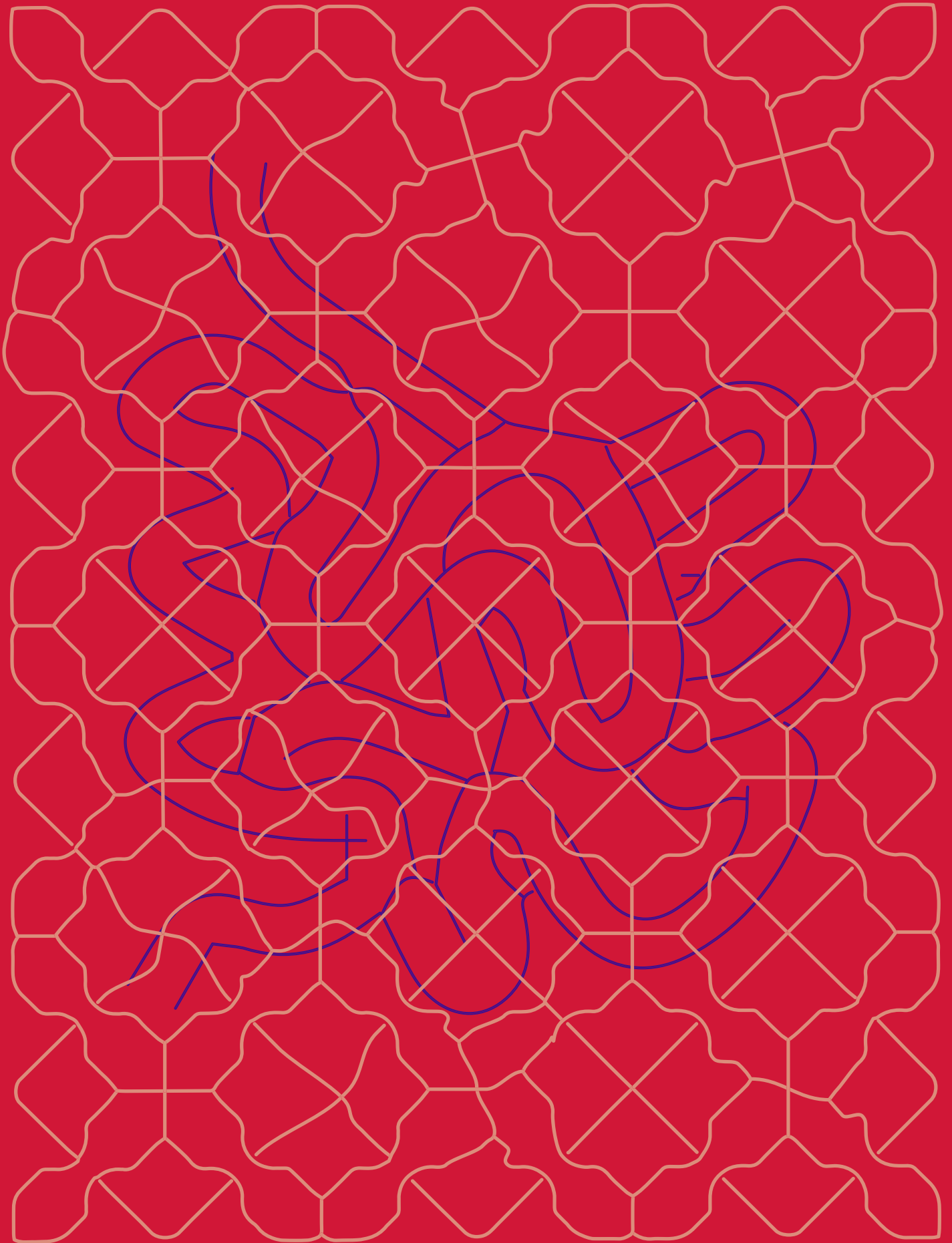


A VISCERAL PERSPECTIVE



ALISON HARVEY

FOREWORD BY STEPHANIE FOWLER

“While I was training to become a Craniosacral therapist, I stumbled across the visceral modality of work developed by the French osteopath and physical therapist Jean-Pierre Barral. The training turned out to be hugely helpful in many ways, as it fed into and built on my CST practice. The anatomical precision was challenging but ultimately rewarding. It gave clarity to my palpation, and a depth to my understanding of the organs, their functioning and many connections. I found the hands-on approach of Barral’s teaching and his message to trust the hands – that the hand is always right – helped me to develop confidence in myself as a practitioner. By trusting my hands first, and then bringing my mind and understanding in afterwards, I became more effective and intuitive.”

