

BODY WATCH: The Importance of Dialogue and Myofascial Unwinding in Creating a Safe Place to Heal

By Steve Heinrich, PT
(Special to the Forum)

In our clinic we use "Myofascial Unwinding" (Somato Emotional Release or S.E.R.) with only a small percentage of our overall clients. However, we find it can be an invaluable adjunct to the treatment of a wide variety of musculo-skeletal conditions.

As with any specialized technique, we use Myofascial Unwinding carefully and with preparation to achieve specific results. Unwinding can be used purely to provide physical relief of pain and bodily dysfunction, or to gain insights into the somatic (mind/body) restrictions which are preventing full recovery.

We are finding that tremendous changes occur when the patient is given a safe environment in which to rest or regroup and sometimes, to "let go" for a moment the pressure of the daily schedule.

There is considerable confusion and misinformation surrounding the process of Unwinding or "S.E.R." The Craniosacral System is a semi-closed hydraulic system which is composed of in small part: the bony structures of the cranial vault, the fluid-containing ventricles in the brain, the dural tube and the sacrum—including its ilial articulations.¹

In a naively simple description of the theory which governs Cranio Sacral motions, the Cranio-Sacral system generates a rhythm or "fluid pulse" six to twelve times per minute due to the cyclical production of cerebral spinal fluid.² This "pulse" can be detected quite readily by skilled touch anywhere on the body, but most easily at the sacrum or the base of occiput.³

By following the body's own internal rhythm with careful skilled palpation, the therapist can detect restrictions in the otherwise smooth motion of the patient's body. By gently resisting movement at these "still points,"⁴ soft tissue restrictions can be felt to release with a sensation of melting, and seemingly impossible changes in body tone, posture, affect and bony alignment can occur within moments.

One patient who came to us for treatment of an upper quarter injury, discovered that she had been holding onto her arm pain as a protection against facing emotional issues stemming from growing up in a severely dysfunctional family.

In the process of doing a simple "arm pull" technique,⁵ she went into a spontaneous full body unwinding.⁶ She said later that she had known there were unresolved issues but, "when we did the Unwinding treatment, and my arm quit hurting, it was as if I were seeing my life for the first time. I saw it as a pond with a lot of muck and debris clogging it up. It was as though the treatment gave me the courage to take a big stick and stir everything up, allowing the stones and trash to wash away. Leaving a quiet gentle pond with a clear mountain stream flowing through it."

Most therapists will admit that at times a patient's symptoms bear little significance when balanced against the real issues in their lives. The diagnosis on the prescription may be totally accurate, and the evaluation correct, yet have only a minor relationship to what is really wrong.⁷ When stress and pressure pass an individual's tolerance level, bodily breakdown occurs.⁸

A patient (let's call her Doreen) was referred to our office for thoracic and lumbar pain, with the somewhat ambiguous diagnosis of "Hypermobility," and the request for a "home exercise program" along with symptomatic treatment. Upon entering the treatment room, I was confronted by a young woman in her mid-thirties sitting on the treatment table in a slumped, dejected posture. The expression on her face and the answers to my questions, gave me the distinct impression that she felt she was getting the run around and had no confidence that therapy would help her.

After a thorough evaluation using a framework of questioning, manual therapy and myofascial release as a reference, I concluded that without a significant attitude change and serious internal motivation, my efforts would meet her expectations.

Treatment that day consisted of gentle soft tissue
(Cont'd on next page)

BODY WATCH: The Importance of Dialogue and Myofascial Unwinding in Creating a Safe Place to Heal

(Cont'd from preceding page)

releases to free up the thoracic region and respiratory diaphragm, followed by instruction in posture changes and home exercises to give her more tone and (selective) flexibility. I then gave her some homework, by requesting that she think over several questions, write down her thoughts and report back in one week.

The questions were:

- 1) When you think of Doreen, what image comes to mind?
- 2) When you think of where your life is now, and where you want it to be in the future, how do you feel?
- 3) What would you like to take from therapy that would help you achieve #2?

As she left the clinic I made a mental bet with myself that the task would be too hard and she would not return for her next appointment. Happily, that was not the last time she proved me wrong! She not only followed the program, but had three typed pages in response to my questions! When I next saw her in treatment, I was not even sure it was the same person. There had been a major transformation of body posture and tone— from what I had seen as only a slight change in perception and attitude.

She said, "When you asked me to write down the image of 'Doreen' that came to mind, I saw a baby falcon perched on the edge of its nest, high on a cliff, overlooking a wide mountain valley. I knew the falcon-child was me, and the fear of having to learn to fly was overpowering. I also knew, however that I would die if I did not try."

She went on, "I looked at where my life was and realized that I had lived all of my life with the fear of never meeting anyone's expectations. I was never good enough to deserve love or acceptance. So I was unable to receive love, or give it to others. Not even myself. I just think that I was like a frightened deer running for the tall grass at the first sign of danger."

'Doreen' had been raised by foster parents who physically and emotionally abused her, constant-

ly telling her that she wouldn't amount to anything, and if she didn't behave properly they would take her back to the orphanage. Sometimes they would go so far as to make her pack her bags and go to bed on an empty stomach with the threat: "In the morning, you're going back to the home— you don't deserve to live here, you're absolutely worthless!" Hard medicine for a young child.

