

CRANIO SACRAL THERAPY AS A TREATMENT FOR BREACH PREGNANCY

By Karen Burke, LMT

Karen Burke is a member of the Flagler/Volusia Chapter and works with me at the Spa. I was there the day she took Katie into the therapy room to begin treatments. We were all very excited awaiting the outcome of the Cranio Sacral Treatment. I am happy to report that mother and baby are doing wonderful and he visited the Spa several times already! I am very proud to have Karen as a member of our chapter and we have several other chapter members working at the spa with us. - Carol Mauro, President Flagler/Volusia Chapter

If you ever have the opportunity to visit New Smyrna Beach Florida, I hope you will include The Spa at Riverview in your itinerary before your stay is through. The owner of this "world-class spa in the heart of our little beach town" is Katie Kelsey. I met Katie in 2001 as a Classmate at the Central Florida School of Massage Therapy in Winter Park, and I have worked for her as a LMT since her spa opened in 2003.

On November 13, 2006, Katie was 36 weeks pregnant. Her baby was in the breach position and her doctor informed her that by 38 weeks it would be too late for her baby to turn around. She scheduled a Cranial Sacral Therapy (CST) treatment with me because she had done some research and had found that CST was a recommended treatment for breach pregnancies.

I had never done a treatment for a breach pregnancy before. It was in my second CST course through The Upledger Institute that one of my instructors, Tad Wanveer, reminded me to trust: trust the discipline, trust the body, trust myself. I take that wisdom with me every time I do a treatment.

Katie's treatment began with her lying on a massage table that had been adjusted to make her as comfortable as possible, with no time limit placed on the session. I started by gently placing my hands on the lateral aspects of the cranium to palpate her craniosacral rhythm.

The amplitude, or range of motion, felt constricted. I then used a Cranio Sacral technique called a "still-point induction" which reboots the body's system, facilitating greater homeostasis. This technique also balanced the sympathetic system (fight or flight) and the Parasympathetic system (rest and repair). I gently relaxed my thumbs, giving me a smooth transition from the still-point induction to the dural tube traction release. This alleviated any restriction or tension found from the occiput to the sacrum. Katie's sacral and lumbar areas were slow to release. With my hands still cupped around Katie's occiput, I felt movement turning her head slightly to the right. While following the motion with my hands, I noticed Katie beginning to squirm uncomfortably. Her face became flushed and her head

immediately felt hot in my hands. I asked her if she was alright, and she said she needed a glass of water. After a few minutes she began to feel better and she was ready to continue the treatment.

I placed my hands on Katie's belly and asked her to show me where her baby's head and buttocks were. I let my hands rest on him for a few moments as a way to introduce myself. It felt as though he had no "wiggle room." Katie's muscles needed to relax before her baby could begin to turn around.

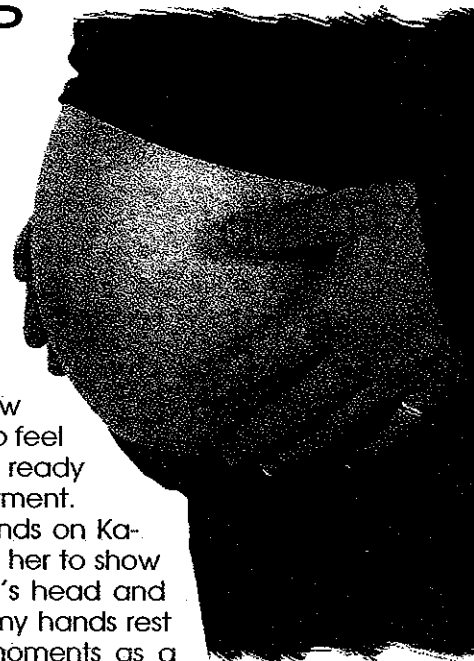
I started with the Lumbosacral Release Through Traction. This decompresses the sacrum inferiorly from L5. At first, her sacrum released in small, jerky movements, then gradually into longer, smoother releases. I used medial Compression of the Anterior Superior Iliac Spines (ASIS) to release both Sacroiliac (SI) joints. I then released the tissue of the Pelvic Diaphragm and the Respiratory Diaphragm. I placed my hands back on Katie's belly. Her muscles felt relaxed enough to begin to try again to move her baby.

With one hand behind her baby's head and shoulders, and the other under his buttocks, I applied a light touch with a slightly forward motion. Katie's tissue eventually allowed me to apply more pressure until it released, gently nudging her baby forward. The tissue release felt similar to holding a piece of salt-water taffy at both ends, with one hand stationary and the other hand gently stretching the taffy until it gives way. This is how her baby seemed to be slowly inching his way counterclockwise to her cervix.