In this introduction to Barral’s work Alison Harvey, a CST instructor with the Upledger Institute, who also runs the UK branch of the Barral Institute, shares some of her insights into the therapy and how it can integrate with CST.”

STEPHANIE FOWLER (FULCRUM EDITOR)

About 17 years ago I came across the idea of visceral work and the potential benefits it could offer. I already had a little experience from my chiropractic training, which taught me some techniques for working with hiatus hernias and the kidneys, and I was always amazed by their results. But hearing of a training that might widen my repertoire of skills to include all internal organs, and indeed ultimately the blood vessels, brain and nerves, fascinated me. So I headed off and took the first class in the Visceral Manipulation (VM) curriculum, as taught by the Barral Institute.

The concept was fitting for me but also required a bit of a rethink. Due to my initial chiropractic training, my focus tended to be on structural pain. Barral’s approach was suggesting that the cause of many seemingly musculoskeletal problems was actually soft tissue, visceral or neurovascular in origin. However, as I had already trained in CST through the Upledger Institute and had integrated it into my chiropractic practice, the idea that other systems could influence the musculoskeletal aspects of the body wasn’t completely new.

I subsequently followed the whole of the VM programme as well as the additional programmes Barral has developed for working specifically with the nerves, joints and vascular systems. Barral is still developing his work to include more and more aspects of the body. He is very much holistic in approach and believes you have to be able to address any aspect of the body, dependent on the patient’s needs. I now also subscribe to the idea that soft tissue weakness or tension can sometimes lead to structural problems – and I have found the

work especially helpful, for example, for women with hysterectomies who have recurrent lower back pain, or for asthmatics with recurrent thoracic and cervical dysfunction. Other more obvious examples include digestive dysfunction, menstrual difficulties or breathing problems.

When I consider CST in relation to VM, I think both have their strengths. While CST has more of a focus on the fascia and in balancing the fluid dynamics of this system, VM focuses specifically on the organs, nerves and blood vessels, releasing them and the fascia surrounding them, and then balancing the intrinsic motion of these structures. For me, VM has also helped bring specificity to some of my CST techniques, through being able to feel the anatomy with more clarity.

How did Visceral Manipulation develop?

Methods such as VM have been part of the medicinal cultures in Europe and Asia since pre-recorded times. Indeed, manual manipulation of the internal organs has long been a component of some therapeutic systems in Oriental medicine. So it’s no surprise that practitioners in many parts of the world have incorporated techniques designed to work with the internal organs and their functions.

Jean-Pierre Barral first became interested in biomechanics while working in the Lung Disease Hospital in Grenoble, France. That’s where he met Dr. Arnaud, a recognised specialist in lung diseases and a master of cadaver dissection. Working with Dr. Arnaud, Barral followed patterns of stress in the tissues of cadavers and studied biomechanics in living subjects. This introduced him to the

visceral system, its potential to promote lines of tension within the body, and the notion that tissues have memory. All this was fundamental to the development of his work.

With the help of Dr. Serge Cohen, a Grenoble radiologist, Barral also documented changes in the viscera before and after manipulation. They employed x-ray fluoroscopy and ultrasound to record changes in position and motion, as well as fluid exchange and evacuation. Later they conducted additional research with a team of electrical engineers and technicians using infrared emissions from the body. In addition, Jean-Pierre Barral teamed up with Alain Crobier, another French osteopath, and they expanded the ideas to work on the nervous system.

Barral has taught VM all over the world. Through his travels to teach he began working with various other innovators, including Dr. John Upledger and Bruno Chickly, who developed Lymph Drainage Therapy. When I asked Barral why he does not include the lymph or craniosacral system as part of his training, given that he has a holistic approach, his reply was that he always wants to develop something new rather than redoing what is already taught by others. For this reason, although he does not specifically comment on the craniosacral system, he does actually include it as part of the holistic approach to the body. In this way, with their shared fascial approach, both therapies can work very well together.

What is Visceral Manipulation?

At optimal health the relationship between the internal organs (viscera) and other structures of the body (muscles, membranes, fascia and bones) remains stable despite the body's endless varieties of motion. But when an organ can't move in harmony with its surrounding structures due to abnormal tone, adhesions or displacement, it may have an adverse effect throughout the body. This disharmony creates fixed, abnormal points of tension that the body is forced to move around. That chronic irritation, in turn, paves the way for disease and dysfunction.

VM is designed to encourage the natural healing of the body to improve the functioning of organs,

dissipate the negative effects of stress or held emotional patterns, enhance mobility of the musculoskeletal system through the connective tissue attachments, and influence general metabolism.

