n 1985, I suffered a serious knee injury and, after reconstructive surgery, my knee was frozen at 90 degrees. Being a massage therapist, I thought I knew what the most effective treatment for scar tissue was. I thought, as I had been taught, that scar tissue had to be broken down using applied pressure and deep massage to lengthen it. I went into action: I had physiotherapy three times a week and endured both massage and physio techniques the remaining four days of the week. The treatment irritated my injury, which resulted in icing afterwards, and my knee only gained three degrees of flexibility per week.

Unsatisfied with my recovery process, I sought different therapeutic avenues and discovered craniosacral therapy. The therapist worked on my knee with light pressure: so subtle that, by conventional wisdom, it should not have had any effect on the layers of scar tissue. During the therapy, I felt like the therapist’s hands were deep inside my knee, releasing flashes of heat and cold and currents of electricity, unravelling knots of pain. After two one-hour sessions, my knee recovered a degree of flexibility that would have taken 35 hours of massage and physiotherapy to achieve.

The Brain Child

The history of craniosacral therapy goes back to the work of an American osteopath, William G. Sutherland. In the early 1900s, Sutherland took apart a skull and studied the tissue between the bones of the cranium. He concluded that they were soft, not ossified, and that they allowed the bones to move. He theorized that a healthy cranium expands and contracts in response to the rhythmic pressure changes of the cerebrospinal fluid (the fluid that flows around the brain and spinal cord). Based on his theoretical findings, he developed a system of therapeutic techniques, which he called cranial osteopathy.

Fast forward to 1971. John Upledger, an osteopath, assisted a neurosurgeon on a spinal operation. The membrane encasing the spinal cord and cerebrospinal fluid was exposed by the operation, and he could see it moving rhythmically, in and out, at about ten cycles per second. He sought an explanation, but could not find one in any medical book or from his colleagues. Then he discovered the work of Sutherland. In 1975, he joined a team of anatomists, physiologists, biophysicists and bioengineers to research the scientific basis of the craniosacral system. That research at Michigan State University was the pathway that led him to the development of craniosacral therapy.

Rhythm and Blues

The research team successfully described the functioning of the system and discovered how it could evaluate and treat a broad range of health problems. In the same way the rhythm of the heart and the rhythm of the breath are windows into the body’s health, the rhythm of the cerebrospinal fluid imparts a profound knowledge of the body’s state to a trained practitioner. Because the body’s whole nervous system responds to the rhythm of the cerebrospinal fluid, that rhythm can be felt anywhere in the body. To a sensitive practitioner, this pulse conveys an intimate knowledge of restrictions of a physical, emotional or spiritual nature that may be affecting a patient’s well-being. As Dr. Upledger states, “I conceptualize the craniosacral system as the place where mind, body and spirit come together. What does this mean? That by going through the craniosacral system, by using it as a handle, you can learn about and influence these three aspects of human life.”

What makes the craniosacral system an all-embracing “handle” is the way in which its rhythm changes when the therapist gently manipulates the body. The patient may be suffering from the bound-up pain of an injury, systemic imbalance, emotional trauma or neurological dysfunction. When the patient’s thoughts, emotions or body position have “returned to the scene of the crime”—the moment when the emotional or physical trauma was experienced and frozen into the tissues—the body’s innate intelligence stops the craniosacral rhythm. If at this point the patient refuses, consciously or unconsciously, to move into that awareness, the craniosacral rhythm instantly resumes. If the rhythm remains still, this heralds the readiness of the body/spirit/mind to release the bound-up pain.

The Royal Treatment

When the craniosacral rhythm halts, the therapist gently follows the body and begins unwinding and unravelling the constrained pain or dysfunction. If the therapist tries to lead the unwinding, the tissues refuse and resist. Instead, the therapist senses where the body would like to be led, and assists with a light, suggestive touch. If the tissues respond by releasing further on their own, the unwinding proceeds.

The patient senses that they are in control and can stop the process at any point, so anxiety is minimized and the release can follow its unique journey, answering the needs of the body, mind or spirit. The tissues soften and become more elastic. Additionally, there is a restoration of normal fluid circulation, blood flow, electrical transfer and neuromuscular function. The craniosacral rhythm returns, noticeably stronger, and many patients find increased mobility, a clearer mind and a deep, spiritual calm.
A craniosacral therapist can teach self-help techniques for balancing your own craniosacral system. One simple technique, which you may wish to try, involves grasping each ear by placing the index fingers slightly inside each ear canal, and placing the thumbs against them from the outside of the ear. Then pull out and to the back, like the sweeping movement of airplane wings. The pulling is extremely gentle, roughly equal to the weight of a nickel. If you hold this for minute or two, you may experience a release of pressure or discomfort in your head.

Many craniosacral therapists also sell a simple device that enables anyone to achieve a stillpoint. A stillpoint is a therapeutic phenomenon that turns off the body’s stress response, and induces a restful, restorative state. Called the Harris Stillpointer, the device consists of two adjustable spheres designed in density and feel to mimic the touch of a human hand. The device has helped thousands of people relax more deeply, sleep better and provide their body with the conditions it needs to heal itself.

Freedom Sessions
The freedom of movement in a body is a requirement for health. Everyone enjoys and seeks that optimum state. Craniosacral therapy respects that primal urge and has discovered a way to listen to and facilitate it. Of course, there are many ways in which that freedom may be impaired; habitual postural strain, infections or disease, psychological stress, physical blows or falls and birth trauma can all result in restrictions.

In the birthing process, the cranial membranes can be traumatized, and the cranial bones can be held out of alignment. Because a baby’s skull is pliable, the realignment of the plates is achieved quickly and dramatic results have been achieved in working with newborns, infants and young children. Colic, developmental delays, hyperactivity, chronic ear infections, autism and learning disabilities have all responded well to the gentle assistance of craniosacral therapy.

Like myself, most people seek craniosacral therapy when the traditional system doesn’t offer significant relief, and can’t find the source of the problem. Because craniosacral therapy is so effective in normalizing soft tissue and neurological functioning, it has had a profound effect on many conditions including chronic pain, headaches, whiplash, anxiety, head injuries and emotional trauma. Dramatic and lasting results are often achieved in just a few sessions. The rhythm of the cerebrospinal fluid and the gentle work of the therapist lead patients to release their pain and move freely.

Alan McLaughlin and Robert Harris are leaders in craniosacral therapy and are also certified instructors. Since 1987, they have been co-directors of the Cranial Therapy Centre in Toronto, located at 19 Duncan Street, Suite 501, Toronto, M5H 3H2. (416) 971-4445

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Reprinted from Eye For The Future
September 1999, Vol 5 No1