Barral Institute Case Study Visceral Manipulation – EColi Virus By: Elia Hutchins, CMT, MA, CST-D, CVMT

Patient (Age and Gender): 3-months old, Male

Last date of treatment: May 31, 2020 (4-treatments spaced one week apart)

Presenting Symptoms: This baby was born at home with a midwife. He had to be rushed to emergency because his breathing was raspy and labored. He received an epidural and several blood tests to try to determine a diagnosis. They immediately put the baby on antibiotics until they could confirm the results; they were told 'this is standard practice' to protect the babies. It was later determined that the baby had an E-Coli virus that affected his breathing. Since his birth, mom reports that he has been sleeping restlessly and a bit loud; baby sleeps in the same room with mom. Shortly thereafter, he began to vomit after every feeding; (mother states tht he vomits practically his entire meal). In addition, he has hiccup attacks that last for several minutes after every meal. Mother has not been sleeping well and is stressed and worried about her baby.

Evaluation at each session (GL (VM & NM), LL (VM), Vertex Listenting (NM), chosen neural structures (NM), mobility test of nerve (NM):

Session 1: GL – Anterior left lung LL/VM – left fissure, Vertex brain (left) NM – Phrenic nerve

Session 2: GL – Left posterior neck/ LL C5/C6, Vertex suture, NM – R & L brachiel plexus, punctum nervosum, accessory nerve, C1 nerve (R&L)

Session 3: GL –Left below diaphragm LL –stomach, Vertex membrane NM – vagus nerve at lesser curvature and inferior gastric plexus

Session 4: GL –R below diaphragm LL – R kidney, Vertex posterior falx to dura NM – lumbar plexus at L1/L2

Treatment (Findings during evaluation, treatment techniques and procedures used, number of treatments applied:

Summary session 1. Corrected left lung mobility to release restriction at fissure, corrected inspir/expir. Worked with L&R phrenic nerve (bud at left close to xyphoid and stomach) to help pleura and diaphragm. Brain – used lymphatic brain work to balance and increase CSF flow at ventricles. Connected L cerebellum to thalamus. Used VM work from brain to stomach to discharge emotional connection. Child was very restless so session was short but sweet.

Summay session 2. Released the coronal suture (the left was more difficult so worked with ease to release the suture). Released nerve bud at L C5/C6, and C1, L & R brachial plexus, punctum nervosum and accessory nerve at SCM. Restriction released by connecting C6 to left plura between 1st and 2nd rib.

Summary session 3. Released restriction from cricoid to esophagus at C3/C4 level, stomach and liver mobility with correction of inspir/expir, release of vagus nerve bud at lesser curvature and bud at inferior gastic plexus at greater curvature. For the release of the membrane: I followed the twists during the expansion phase of the sagittal suture until there was no deviation; this took 3 times.

Summary session 4. VM released right kidney, also released left kidney and blanced motility, worked with L- lumbar plexus at L1/L2 level, released D2 with stomach and balanced pancrease motility. Tractioning of the dura at the RCPM (to help tension in the dural tube from the epidural) and opening of the jugular foramen to help vagus nerve.

Objective Findings/recommended):

It is hard to determine what caused the E-coli virus and the reason for the restrictions at the lung, esophagus and stomach. This might have caused the cascade of problems leading to the vomitting, hiccups and restless sleep. After correction of the listenings, the baby's body was able heal and obtain better homeostasis.

Outcome/Results: After the first treatment, the baby was "sleeping better but woke up periordically through the night feeling fussy"; "the breathing got more quiet". By working with the phrenic nerve and the vagus nerve, the following treatments corrected the hiccups and vomiting. The mother reported that the baby tends to overeat and will spit up a bit but was still vomiting a bit (but not the entire meal). 3-sessions later, the mother reported that the baby was sleeping through the night with quiet breathing, no hiccups and the vomiting had significantly lessened. 4-sessions later, there has been no more vomiting.

They are moving but will bring the baby back, if needed. Both parents say they feel calmer and are very appreciate of the work. The mother was extremely grateful that she was not so stressed and was able to get better sleep herself.

Discussion:

The combination of Visceral Manipulation, Cranio Sacral Therapy and Neural Therapy work wonderfully together to achieve tramatic results in a short period of time.