



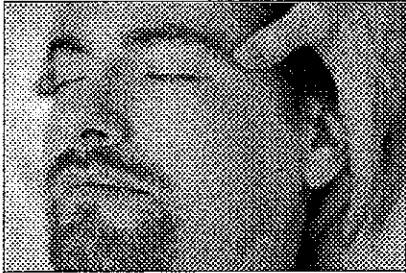
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Craniosacral therapy produces relief and reproach

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WORLD-HERALD STAFF WRITER

Jennifer Moseley's fingers cradle the patient's scalp, poised to massage. But they don't move.



Jennifer Moseley, the owner of Beyond the Body Spa, gives a craniosacral treatment to Guy Rish.

Her fingers gently press on the bones of Guy Rish's head with the weight of a nickel.

This subtle technique, called craniosacral therapy, has produced dramatic results for Rish, a 33-year-old computer consultant, author and teacher. The Omaha man had visited at least seven physicians for excruciating ringing in his ears and dizziness - symptoms that appeared around the time he found a protrusion on his palate.

"Since I started visiting Jennifer, the symptoms have diminished considerably," Rish said. "My life would not be functional today (without the therapy)."

Craniosacral therapy is an increasingly popular treatment for ailments such as headaches and back pain, post-traumatic stress disorder, autism, dyslexia, depression, sinusitis and visual disturbances. But like other treatments in the growing field of alternative medicine, the therapy has its critics.

Craniosacral therapy focuses on the bone, joints, soft tissue and fluids surrounding the brain and spinal cord. Therapists say that blockages in the flow of this fluid can cause disorders and that light-touch therapy can remove blockages and help the body naturally correct the problems.

Today, practitioners range from the massage therapist with a weekend course of training to osteopaths who have completed medical school. Physical therapists also are incorporating the therapy into treatment.

Treatments locally can cost \$60 to \$70 an hour. If used as part of physical therapy, insurance may cover them. But often they are not covered.

Craniosacral studies date to the early 1900s but gained attention in the 1970s with the work of Florida osteopath John Upledger.

While craniosacral therapy is an offshoot of osteopathy, it has been met with criticism by some in conventional medicine. Stephen Barrett, a retired psychiatrist who operates www.quackwatch.com, contends that the theory underlying craniosacral therapy is erroneous.

Local practitioners of craniosacral therapy said that because it is an alternative form of treatment, much of the criticism comes from a lack of understanding.

"A lot of basic science backs it up," said James Murphy, an Omaha osteopath who performs craniosacral work. "It's just a question of if people are willing to look at it. If it doesn't work, it will die. If it works, it will continue to flourish."

John Macy, an Omaha physical therapist who performs craniosacral therapy, said he still hears some people in the medical field refer to it as voodoo. But the practice is more accepted now than when he started practicing it 18 years ago, and it's

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part of the standard physical therapy repertoire, he said.

A medical doctor referred multiple sclerosis patient Judy Pittack to Macy.

"He's been a miracle worker for me," she said. "Over a period of about a year and a half, he got me out of a wheelchair, and I'm walking completely on my own."

For Macy and other physical therapists, craniosacral therapy is used with other forms of therapy. Macy uses it on 60 percent to 70 percent of his current patients - about 20 to 25 people - and only in combination with other exercises, he said.

Craniosacral therapy is a complementary therapy, not a stand-alone profession, said Kathy Woll, curriculum director at the Upledger Institute in Palm Beach Gardens, Fla.

There are 200 people in Nebraska and 400 in Iowa who have taken courses on craniosacral therapy, Woll said. There are more than 70,000 worldwide.

Giuseppe Siracusano, a physical therapist at the Nebraska Medical Center in Omaha, is one of only two advance-trained craniosacral therapists in the state.

As the person at the end of the road for people in severe pain, Siracusano felt compelled to study craniosacral therapy for people who found no relief through conventional medicine. The results, when coupled with other therapy, are not solely in people's relief of pain, he said - they can be measured in ways such as greater flexibility and better posture.

And, he said, while some people use it as a form of stress management, it is not a cure-all for everybody or a procedure that works without the patient's effort.

"Rarely does a person only need that," he said. "It's really a very important tool, but it's not the beginning, and it's not the end."

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