



The Use of CranioSacral Therapy as a Treatment for Post Traumatic Stress Disorder

The Veterans

Between June 7 and December 17, 1999 The Upledger Foundation (a 501-C3 Corporation) conducted four intensive two week treatment programs for Vietnam veterans all of who were diagnosed by the U.S. Veteran's Administration (V.A.) as suffering from Post Traumatic Stress Disorder (P.T.S.D.). All had been under (V.A.) treatment for at least 10 years. All were on permanent disabilities and were considered incurable by the V.A. None had manifested any improvement in P.T.S.D. related symptoms within the past few years. The majority of these veterans were manifesting progressive deterioration physically, psychoemotionally and spiritually. Suicide was a constant consideration by the majority of them. Clearly the quality of their lives was poor. Each of the four programs treated six veterans for two consecutive weeks. Of the total of 24 veterans entering the programs 22 remained through the entire treatment process. One veteran had to leave early to attend the funeral of a family member who died at the end of the first week. Another left during a manic phase which is discussed below.

The Treatment Program

This is a two week treatment program composed of two five-day segments with a rest weekend positioned between. The treatment day begins at 10 a.m. and continues through at least 5 p.m. daily. The treatment processes on the first and last days of the program are compromised for the administration of the psychological test battery by Richard Zonderman, Ph.D., Psychologist, and for the one on one entry and exit interviews by Barry S. Kaplan, M.D., Psychiatrist.

The veterans were all given lodging at a small, local, oceanside motel by The Upledger Foundation. Transportation to and from the motel was furnished by The Foundation van. Buffet breakfasts and lunches were also furnished at the treatment facility (The Upledger Institute HealthPlex) for veterans and therapists for convenience, to promote camaraderie, conserve on time, and because most of the veterans had very little money.

The treatment day begins with a group discussion which flows freely and typically lasts about an hour. This is followed by a brief group meditation for about 10-15 minutes. Immediately after meditation the hands-on table work is begun. Lunch break is at the convenience of each veteran. There are multiple therapists working with each veteran until at least 5 p.m. The ratio of therapists working on veterans is 3 to 5 to one at all times. At times when the therapists deem it beneficial the hands-on work may be interrupted for one on one talk sessions with one of our psychotherapists, Dr. Kaplan, M.D., Psychiatrist, Dr. Bourne, Ph.D., Psychologist or Lee Nugan, M.A., Psychotherapist.

The treatment process focuses primarily on CranioSacral Therapy and its derivatives, Energy Cyst Release, SomatoEmotional Release and Therapeutic Imagery and Dialogue. The goal is the integration of the body with the mind and the spirit.

In that the therapists represent a wide variety of backgrounds (M.D., D.O., R.N., D.C., P.T., O.T., D.O.M., M.T., and Ph.D.) in addition to their skills as CranioSacral Therapists a very wide range of body work modalities are used as deemed appropriate. The additional modalities most often used are spinal manipulation, myofascial release, acupuncture, acupressure, visceral manipulation and therapeutic massage techniques. On more rare occasions hypnotherapy is also put to use.

CranioSacral Therapy and its progeny, as listed above, seem very effective in the rapid development of rapport and the merging and/or blending of the consciousness of the patients with all of the therapists. All the hands-on work, meetings, meditation and the taking of meals are done in one large room which facilitates group consciousness. This development of consciousness then seems to facilitate the release of traumatic energies that have been retained by cells, tissues, organs, etc. so that these cells and the tissues and organs that they compose can return to health and higher quality function. As relief of physical dysfunctions and foreign energies are released and disorganized energy patterns are assisted in their reorganization. The integration of body, mind and spirit begins and is facilitated by the therapists using any means that seems appropriate.

No drugs are used; nutritional supplements are often offered. Several of these veterans are obviously malnourished and are toxic from prescribed drugs. Many of the veterans begin our treatment program on 10 or more medications for sleep, anxiety, depression, impending psychotic behavior, pain, etc. It is our goal to enable the veterans to either greatly reduce or eliminate completely their dependency upon these prescribed medications.

The Results

Twenty-four veterans began the program. The positive results that were obtained by 22 of the veterans who completed the program were quite astonishing. One veteran left at the end of the first week due to a death in the family. Another veteran left on Thursday morning of the second week. He had stopped all of his medication quite suddenly and went into a manic episode during which he went to Orlando, Florida to be with his wife and son who were visiting there. He said that he wanted to show them how well he was and to demonstrate that he loved them. He did not return in time for the last day interview, craniosacral system evaluation and the psychological test battery.

Of the 22 (out of 24) veterans who entered and completed these two week intensive treatment programs all showed significant improvement in craniosacral system function, reduction of symptoms as attested to during the exit interviews by Dr. Kaplan (see attached summary) and extremely significant improvement on all 13 parameters measured by the psychological tests (see attached statistical analysis and graphic representation of data) at the 95+% of reliability. It is of

special interest that the average pre-treatment score on the "hopelessness" parameter was 11. The average post-treatment score was 3. In general a score over 9 is considered severe with real danger of suicide, the national average is 4.

