Imagine waking up one day to find your face paralyzed. Your cheek droops to one side. Your right eye won’t close. Your tongue and jaw feel numb.

That’s precisely what happened to Tom Kelly, but it wasn’t just any morning. For him it began last year in Las Vegas — on the first day of a nationwide convention.

“I woke up in my hotel room feeling like I slept too hard on my face,” Tom recalls. His muscles felt twisted and his neck felt out of alignment. But while his customers that week believed he had a stroke, a doctor diagnosed it as Bell’s Palsy, a sudden and unexplained paralysis that results in distortions of the face.

“He told me they didn’t really know what Bell’s Palsy was, but he prescribed steroids anyway,” Tom says. “They were terrible. They gave me an upset stomach, nervousness, a terrible sense that my whole body was being attacked.”

When Tom returned to his home in Palm Beach Gardens, Fla., he immediately went to see Dr. Lisa Upledger, a CranioSacral Therapy practitioner and chiropractic physician at The Upledger Institute HealthPlex Clinical Services.

“As soon as she touched my face and started putting opposing forces against the muscles, I realized there couldn’t be a more perfect treatment for Bell’s Palsy,” Tom says. “I probably felt 50 percent better after the first visit, not just physically but also psychologically. It was dramatic.”

After two weeks’ worth of sessions, Tom’s condition was almost completely relieved. And he feels like one of the lucky ones.

“Bell’s Palsy can last months and months,” Tom says, “and some people never lose it. I’ll bet 95 percent of the people with this condition are never told about CranioSacral Therapy, but it’s the first treatment they should look for. Why spend six or seven months with a problem when you can feel better in six or seven hours?”
WHO IS SMARTEST OF THEM ALL?

In 1960, my boss and mentor Stacy F. Howell said to me, “Upledger, I don’t know why we are so worried about the Communists, it’s the viruses that are going to get us.” I was embarking on a three-year research and teaching fellowship in biochemistry. Dr. Howell had a Ph.D. in biochemistry from Cornell University and was a Nobel laureate runner-up in 1937.

The basis for his concern about viruses was the overuse or abuse of antibiotics that had begun during the 1940s and escalated in the 1950s. What do antibiotics have to do with making viruses a more significant problem? In our view - I soon shared his perspective - there existed a natural balance between bacteria and viruses. The viruses needed the bacteria in order to reproduce, and the bacteria kept the viruses under control. When the virus was through with the bacteria, the bacterial cell simply died. Nature, as is usually the case, had set up a system that prevented the bacteria or the viruses from outrunning one another.

Antibiotics kill bacteria but not viruses. Antibiotics were used by farmers to prevent animals from contracting bacterial infections. They were given to almost every patient with a cold or a sore throat, and were freely used to prevent infections in humans and so on. The problem was that we had gone on a “kill the bacteria” campaign that was irrational and out of control. This abuse of antibiotic usage has only begun to slow down a bit in the mid-1990s.

Now, let’s look at this from the viral point of view. The virus uses the bacteria as a host in which the virus can reproduce because it is not equipped to do so on its own. The virus has only DNA (a few have only RNA) enclosed in a membrane. DNA is the molecule that carries biological information. It determines, for example, the color of your eyes and your skin, whether you will have a tail, how smart you will be, what you will like or dislike, and how tall you will be. RNA is usually a messenger that carries the information from the DNA to the cell structures that carry out the DNA plans/orders.

Once in the host cell, viruses that have RNA only (these are called retroviruses) go “nurse” and change the host DNA to suit their purposes. The virus is a

UPCOMING SPECIAL PROGRAMS

Brain & Spinal Cord Dysfunction: Improving Function and Structure
May 5-16; May 19-30; June 9-20; July 14-25; July 28-August 8

Paint: A Search for the Source
June 2-4; December 1-5

Therapist Rejuvenation: Dealing with Burnout
June 23-27; September 1-5

Autism: Initiating Developmental Gains
July 7-11

Learning-Disabled Children: Correcting the Problem
August 11-15

Post-Traumatic Stress: Facilitating Recovery
October 6-17

SHARECARE WORKSHOPS

This one-day workshop explains CranioSacral Therapy in everyday terms and teaches a few simple techniques you can use to help yourself or family members.

June 7 - Milwaukee, Wis.
June 7 - Santa Clara, Calif.
June 14 - Palm Beach Gardens, Fla.
July 16 - Oahu, Hawaii
August 9 - Minneapolis, Minn.

To register or for additional dates, call
(561) 622-4334, Ext. 9358,
or 1-800-233-5880, Ext. 9358.

For more information or to register for special programs, please call
(561) 622-4706, Ext. 9358.
membrane surface full of information molecules and not much else. Since all other living cells have many things in them besides DNA and RNA, it seems reasonable to say that, pound for pound, the viruses are smarter than any other type of living cell.

