and feel (not just think) what this felt like the next time he started to feel anxious. He also talked about his late sister and how he felt sad that she was gone but also how he felt happy whenever he thought of how she always smiled. He dialogued a bit with his sister and asked her to help him to get rid of the anxiety.

OUTCOME

- **Subjective:**
 - Due to Josh's and mom's busy schedules, his appointments were scheduled by phone after the previous one when they could fit them in. These three visits were done approximately weekly. Mom phoned therapist one and one half weeks after the last one and stated that Josh was doing much better and was talking in his counseling sessions.
 - His digestive issues and physical complaints were essentially resolved.
 - At this point they decided that he would continue with counseling and that the goals set on his first CST visit (improve his symptoms, open up in counseling, balance autonomic tone, and improve posture and function) were achieved. Mom would call to reschedule in the future if they felt it was needed.

- **Objective:**

- Shoulders and scapulae level and symmetrical at end of third visit.
- Gait exhibited increased trunk rotation.
- At the time of this writing it has been five months since the last visit and no follow up has been scheduled.

TOOLS USED

- Arcing
- Still points
- Diaphragm releases
- Frontal lift
- Facilitated segment release
- Mouth work
- SER

LENGTH OF SESSIONS- 60 minutes

NUMBER OF SESSIONS- total of four: 3 for Josh, one for mom

COST OF THERAPY PRIOR TO CST USE- unknown

COST OF CST THERAPY- total of \$300.00: \$225.00 for Josh and \$75.00 for mom.

DISCUSSION

This case history illustrates the connection between a boy having difficulty mourning the loss of his younger sister and his mother's unexpressed fear of losing him, which led to sympathetic overactivity and somatic and visceral symptoms in the son and mother. Her connection to him was evident in that it was after her SER and with her physically holding his foot that he was able to allow his own SER.