

Barral Institute Case Study

Visceral/Neural Manipulation - Widespread Chronic Pain

Ben Katz, LMT

Patient Age / Gender

52-year-old Male

Patient Symptoms

Widespread chronic pain s/p Motor vehicle accident, 1973 Laminectomy, 1989 Double bypass surgery, 2002 At intake, managing pain medications (See attachment) History In 1973, the patient fractured L3 in a serious automobile accident. Sixteen years later, he ruptured two lumbar discs, which required a laminectomy. He has endured many different procedures over the years (see attached page for details) and in 2002 had a double by pass open-heart surgery. Presenting Symptoms Since 2003, the patient has had intractable back pain, lower extremity sciatic nerve associated neuropathies, and upper extremity pain, which effectively prevented him from working. Moreover, pain was managed by daily heavy medication. Unable to work effectively since 2007, the patient faced the possibility of undergoing a full spinal fusion as a possible next step in his struggle with pain.

Evaluation / Treatment

My initial assessment and treatment centered around releasing the fascial and vascular tensions relating to the pericardium and heart resulting from the bypass surgery. This tension had created a strong fixation of the spinal regions between T3 to T5. The patient experienced immediate relief from symptoms. Treatment Modalities: Visceral Manipulation and Neural Manipulation The patient returned to my office for treatment once a week for five weeks. The treatments focused on neuromeningeal, peripheral nerve impingements, and visceral restrictions. The second treatment released tensions in the mesenteric root of the small intestine and sigmoid mesentery, which helped increase movement in the lumbar spine. The third and subsequent treatments address tensions in the peripheral nerve pathways of the upper and lower extremities.

Outcome

After five weeks he was discharged and was able to return to many of the activities denied to him by his prior condition. In the subsequent six months he has returned for treatment once due to exacerbation of pain due to strenuous physical activity.