

# Upledger Institute Case Study

## CranioSacral Therapy – Acute Pain and PTSD

### By Amanda Del Castillo LMT, CPT, CST-D

**Personal Information:** 70-year-old male triple amputee

#### History

**Presenting Symptoms:** Constant excruciating phantom nerve pain in left arm, both leg stumps. Feels like the left hand clenching and not able to let go. Reticular Activation System at a 10 on a scale from 1-10 1 being relaxed, 10 being very hypersensitive and active in fight, flight and freeze. Difficulty relaxing and “catching breath”.

**Pertinent Medical History:** In Vietnam 1966-1971 and diagnosed with PTSD, however the amputations were caused by a open heart surgery in 1999 where he was given heparin after the surgery to thin the blood. He had a reaction to the medication and had the opposite affect happen, his blood clotted as a result to the heparin. When the Doctor’s realized that he was having an adverse reaction gangrene already started to occur in the left arm and both legs. He was rushed to surgery where he almost passed away, the surgical nurse told him that she had to manually remove the clots from the wounds in surgery. In this circumstance the surgeon was not able to cauterize the nerves at the stump locations. He now has constant pain and is taking opioids to make it through the days. He goes off the opioids once a month for a week to make sure he does not become addicted.

**Evaluation:** Compression of L5/S1, OCB, SBJ. Facilitated segments at T-1, T-2, T-11, T-12 and L-1. Decreased mobilization in cranial bones. Left torsion of the sphenoid and Left torsion in sacrum and lower spine. Multiple neuromuscular restrictions and energy cysts especially in the thoracic diaphragm and pericardium. Multiple scars at surgical incisions.

**Treatment and Objective Results:** In the first session, I treated the scars and nerve pathways from sacrum to leg stumps with direction of energy. I decompressed the OCB, SBJ, and L-5, and worked with the facilitated segments in T-1/T-2, T-11, T-12 and L-1 dialoguing with hope to lower the Reticular Activation System from a 10 to what he expressed lower to a 7-8. I also treated the Left torsion in the sacrum and SBJ. After treatment he noticed his pain level significantly decreased and he made another appointment for the next week. When he arrived at his second appointment, he expressed that he was extremely happy with the last treatment because the results were that he was out of pain for 11 hours and was able to get a good night sleep. This was the only time he was out of pain without medication since the surgery. He reported that he felt more pain in his right leg stump than anywhere. During the second treatment he fell asleep almost immediately. I treated energy cysts in the stumps, decompressed the lumbar spine and noticed he presented a left lateral strain of the sphenoid and sacrum. I treated what I found with CranioSacral techniques and worked with the facilitated segments. I also treated the thoracic diaphragm and the pericardium energy cyst. He again was extremely happy at the end of the treatment because his pain subsided. He made another appointment for the next week. When he arrived at the 3<sup>rd</sup> appointment he reported that again he was out of pain all day and night till the next day when he awoke the pain was back. This treatment he had a very hard time relaxing and I worked with the Reticular Activation System and found an energy cyst in his temporals and mandible joint. Worked with the Avenue of Expression and the left arm stump. He felt like his left hand was clenching. We worked with the ascending-descending pathways and the dorsal nerve ganglia and its

connection to the cortex. He was able to “relax the clenching feeling” in his left stump. Again after treatment he reported no pain. He then heard from the VA that he was accepted into a program designed to help Veterans with PTSD and the amputations.

**Subjective Results:** Client is shifting into a more “normal” life possibly without the pain and discomfort. He reports that he is very thankful to have any time without pain even if it is only a few hours at a time. He is willing to work with the tools he has learned from our sessions. He will continue to work with the tools as he enters the VA program.

**Analysis:** For me, I was so grateful that he was able to learn some tools to help him improve the quality of his life and move forward with some sense of control over his pain.

**Sessions:** 3 one hour sessions