APRIL EVENTS RAISE AWARENESS AND FUNDS FOR UPLEDGER FOUNDATION

Events surrounding the first Upledger Foundation Nancy Schaffer Memorial Golf Classic, April 5-6, 2002, included a Friday evening silent auction. Here a guest places her bid for one of the many celebrity-autographed photos offered at the



predominantly sports-themed auction. The tournament — "an incredible success!" notes **Upledger Institute** CEO John Matthew Upledger — was held at the PGA National Resort and Golf Club in Palm Beach Gardens. Fla. More than 110 players participated, including numerous sports legends and celebrities.

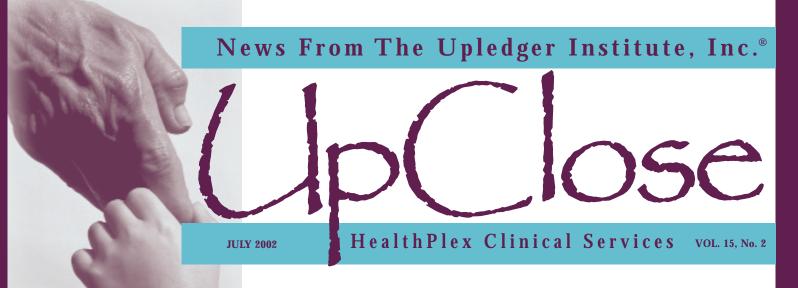
On April 28, 2002, therapists, friends and colleagues from around the world gathered to pay tribute to the life and work of Dr. John E. Upledger. Drs. John and Lisa Upledger are shown here enjoying one of the many moments of laughter and reminiscing experienced over the course of the special evening. The event raised \$30,000 for the charitable, nonprofit Upledger Foundation.



Photos by Heather Stanish



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EFFECTS OF CLEFT PALATE DIMINISH WITH CRANIOSACRAL THERAPY

This photo of a happy, confident

Emma Schaefer was taken within

two months of her first CST

sessions. Prior to that "she would

never smile and would run from

the camera," her mom says.

When Emma Schaefer had surgery at age 6 months to correct a cleft soft palate, it was expected that she would have speech difficulties. Sounds produced using the back of her mouth were especially challenging according to Debra Schaefer, Emma's mom.

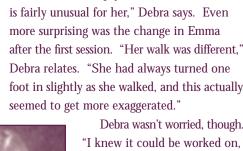
First attempts at therapy with two different

pediatric specialists were less than successful. Increasingly frustrated with her inability to communicate effectively, 2-year-old Emma fluctuated between withdrawn and violent behavior. She was, in Debra's words, "beyond the 'terrible twos.'"

Another two years passed without much change. Then Debra and her husband Larry found out about a CranioSacral Therapy for Pediatrics workshop scheduled for their area.

Demonstration patients were needed, and they felt Emma would benefit. "I already knew of CranioSacral Therapy from personal experience," Debra says. "My massage therapist, Colleen Ford, introduced me to it, and I was hooked after my first session years ago."

When they got to the class, Debra was surprised to find Emma cooperative and comfortable with the whole atmosphere.



"She seemed to enjoy the attention, which

Debra wasn't worried, though "I knew it could be worked on, and it showed me that there had really been a shift during the session." More than anything she was amazed that the therapist, who held a point at the roof of Emma's mouth during most of the demonstration, could affect her daughter's feet to that extent.

After therapists worked on Emma the next day, her leg straightened out completely. "We also noticed that Emma's face and mouth were less

'tight,'" Debra says. "She had more facial movement and was beginning to experiment with sounds without being prompted."

For a year prior to the workshop Emma had been getting regular speech therapy, but she was generally uncooperative and reluctant to try new sounds. "Her attitude seemed to shift after the workshop," Debra says.

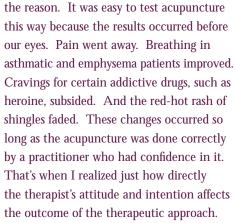
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Intention and Touch AND THE CASE OF SISTER ANNE

One of my first windows into the impact of intention in therapy opened in the late 1960s when I was beginning to use a lot of acupuncture. At the time I was affiliated with free clinics in both Clearwater and St. Petersburg, Florida. Acupuncture was particularly attractive because many of

our patients had been active drug abusers, so the fewer pills we used the better.

Oddly, we found that some of us could do acupuncture with great success while others didn't get the same effects, even on the same patients. Experiments seemed to point to the unspoken attitude of the therapist as



Sister Anne Brooks was one person in my life who demonstrated to me the power of intention on many different levels. I first met her about 30 years ago. She had applied to work as a volunteer at our St. Petersburg free clinic because she wanted to help people in need.

A young man named Butch, our program director, interviewed Sister Anne and suggested — make that insisted — that she see me. She had been struggling for some 20 years with what was diagnosed as rheumatoid arthritis. She was dependent upon a wheelchair and had recently been advised by several of her doctors to have both of her hip joints surgically replaced with artificial ones.

When we met I was touched by her story. She had been the principal in a ghetto school for some years and loved it very much. As her disability and pain worsened she was transferred to a school that serviced mostly upper-middle-class children. Yet she wanted, she needed to put her efforts into

> helping the less fortunate. This is what brought her to our clinic to nearly beg Butch to allow her to volunteer her services.

