Barral Institute Case Study

Visceral Manipulation – Chronic Neck Pain and Headaches

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<u>Therapist</u>: Joanne Enslin de Wet, BSc Physiotherapy (Wits), BSc (Med) (Hons) Sport Science UCT, MSc Exercise Physiology Boston University USA

Patient: 58-year-old female

Reason for coming: Been having Dorsal Scapula pain

<u>Evaluation</u>: The patient was a very successful business woman, owner of a medical aid scheme. The patient was experiencing sharp pain into her dorsal scapula area which was worse at night. eaShe was also experiencing exhaustion which she related to stress at work.

She had a restriction in cervical range of motion on the left side due to tightness and pain in her left upper trapezius area. She had resrictions sternochomdral, strernomanubrial joints 3,4,6. There was also a restriction in diaphragmatic movement

Percardial effusion

General Listening: The patient had an emotional listening.

Manual Thermal Evaluation: Over her left chest area - heart

Local listening: Into pericardium. Recommended the patient go to cardiologist regards the increase in pressure around her pericardium.

Treatment

Treated the hard frame. Did not do visceral work until she had been to visit her cardiolgist/physician

Emotional was listening into the present time. We did emit and release to diffuse the area

Results and Follow-up

Six weeks later the patient on follow-up had been to her physician which had diagnosed her with pericardial effusion due to an autoimmune condition. The patient was given cortisone and other meds. She reported to be feeling less pain in her thoracic area and more relaxed.

She no longer had an emotional listening. Her listening took me to left triangular ligament and diaphragm. We treated the affected structures and crus of diaphragm.

On the third session her symptoms had completely resolved. The treatment was focused on pericardium and superior, inferior vena cava (listening) and she was going to return in 6 months for a follow-up