The treatment lasted about two hours. Katie's belly felt rounder and softer when we were through and she said she felt better. The next day her doctor confirmed what we trusted had happened: her baby had made the journey and was in position for delivery.

Katie's original due date of December 6th was pushed back to the 11th. On December 7th, Katie scheduled another Cranio Sacral Therapy Treatment to hopefully induce labor. At this point, there would be no harm done to the baby to try and encourage the process along.

We had 50 minutes for this treatment so I concentrated entirely on her pelvic area. I used the Pelvic Diaphragm Release, hoping that muscular contrac-



Continued on page 41

BOARD BEAT

Continued from page 34

the citation. Wearing a name tag that identifies you as a licensed massage therapist is one way to comply with this rule. However, a name tag that only displays the initials LMT may not get you off the hook. Remember, it may be difficult, or impossible, to prove that you verbally identified yourself as a licensed massage therapist, even though the rule does allow for the verbal notification.

Recently, the Board received a request regarding the legality of installing security cameras in a massage establishment. The Board advised that there is nothing in Chapter 480 prohibiting cameras, and that the requester should refer to the HIPPA laws for further information.

Recently, the Commission for Independent Education underwent a rule change that may have drastic implications for many massage therapy schools in this state. This rule specifies the qualifications of instructors that teach in massage therapy schools. The Board has begun correspondence with the Commission in order to clarify the following 4 specific points of the rule (6E-2.004(7)2, F.A.C.) 1. What will constitute an "education or academic" course? 2. Is it the intent of (7)2.c. to mean that any instructor teaching in a Florida school must hold a license to practice massage therapy for any course offered or just "massage therapy specific" courses (i.e. - hydrotherapy, massage theory, etc.)? 3. If

the intent of the above section is in reference to "massage therapy specific" courses only, can you clarify what courses would be considered massage therapy specific (i.e. - would it include HIV or laws & rules course, etc.)? 4. What is the difference between the following: non-degree diploma programs, occupational associate degree programs and academic associate degree programs?

When the Commission answers these points, I will share their answers with you.

Michael McGillicuddy was awarded the Board Recognition Award. He is only the second therapist in the state to receive this prestigious award.

There were only 13 disciplinary cases, including Informal hearings, Hearings for Determination of Waiver/Default and Settlement Agreements. There were also 9 Voluntary Relinquishments on the agenda.

Stay well, practice safely within the law, and always remember the following 3 quotes:

"Ignorance of the Law is no excuse!" "Education cures ignorance!" "It is your responsibility to know your Laws!"

Disclaimer: This information is not the official transcript or minutes of the Board of Massage Therapy. The official minutes can be found on the Board's website at www.doh.state.fl.us/mqa.

MASSAGE THERAPY AWARENESS WEEK

Continued on page 39

bountiful spread of healthy foods greeted each person as they entered the clinic, along with samples of fruit smoothies and protein bars. Both Kris Murphy & Wendy Russell worked hard to help provide these delicious creations. Dr. Claire Schill hosts this festive occasion to express his gratitude to his patients. He states, "My patients have many choices when it comes to health providers. They place a sacred confidence in my ability to give appropriate health care, and I am pleased to give something back to them. I look forward to this day every year on my anniversary." Katie Haley, LMT and President of the Central Florida Chapter of the FSMTA, donated services for skin care, and many came by to sample her line of natural products called Cosmic Flower. Chrystal Ferguson is the Licensed Massage Therapist on staff at Schill Chiropractic. She donated time for no-charge massages, and there was no problem keeping her occupied all day. Freewill donations were accepted to help deployed soldiers stay in touch with their families this holiday season. Dianna Ashton donated a huge basket of scrap booking materials for a raffle which raised \$540 towards the military phone cards. A grand total of \$2116 dollars was received. Everyone had a wonderful time, including all those who gave time, professional services, and food.

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Continued from page 40

tions might begin and cause her cervix to dilate. I again placed my hands under her baby's buttocks pressing gently in a forward motion waiting for Katie's tissue to release. It only took a few seconds for my hands to be taken deeper into her tissue. I then felt a "Therapeutic Pulse" which signifies that something good is taking place. I kept my hands on Katie's belly until I could no longer feel the pulse. I ended the treatment by holding the heels of her feet in a "still-point induction."

One hour and 45 minutes after Katie's treatment, her water broke. She delivered a beautiful, healthy baby boy on December 9, 2006.

There is no greater gift that I've ever received than to lay my hands on someone in a Cranio Sacral Therapy treatment.