When we went on our bacteria-killing rampage, our antibiotics killed bacteria by the billions. I am sure that the viruses noticed the shrinking supplies of bacterial cell hosts and, rather than go into extinction, began to adapt to the changing conditions. Soon, we saw that colds and the flu could be more severe when routine antibiotics were used. I suspect that this was because the viruses were forced into invading a greater proportion of human cells. In the past few decades, we have seen an emergence of a much wider array of viral diseases affecting not only humans, but also plants and animals. On the human side, consider not only HIV and AIDS but the prevalence and tenacity of herpes and the rapid-acting, deadly Ebola virus.

Let’s look at how the virus enters the human cell and converts it to its (the virus’) own purposes. The virus enters your body, perhaps through your lungs, skin or mucous membranes. Once in your bloodstream, it travels around until it finds one of your cells that it can fool. Your own cells are walled by membranes that have transmembrane channels in them. These channels select specific protein molecules from your blood and intercellular fluids that can be used as building supplies for that cell. The virus somehow discovers what a given transmembrane channel will accept and it imitates that molecule. When successful, the channel opens and admits the viral molecules into a system of tube transports that take the viral DNA or RNA directly to the host cell nucleus, where the host cell has its own DNA. The viral DNA immediately combines with and makes the necessary modifications in the host DNA to suit the viral purposes.

Once in the host cell with the necessary modifications made, the virus can use this cell to quietly exist for a long time - as long as seven years according to some estimates based on various clinical observations. When the virus decides to activate, the cell produces new viruses, which are released into the patient’s intercellular fluids and the bloodstream. The rate of reproduction is often about 500,000 per minute. Is it any wonder that once the virus goes into action the patient can get very sick, very quickly?

We have precious little that we can do pharmaceutically about these viruses. Vaccines have some use, but the focus is narrow and it seems that the virus can very quickly outwit the vaccine. Witness the variable success of flu vaccines, and the fact that each year the virus changes enough to require a new formulation. It would seem that these viruses are indeed smart critters who are intent upon surviving as a species. Personally, I don’t think that we can outwit the viruses scientifically. Any victories that we achieve using pharmaceutical agents will be short-lived. This whole picture may seem rather depressing. It appears that humans have little if any chance should the viruses decide to take over the world. First, remember that viruses need host cells. If the host cells are ultimately destroyed, the viruses also go into extinction. I think the viruses are too smart for that to happen. Perhaps this is why they convert the host cells and lay dormant so long.

However, my real encouragement comes from the intelligence potential that is inherent in the human immune system.

In the case of our own immune abilities to resist the virus, I believe that the "use it or lose it" rule applies. Our immune systems are quite miraculous in their abilities to improvise and adapt. They can usually learn to resist both bacterial and viral disease-producing organisms. But the immune system is like any other part of our total being. If everything is done for it, as it is in the use of antibiotics, or the choices are made for it, as in the case of vaccines and immune stimulants to very specific diseases, the full potential of the immune system is not achieved. We need to be exposed, in moderation, to a wide variety of antigens. These antigens are the things that stimulate immune responses. The more we rely on external medicines to cure our diseases, the less our own immune systems will be exercised and developed.

Exercise, plenty of rest, only reasonable challenges in terms of stress, healthy habits and good nutrition as well as a happy emotional and spiritual life are all requirements for an effective immune system. Your immune system responds to your requests and to your thoughts. If you think you will get sick, you probably will. If you talk to your own immune system, request its help, express your faith in it and your gratitude for its assistance, that immune system will do its best to perform on a higher and more effective level (if you mean what you say to it).

Yes, viruses are pound for pound extremely smart, but they are also dependent upon duping a host cell. The best protection we can have is an energetic, alert, intelligent and well-exercised immune system.
MEET SANDRA BONTEMPS,
Chiropractic Physician

The first time she experienced CranioSacral Therapy, Dr. Bontemps felt a profound sense of peace. “I was a business executive at the time, but that one session turned my world upside down. I felt like everything in my life started changing and all the signs pointed to this path.”

Dr. Bontemps took the cue and left the business world behind. She studied massage therapy in Pennsylvania and later received her doctor of chiropractic degree from Life College in Marietta, Ga. Her post-graduate work included advanced CranioSacral Therapy training, Visceral Manipulation®, Myofascial Release®, Mechanical Link® and Zero Balancing®. It all led to a full-time position at UI’s HealthPlex Clinical Services in April 1996.

“It’s exciting working in a place like this where people come in at all different stages of healing,” says Dr. Bontemps. “It’s a challenge assessing where each patient is in the process so I can hone in on where to begin. Do I start in a structural way? An emotional way? What is this patient ready for? Listening to the body will tell you what to do every time.”

Dr. Bontemps adds that CranioSacral Therapy and chiropractic blend beautifully in her clinic practice. “I work with the cranio-sacral system by following the body’s cues, making a gentle chiropractic adjustment when necessary to help free the system. The CranioSacral Therapy makes chiropractic much more effective.”

"I enjoy creating the space for the emotional work that goes along with the physical healing."