Integration of body, mind and spirit was universal amongst the veterans as well as the therapists. The level of consciousness blending and love in the treatment room was consistently palpable and extremely healing. These programs offer powerful demonstrations of what can be accomplished for "incurable" and "hopeless" persons suffering from P.T.S.D., as well as excellent educational experiences for participating therapists.

For the Future

This clinical research program clearly demonstrates that CranioSacral Therapy and the other non-pharmaceutical modalities that were used during our four two week intensive treatment programs as described above, offer positive results to severely disabled patients/clients suffering the agonies of P.T.S.D.

Our goals for the future include:

1. The offering of follow-up treatment at a much lower intensity, perhaps an hour treatment weekly or as needed, for the veterans who have gone through the intensive programs.
2. Continuation of two week intensive programs for new veteran patients.
3. A social skills development program for veterans who have lived in relative isolation for many years. We envision this prototype as a live-in facility where needy veterans can live for weeks or a few months after the intensive treatment experience. We envision members of the community coming in for group discussions dealing with socialization issues.
4. Once we have achieved recognition that CranioSacral Therapy et al offers an efficacious treatment approach for P.T.S.D., we will offer it to all persons not only veterans. We see this approach as especially appropriate for child victims of abuse, kidnapping, etc. It is our firm belief that we can offer these children a much higher quality of life by the use of our intensive programs. Our clinical observations thus far suggest that children respond well and require less follow-up.
5. We envision our programs and the facility to be developed as a residential social skills development center as all contributing to the training and development of therapists in order to spread the work across the country and around the world. We offer our facilities and programs as prototypes and training centers for

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therapists so that veterans and other P.T.S.D. sufferers may be treated, salvage their lives and grow.

What Do We Need

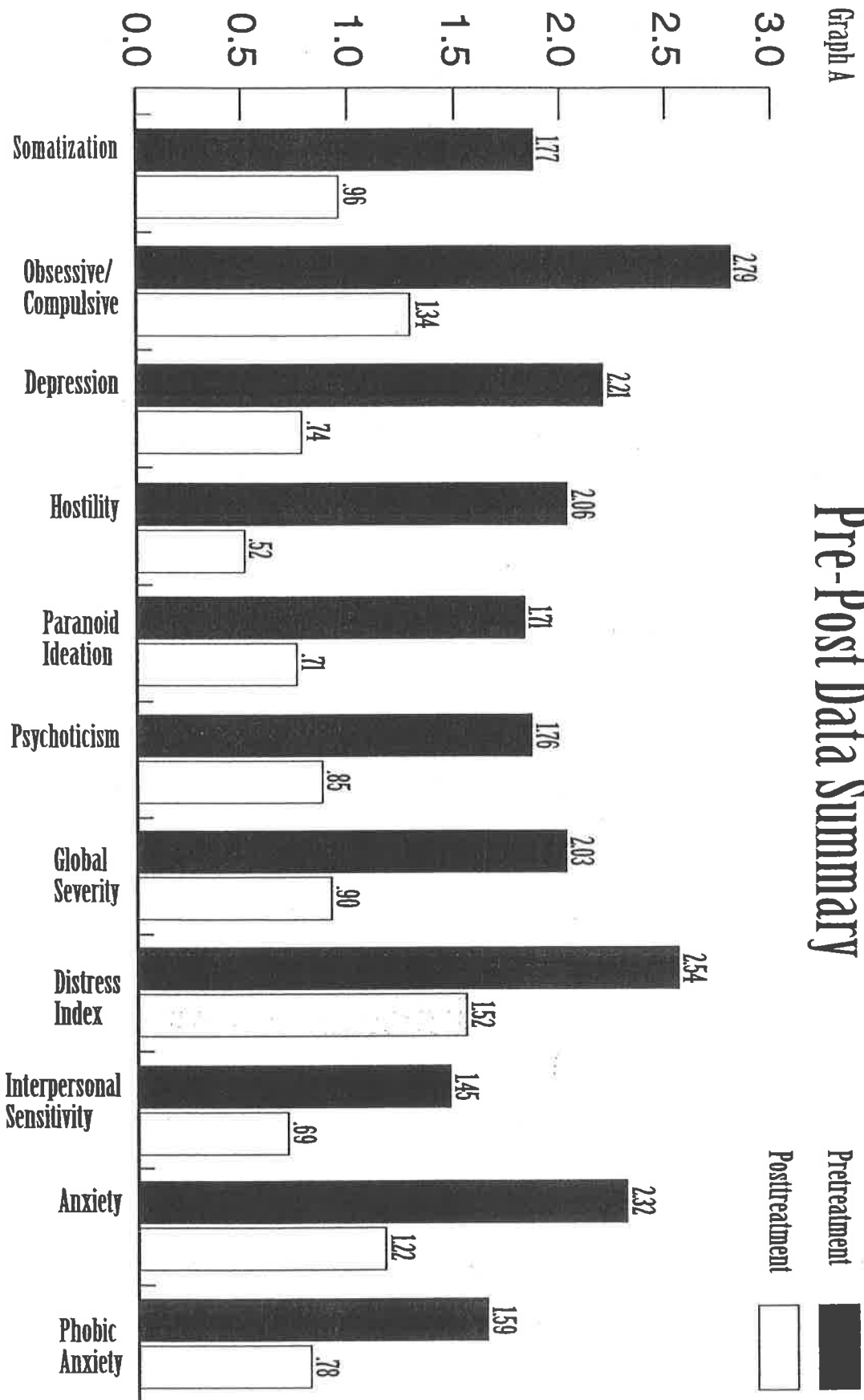
To continue our work with veterans and all other P.T.S.D. sufferers we need financial support as well as help in gaining recognition so that we may be allowed to work with the adults and children who will benefit.