VM works on all aspects of health, believing that good tissue function allows for good chemical functioning, which enables the tissues to take in an optimal nutrient supply and effectively release waste products.

Likewise, emotional wellbeing has both an effect on and is affected by tissue function. Jean-Pierre Barral proposes that if the brain becomes overloaded through either a severe or long-lasting emotional issue, then the body copes by passing the holding of that issue over to an appropriate organ. Through his many years of experience, he has been able to chart the type of emotion that tends to relate to each organ, for example, everyday stresses might affect the gallbladder while grief impacts the spleen and pancreas.

By working with the tissues of the relevant organs in conjunction with the brain, a person can process these emotional issues at a time when they have space in their lives to do so. If left unprocessed in the longer term, Barral suggests that the emotional issues may restrict the organ tissues, which is palpable to an experienced practitioner. Conversely, if an organ is compromised functionally, it will have less capacity to hold emotional overflow from the brain and so make it harder for the person to cope emotionally.

How is Visceral Manipulation performed?

Although the title "Visceral Manipulation" often conjures up an image of a treatment that is forceful in some way, this could not be further from the truth. The title is a little misleading in English, as it is translated from the French title given by Barral. In French, 'to manipulate' means only 'to do with the hands' but with the term 'manipulation' in the chiropractic and osteopathic world meaning a 'manual high velocity thrust', the other much more gentle meaning of the word is often forgotten.

The therapy works through the body's visceral system to locate and alleviate abnormal points of tension throughout the whole body. With specific placement of soft manual forces, it encourages the normal mobility, tone and motion of the viscera and their connective tissues. VM practitioners use the rhythmic motions of the visceral system to evaluate how abnormal forces interplay, overlap and affect the normal body forces at work. These gentle manipulations can potentially improve the functioning of individual organs, the systems the organs function within, and the structural integrity of the entire body.

Due to the delicate and often highly reactive nature of the visceral tissues, a gentle force precisely directed is the most effective as it reduces resistance from the tissues. As with other therapies that affect the body deeply, VM works only to assist the forces already at work.

The Work in Practice: a Case Study

In order to illustrate the therapy in practice, I'm including this example of a 26-year-old lady who attended my clinic complaining of low back pain and general tiredness. During the case history, she described her back pain of being of two types. In general, she suffered from upper lumbar ache but, during her menstrual cycle, she experienced a more intense lower lumbar pain, which was her main reason for coming to see me.

My assessment showed that she had some reduced lumbar spine motion, especially left rotation and extension. My palpatory assessment showed a tension affecting her left kidney, uterus and left ovary. On further questioning, she revealed that she suffered menstrual pain that usually meant she had to take a day off work and take pain-killers. It also triggered constipation and bloating around the time of her cycle.

From my VM training, I understood that there can be a relation between the left kidney and reproductive system due to the left ovarian vein feeding into the left renal vein. In her case, the left kidney was restricted and unable to move as it usually would in response to the changing pressure of the diaphragm during breathing. This meant that the whole area, including the fascia and blood

vessels, was not receiving normal stimulation and was congested. Her left ovary also felt restricted and her uterus was both pulled and twisted over to the left side. These restrictions were also causing tension in the sigmoid mesocolon and hence affecting the bowel.

As my assessments highlighted the kidney of being of greatest concern, I started by releasing the tensions here, which led to an improvement in the movement of the ovary. The tension in the uterus remained, but to a lesser extent. In the next session, the client reported an improvement in her general back ache, but her period still brought on pain and bloating, although it required less pain-killers than before.

The next session was spent releasing uterine tensions, which involved working with the supporting ligaments of the uterus and the peritoneum. In addition, it became evident through assessment that there was an emotional component to her pain, which connected to earlier family issues in her life. During her teens, her parents had separated leading to a very uncertain time of where she would live, and whether she should move out on her own. Given that the reproductive organs relate to a need for "protection and shelter" it made sense to me how this emotional component could be tied into her pattern of restriction.

I treated her a further three times at monthly intervals, over which her period pain resolved fully, she had much improved bowel function and the only lower back pain she suffered was a mild ache in her lower lumbar region when her cycle was due. She also mentioned that she felt more confident and settled in herself. 🌸

The Barral Institute Programme structure is modular and is taught in three or four day blocks – the VM programme having six levels with some additional classes that can be added on depending on specific interests.

The first level of the visceral programme, which will be Visceral Manipulation 1 (abdominal organs and visceral diagnostic techniques), runs at various times throughout the year. For further information the Barral Institute UK website is www.barralinstitute.co.uk or call 01292 266335.