Cranial sacral therapy is a gentle hands-on form of energy healing. It’s very subtle and simple, yet it can have profound effects.

A seven-year-old Chihuahua came to my clinic a couple of years leading to the amputation of her right front leg. Over the years following her surgeries, monthly seizures developed along with a short, shallow, slightly labored respiratory rate, and a tense and distended abdomen. Radiographs and abdominal ultrasounds showed nothing unremarkable. Lab tests revealed only a slight decrease in resting cortisol levels and a mildly low thyroid level. Nothing explained this dog’s clinical signs. A variety of alternative approaches was taken, including acupuncture, classical homeopathy, chiropractic and applied kinesiology, but she experienced only minimal and temporary relief.

Then a session of cranial sacral therapy was done by Dr. Laura Taylor, a veterinary osteopath and seasoned veterinary cranial sacral therapist. After completing less than a 60-minute session, 75% of this dog’s symptoms had been relieved. Since the initial seizures have become longer; to date she has not had a seizure in over eight months.

What is cranial sacral therapy?

Cranial sacral therapy (CST) is a form of energy medicine that involves a very gentle and subtle application of hands-on healing. By utilizing the electromagnetic points within the palms of your hands and your fingertips, it is possible to balance the pulse of an animal’s meningeal system (see below) and release constrictions. This therapy allows you to reset the central nervous system and promote auto regulation and self healing.
Many cranial osteopaths have contributed to the development of CST, but it was Dr. John Upledger who discovered the "pulse" of the central nervous system (CNS). During a surgery of the CNS, he was unable to stabilize a section of the spinal cord and palpated a pulse of about ten per minute that was independent of the heart and respiratory rates. It is this pulse that a CST practitioner seeks to detect.

Understanding the cranial sacral system

By understanding the cranial sacral system (CSS), you can better understand the foundation of cranial sacral therapy and get started with the basics.

The CSS is a unique organ system within itself. It consists of the cranium or skull bones, the sacrum (at the base of the spine) and all the membranes and fluids around the brain and spinal cord, including the nerves, vessels and organ systems.

Remember the old game of telephone children used to play with two tin cans connected to each other by a rope? You could talk into your tin can and the person on the other end would hear what was being said. This is the same type of communication that occurs within the body through the meningeal system, from the cranium down the spinal cord to the sacrum. The meningeal system consists of three layers:

- Pia
- Arachnoid membrane
- Dura mater

The pia, the inner layer, is tightly attached to the brain and spinal cord and extends all the way down to the sacrum. It is covered by cerebral spinal fluid secured by the arachnoid layer with the dura mater closely adhered to that. The dura covers the spinal cord and the entire nervous system, has a tensile strength of 1,000 pounds per square inch, and extends out of the transverse vertebral processes. Once it leaves the CNS, it becomes the fascia system, which covers everything and interconnects the entire physical structure.

Aside from carrying waste, nutrients and serving as a lubricant, it is responsible for eliciting its own pulse or rate. Cerebral spinal fluid is produced by the choroid process in the ventricles and is filtered through the brain into the CSS, resulting in an increase in the pressures. In turn, when the CSS (Cranial sacral therapy) sends the cerebral spinal fluid back to the bloodstream, a decrease in pressure occurs. This is where the dura pulse comes from.

Cranial sacral therapy case study

My own first cranial sacral therapy patient was an aggressive ten-year-old female Chihuahua with congestive heart failure. Despite being on traditional cardiac drugs, she was going back into congestive heart failure and her family was told by the cardiologist that there was nothing more the they could do.

With nothing to lose, I started CST at the sacrum and experienced the dog relaxing in her person’s arms. She commented that if she wasn’t there to experience it, she would not have believed it. My hands lightly touched the dorsal surface and I felt a soft gelatinous flow of
energy under my hand, like a glob in a lava lamp moving slowly and continuously under my palm. Each time the dog released by taking a deep breath, I moved my hand up her body towards her head. Not once did she try to bite me. Once I got to her neck, she lost her tolerance for my touch, seemed startled out of her quiet state, and moved away. I then knew she’d had enough CST.

After this single treatment, she went on to live another six months, much to the surprise of the cardiologist.

CST is a safe and non-invasive technique that brings with it many lasting and beneficial results. By partnering it with traditional and other alternative therapies, your dog’s innate healing abilities can be greatly enhanced.

**Getting started**

CST is simple, but it does come with a learning curve and its power shouldn’t be taken lightly. It can be very intense for some dogs and is not always the starting point for all of them. Often, at first, passive touch therapies are more appropriate for very jumpy and nervous dogs, and will allow them to become more grounded before starting CST. It comes down to knowing the needs of your dog and trusting your intuition.

Find a quiet place where you can spend a minimum of 30 minutes uninterrupted. Just be still with the dog, without talking to him. I have found that the sacrum is a pretty good starting point for most dogs.

With the dog lying down, place your hand below and above the sacral area. I choose to place my left hand on the ventral aspect of the inguinal (groin) area coming out between the hind legs, and then put my right hand dorsally. My ventral hand is either flat or cupped. (cupped position) My placement is such that my dorsal hand has the palm over the dog’s tail and matched up to where the rectum would be, with the tail covering it (position one).

I usually give the dog a few minutes to settle into this touch. Once he relaxes, I extend the dorsal hand, straightening out my fingers and trying to lighten my touch to a weight of 5g to 10g, which is about the weight of a nickel in your hand. I visualize placing my hand on the water of a still lake and just try to touch the surface, like a bug walking on the water.

Once I have established this contact, I start to tune into the dura pulse. I maintain this contact and breathe, while trying to think of nothing, only being present and keeping contact with the dog.

Usually within the first ten minutes, most dogs will take a very deep breath/sigh or experience a wide yawn. This is a signal of release to the limbic brain and an indication that the nervous system is resetting itself.
I then move my hands up to the second position, by advancing both my hands up the dog’s body (position two). During CST, you will notice that the dog may lick excessively. This is a sign of progress, but wait for a full release (deep breath or yawn) before advancing your hands. As you experience each release, continue to work your hands up the dog’s body till you have completed the therapy (position three).

During the treatment, just try to work on picking up the pulse and watching for the unwinding effect of little twitches or tremors occurring in various parts of the body. In smaller dogs, the unwinding process is easier and quicker; you may need to take more time with bigger dogs.

Rachel Jones, DVM