Several more treatments followed in which we reinforced the changes occurring in her body with Myofascial Release. In addition, with gentle dialogue and Somato Emotional Release, she became aware of the power symbolized by the baby falcon and that it represented for her the opportunity to develop talents and self worth independent of the old programming left over from childhood.⁹

The third question was somewhat harder for her to answer, but on the fourth visit she told me that what she wanted from therapy besides healing physically was—to let go of the anger she was holding against her foster parents and to forgive them for the way they had treated her. She felt this would allow her to move on in her life.

In treatment, I suggested that she try to tell her parents figuratively how angry she was; to express in a safe, non-threatening environment how she felt.¹⁰ This did not seem effective for her, so I suggested she go home and think about a solution of her own. On the next visit she was all smiles and I could tell she had made another breakthrough.

She said, "I was not able to get rid of my anger at them, and I couldn't let it go until I realized— They didn't deserve to be my parents! They didn't want me and really didn't deserve to be who they claimed to be! Once I figured that out, I was able to see them as ordinary people without their terrible power over me. I was able to let go of them for the first time in my adult life. Forgiveness for two people who had no right to be in my life was much easier than trying to forgive these all powerful warped parent figures."

It was a good lesson for me as a therapist. It is all

(Cont'd on next page)

BODY WATCH: The Importance of Dialogue and Myofascial Unwinding in Creating a Safe Place to Heal

(Cont'd from preceding page)

too easy to supply the answer to our patients from exercise lists to stock responses, all without giving the patient the opportunity or responsibility to think for him/herself. Many times supplied answers will not work, whereas self generated ones often will.

It is my opinion that simple fear on the part of many therapists is the main impediment to more general acceptance of Somato Emotional Release. Fear of the unknown is understandable, even laudable at times, for it prevents many a foolish undertaking. But inaction based on unwillingness to learn, or hesitance to discover one's own hidden pain is somehow tragic.

To quote Kahlil Gibran, ". . . Your pain is the breaking of the shell that encloses your understanding. Even as the stone of the fruit must break, that its heart may stand in the sun, so must you know pain. Much of your pain is self-chosen. It is the bitter potion by which the physician within you heals your sick self."¹¹

It is not at all uncommon for patients to come into our clinic and say that, for the first time in years, they felt listened to, cared about and understood. There is so much we can do to alleviate the mental and physical suffering of our patients. All it takes is the commitment to be real with them, to care about their hurts and to share with them a portion of our own journey—shedding real tears if necessary. It isn't that hard to make a big difference; surely we can take that risk.

George Bernard Shaw is quoted in a recent *Time Magazine* article, "Sick and Tired," as saying—"I do not know a single thoughtful and well informed person who does not feel that the tragedy of illness at present is that it delivers you helplessly into the hands of a profession which you deeply mistrust."¹²

Physical therapy as a profession is at a crossroads, a turning point from which we must not fail. Our challenge is to choose ethics above profit, excellence over mediocrity and wisdom before even the best technique. The issues of the profession can only be satisfactorily faced with courage and a strong determination to make true wellness the goal.

REFERENCES

1. Upledger, J.E., Verdevoogd, J.D., *Craniosacral Therapy*, Illinois, Eastland Press, 1983. pp. 14-21.
2. Upledger, J.E., Verdevoogd, J.D., *Craniosacral Therapy*, Illinois, Eastland Press, 1983. pp. 6, 13, 243, 275-77.
3. Upledger, J.E., Verdevoogd, J.D., *Craniosacral Therapy*, Illinois, Eastland Press, 1983. pp. 30-38.
4. Barnes, John F., Myofascial Release Seminar I & II—Course syllabus. Upledger, J.E., Verdevoogd, J.D., *Craniosacral Therapy*, Illinois, Eastland Press, 1983. pp. 40-41.
5. Manheim, Carol J., Lavett, Diane K., *The Myofascial Release Manual*, New Jersey, Slack, Inc.
6. Upledger, J.E., Verdevoogd, J.D., *Craniosacral Therapy*, Illinois, Eastland Press, 1983. pp. 250-256.
7. Garrder, Kenneth R., Montgomery, Penelope S. *Clinical Biofeedback*, Baltimore, Williams and Wilkins Company, 1977, pp. 21-26.
8. Benson, Herbert, Klipper, Miriam Z., *The Relaxation Response*, New York, William Morrow & Company Inc. pp. 14-19.
9. Missildine, W. Hugh, *Your Inner Child Of The Past*, New York, Pocket Books, 1963. pp. 15-23.
10. Roberts, John, *Healing the Inner Child, Gestalt Therapy Workshop*, 1989- Course Notes.
11. Gibran, Kahlil, *The Prophet*, New York, Grove Press.
12. Gibbs, Nancy, "Sick and Tired;" *Time Magazine*, July 31, 1989. p. 48.

Views expressed in the FORUM are those of individual author(s) and readers indicated and should not be construed to represent the opinions of the publication, its employees, and/or its advertisers. The policy of the FORUM, as a newspaper dedicated to preservation of freedom of the press, is to attempt to present balanced issues of concern to our readers in a fair and accurate manner.
