

## **CranioSacral Therapy helps to resolve the causes of ‘Colic’ as well as other development challenges**

Your six week old cries for hours on end. You swaddle him/her. You rock him/her; you try to nurse him/her... Nothing seems to work. You’ve heard about different treatments that apparently relieve the baby’s pain but you’re not quite sure how they work. With the help of Benjamin Bell, Licensed Massage Therapist, we’ll take a closer look at one of these treatments, CranioSacral Therapy (CST) is a gentle hands-on therapy that helps in the relief of pain and dysfunctions associated with the central nervous system.

CST has different branches all of them stemming from Cranial Osteopathy developed by William Sutherland, DO (1873-1954). Osteopathic physician John E. Upledger copyrighted the “CranioSacral” term to market the series of classes that he co-developed based on scientific studies from 1975 to 1983 at Michigan State University, where he served as a clinical researcher and professor of biomechanics. Consequently much of the language and research supporting this article is also gleaned from Cranial Osteopathy.

Many of us have heard of meningitis, the inflammation of the meninges (structures) around the brain and spine, it can be life changing and deadly. The meninges are the CranioSacral system (a fluid-tight sac around the brain and spinal cord). The outside layer is called the Dura Mater. The Dura is attached to the Cranial (head) bones and the Sacral (wedged-shaped at the end of the spine) bones, thus the name CranioSacral System (CSS). Understanding the core function and nature of the CSS, it is easy to see how the release of abnormal tension in these structures affects our health in many ways.

CST is focused on the release of any abnormal tension in the fascia (fabric of the body) of the CSS and of the entire body. The therapist uses the rhythm produced by the production and reabsorption of CSF (cerebrospinal fluid) in the CSS to locate restrictions. Using a very gentle touch (about the weight of a nickel), the therapist assists the body’s self-corrective actions, ultimately freeing the function of the central nervous system.

Benjamin has been working with the babies and children diagnosed with conditions like colic, development delays, severe skull molding, plagiocephaly, torticollis, spasticity (CP), stress, migraine, allergies, vertigo, whiplash, dyslexia, hyperactivity, autism, chronic ear infections and strabismus since 1988. Given that CranioSacral Therapy supports the body’s

release of restrictions and tension patterns, it helps ease the pain and dysfunctions associated with them.

In the case of colic, it is often the irritation of, or unusual pressure on the vagus nerve that causes the painful dysfunction. Other potential contributors; include food sensitivity, an immature digestive tract, nursing mother's diet, etc. The vagus nerve is responsible for the proper function of the stomach, pyloric sphincter, abdominal diaphragm, liver, pancreas, small intestines, spleen, heart, lungs and part of the large intestine. This important cranial nerve is vulnerable where it exits the skull. The angled, beveled joint shape (between the base of the skull and the first vertebrae of the spinal column) makes the joint complex susceptible to jamming or wedging. Strain to these structures may be caused by the baby's position in utero, the length of labor, in utero stress, and the use of forceps or postnatal handling of the child. Whatever the source, joint and soft tissue restrictions cause unusual pressure. This may affect the vagus nerve or its other exit point companions (the jugular vein and other cranial nerves, note page 3), resulting in the child displaying traditional signs of colic (irritability, gas pain, sleepless-ness) as well as weak or tonic suckling, projectile vomiting, headaches which all add to parental distress.

To new parents, Benjamin offers these helpful hints on the handling of your baby. Always provide support to the head and neck when holding an infant. In the event your baby's head flops backwards, help to counteract the potentially disturbing force by gently cradling the baby and gradually stretching and elongating their back and neck muscles as the chin slightly tucks toward the chest. If your child is colicky, you will notice that he/ she will likely arch his/her back when crying. Although this is a reflex action, it can actually worsens the symptoms, further jamming the structures noted above. To help relax the strained nerves, gradually stretch and hold (for 5 to 10 seconds) the child in a fetal curl.

With Benjamin's work, a colicky child may obtain relief through gentle hands-on treatment techniques. These techniques focus on regaining soft tissue motility and restoring normal motion to the CSS. If you're a parent of an infant or child who is struggling Benjamin is happy to lend you two gentle hands. Call (541) 799-6097

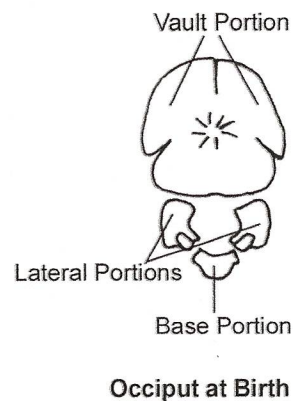
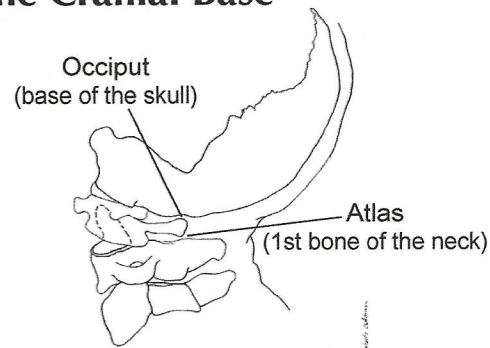
# Colic for Visual Learners

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## Foramen / Canals of the Cranial Base

Shaped like a cup, the OCCIPUT forms the back of the head and base of the skull. At birth the OCCIPUT is comprised of four distinct pieces: the VAULT portion, the BASE portion and the two LATERAL portions. These four portions surround a large hole called the FORAMEN MAGNUM which permits the spinal cord to exit the head.

The Hypoglossal Canal lies between the Lateral portions and the Base portion of the Occiput. The Hypoglossal Canal transmits the Hypoglossal Nerve (CN XII), which makes the tongue move. If one of the Lateral portions has moved too far forward, the Hypoglossal Nerve will be disturbed and your baby may have difficulty sucking and swallowing.



The Jugular Foramen lies behind the ears, where the Occiput meets the Temporal Bones. Several structures pass through this hole:

- The Jugular Vein drains approximately 95% of the blood out of the head.
- The Glossopharyngeal Nerve (CN IX) moves many of the muscles of the throat. A disturbance to this nerve may result in swallowing problems.
- The Spinal Accessory Nerve (CN XI) moves the Trapezius and the Sternocleidomastoid (SCM) Muscle. A disturbance of this nerve may result in a wry neck.
- The Vagus Nerve (CN X) services most of the internal organs: the heart, the lungs, the voice box, the esophagus, the stomach, much of the intestines and even the diaphragm. A disturbance of this nerve may result in vomiting, hyperactive peristalsis, cardiac irregularities, and breathing difficulties.