As described above our costs per veteran for the two week intensive program was \$10,000 each. This included all therapy, the facilities, the lodging and the two meals daily for patients and therapists

All things considered, \$240,000 does not seem excessive for the salvaging of 22 of the 24 veterans who were considered incurable by the U.S. V.A.. That amount was probably spent by the V.A. within a year or two for each veteran without the achievement of a satisfactory therapeutic result.

Vietnam Veteran Intensive Program* Pre-Post Data Summary

Graph A



* Program Dates:

June 7-18, Aug. 30-Sept. 10, Oct. 18-29, and Dec. 6-17, 1999

N=22

The Upledger Foundation
 Vietnam Veteran Intensive Program*
 Pre-Post Data Summary

Graph B

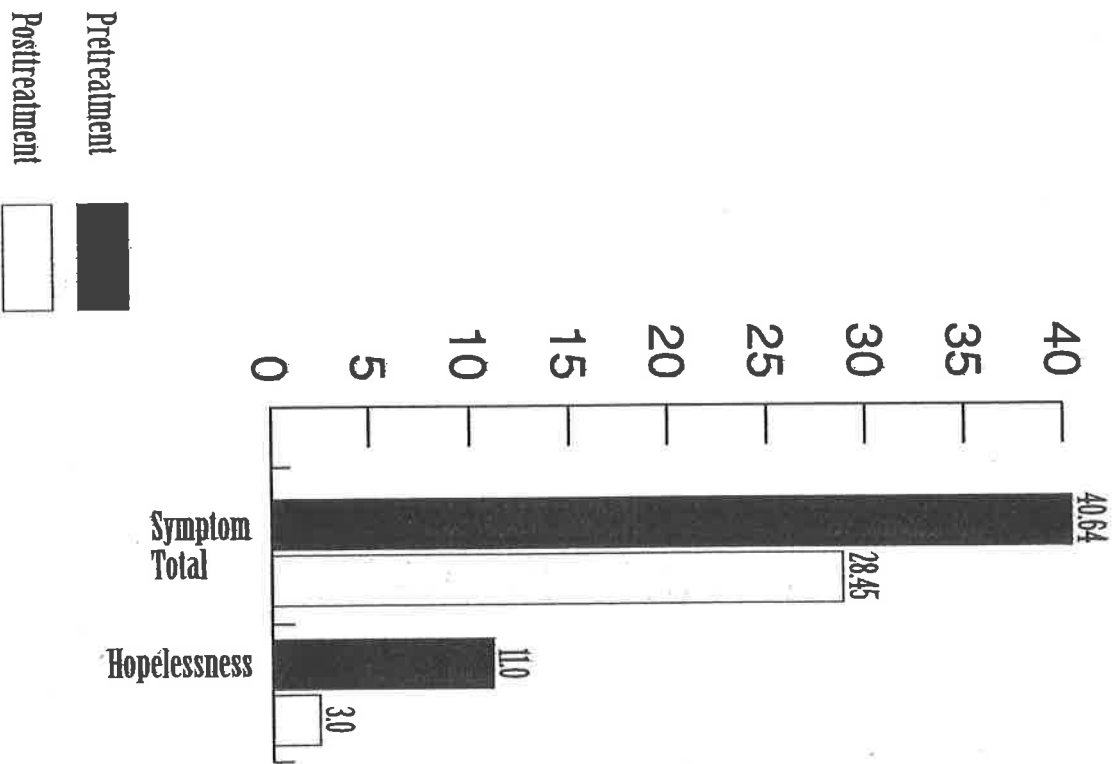


Table A

Test Scale	$p \leq .05$
Somatization	X
Obsessive-Compulsive	X
Depression	X
Hostility	X
Paranoid Ideation	X
Psychoticism	X
Global Severity	X
Symptom Distress	X
Interpersonal Sensitivity	X
Anxiety	X
Phobic Anxiety	X
Symptom Total	X
Hopelessness	X

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