> During that first visit I began using acupuncture and Cranio-

Sacral Therapy. I also gave her advice on nutrition and vitamins. I couldn't do any traditional osteopathic manipulation, for to touch her body

between the waist and knees to manipulate bone or even deep tissue was to make her scream in pain. I couldn't see how this poor lady was living like this. Her blood tests for rheumatoid arthritis were positive.

John E. Upledger,

DO, OMM

I set up weekly appointments with her. We soon discovered that acupuncture, when appropriately applied, completely relieved her pain. In a few weeks we found that one acupuncture needle inserted in the end of her right middle finger for 15 minutes a day controlled her pain enough so that she could get out of her wheelchair and tolerate more traditional osteopathic work. In my opinion, motion is necessary for health, so we worked very hard to reestablish movement of the bones, joints and other tissues from her head down to her toes. I also believe that as the pain had begun to diminish, the nutritional changes began to take effect.

Sister Anne was almost completely rehabilitated within a year. She went on to work ceaselessly at our clinics, and eventually became our full-time director after obtaining permission from her church authority. After 20 years of suffering, she saw her blood tests for rheumatoid arthritis return to normal.

Sister Anne and the Upledger family

became very good friends. When I moved to Michigan in 1975 to join the faculty at Michigan State University, we stayed in close touch. Her condition continued to improve. She didn't need my "doctor" work anymore.

Within a year she came to visit us. She asked my advice about embarking on a program at the University of Florida that would lead to a degree as a licensed physician's assistant. She wanted to work at the migrant farm labor camps in Florida. My response: Why not a doctor's license instead?

After some discussion about her age, her lack of premedical requirements, and the difficulty in getting through medical school or osteopathic medical school and internship, she went out into the woods behind our house for a few hours. She did what deeply spiritual people do. Then she came back and said, "Okay, let's try it. What do I do next?"

"I once asked Sister/Doctor Anne what she thought the key was to her healing. Without hesitation she replied that it was 80 percent attitude and intention, and 20 percent the mixture of acupuncture, nutrition, CranioSacral Therapy and the rest."

I arranged an interview with the admissions officer of the College of Osteopathic Medicine at Michigan State University. He was so impressed that he asked me what we could do to get Sister Anne to apply there.

After obtaining permission from her mother house to venture into this new direction, Sister Anne completed one year of premedical work in St. Petersburg. Then she moved in with us in Michigan to complete her second year of requirements. Next came acceptance into the Osteopathic College and four years of very hard work.

After graduating with her Doctor of Osteopathic Medicine degree, Sister Anne moved to Detroit for a year-long internship. She eventually settled in Tutwiler, Mississippi, where today she operates a busy clinic along with a tremendous emergency and family medicine practice. (Her story has been profiled on "60 Minutes" and in People magazine.) All this from a woman who, in the mid years of life, was in a wheelchair, in constant pain, and contemplating surgically replacing both her hip joints.

I once asked Sister/Doctor Anne what she thought the key was to her healing. Without hesitation she replied that it was 80 percent attitude and intention, and 20 percent the mixture of acupuncture, nutrition, Cranio-Sacral Therapy and the rest.

When it comes to healthcare, we would all do well to keep mindful of the tremendous power that intention, attitude and expectations play in the therapeutic equation. A gloom-and-doom forecast by a healthcare practitioner may well cause a person to live down to that expectation. Fortunately, the reverse is also true. In Sister Anne's case, we just wouldn't take no for an answer.

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EFFECTS OF CLEFT PALATE DIMINISH WITH CST

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Continued from cover

"She actually looked forward to her speech sessions and made progress more quickly. She also became more open and less guarded around people. We continued to see moments where she would loosen up and have fun."

Emma now goes for regular CranioSacral Therapy sessions. "I take her about every other week for a half-hour session with Colleen," Debra says. "She has periods where her behavior seems to regress, but we remain flexible and let Emma set the pace of her progress."

Perhaps the biggest improvement so far is in Emma's speech. "It has become very clear and she will probably require only maintenance speech therapy next

year," Debra says. "She also seems more coordinated and her walk is good now." Laughing, she adds, "She's been walking around lately imitating the English accent she heard in the Harry Potter movie."

> The latest encouraging change the Schaefers are monitoring involves Emma's teeth. "It's common for cleft children to have dental problems," Debra says, "and Emma has had plenty." An orthodontist diagnosed her with a cross bite and recommended that she be

tion," Debra says. The hope is that the right

side will follow and continued therapy will lessen or possibly eliminate altogether the need for the orthodontic work.

It has been rewarding for the Schaefers to see Emma's progress — both the physical and the social/emotional. "She's becoming a participating member of the family," Debra proudly says. She cites Emma's now close and loving relationship with 7-year-old sister Audra as an example.

"I feel that pediatric CranioSacral Therapy is amazing," Debra says. "Problems that may have lifelong implications can be dealt with in a gentle, noninvasive way. Results can be seen very quickly because the children are so open and have no preconceived expectations. It's hard to explain all the differences this therapy has made in our lives."

Not so for Emma. As far as she's concerned, all we need to know is that she's 5 years old now — "a very important birthday to her," Debra says, smiling — and she can't wait to go to kindergarten next year.

fitted with a device to expand the palate. "Since the CranioSacral Therapy we've noticed that the teeth on the upper left side appear to have moved into the correct posi-