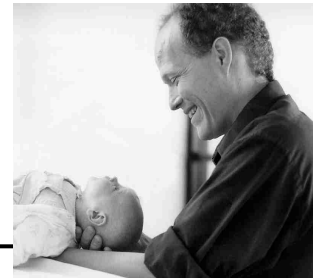


Benjamin Matson-Bell, LMT #3382

CranioSacral Therapist

33476 Bloomberg Road
Eugene, OR 97405
541/744-2882



CranioSacral Therapy for ‘Colic’¹

Your six week old cries for hours on end. You swaddle her. You rock her; you try and nurse 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 Matson-Bell, Licensed Massage Therapist, we’ll take a closer look at one of these treatments, CranioSacral Therapy (CST), a unique and gentle hands–on therapy for the relief of pain and dysfunctions.

CST has its origins in Cranial Osteopathy and Chiropractic medicine. Consequently much of the language and research supporting our discussion/description is also gleaned from them.

Many of us have heard of meningitis (the inflammation of the “meninges” around the brain and spine) and that it can be deadly. The meninges are the CranioSacral system (a fluid-tight sac around the brain and spinal cord). The outside layer of the meninges is called the ‘Dura Mater’ (Latin for “Tough Mother”). The Dura is attached to the Cranial (head) bones and the Sacral (wedge-shaped at the end of the spine) bones, thus the name CranioSacral System (CSS). Understanding the foundational and protective role of the CSS it is easy to see how abnormal tension or lack of movement in these structures can and does affect 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 re-absorption of CSF in the CSS to locate restrictions. Using a very gentle touch, the therapist assists the body’s self-corrective actions, ultimately optimizing the function of the Central Nervous System.

Benjamin has been working with babies and children diagnosed with conditions like colic, development delays, splasticity, stress, migraines, allergies, vertigo, whiplash, dyslexia, hyperactivity, chronic ear infections and strabismus since 1988. Given that CranioSacral Therapy supports the body’s release of restrictions and tension patterns, it can in effect ease the pain or dysfunction associated with them.

In the case of colic, it is often irritation or unusual pressure on the vagus nerve that causes the painful dysfunction. Other potential sources include food sensitivity, an immature digestive tract, nursing mother’s diet, etc. The vagus nerve is responsible for the proper functioning of the stomach, 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 or trauma to this function, may be caused by things like the position and length of labor, in utero stress, actual delivery, use of forceps or post-natal handling of the child. Whatever the source, joint and soft tissue restrictions cause unusual pressure. This may possibly affect the vagus nerve or its other exit point companions (the jugular vein and other cranial nerves), resulting in the child displaying traditional signs of colic (like irritability, gas pain, sleeplessness) as well as things like the weak suckling, projectile vomiting, headaches or PARENTAL distress.

To new parents, Benjamin offers these helpful hints on the handling of your new baby. Always provide support when holding a newborn or infant. In the event your baby’s head flops backward, help to counteract the potential disturbing force by gently cradling the baby and gradually stretching and elongating her back and neck muscles as the chin slightly tucks in. If your child is colicky, you will notice that she will arch her back when crying. Although this is a reflex action, it actually worsens the symptoms, further jamming the whole complex. To help relax the strained nerves, gradually stretch and hold 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 elasticity or pliability and restoring normal motion to the CSS. If you’re a parent of an infant who cries (and cries and cries....), don’t despair. Benjamin may be able to lend you two gentle hands. Call (541)744-2882

¹ Adapted and sourced from an original article in *Today’s Parent* OCT91

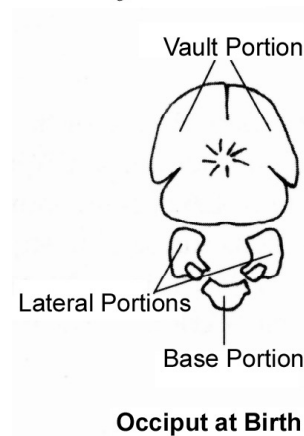
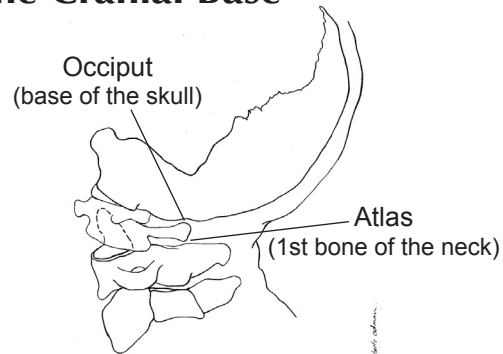
Colic for Visual Learners

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 and wedging.

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.

