

Barral Institute Case Study
Visceral Manipulation – Acoustic Neuroma/loss of hearing

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Therapist: Joanne Enslin de Wet, BSc Physiotherapy (Wits) , BSc (Med) (Hons) Sport Science UCT, MSc Exercise Physiology Boston University USA

Patient: 47-year-old Occupational Therapist

Reason for coming: Acoustic neuroma right ear. Surgery 2010 and 2014. “It keeps coming back” Patient experiences acute pain right anterior cervical area, right zygoma,, acute pain in her maxilla , dry eyes , can’t close her right eye, asymmetrical muscle tone on her right, right side can’t hear, right TMJ pain, tiredness, nausea, can’t sleep at night, tinnitus right ear, poor balance with sudden movement.

Evaluation:

General Listening: Right chest above diaphragm

Local Listening: Right bronchi, right jugular vein/omohyoid, emissary veins mastoid area, fascial nerve, infra orbital fissure.

Treatment:

The treatment started with right bronchi medial wall, there was then an attraction into the mediastinum so I included the mediastinum and did a double induction. A listening also attracted me to the pleura on the right lung, and again the treatment was a double induction with the right bronchi , right pleura, and bronchial arteries.

After this I treated omohyoid, and emissary veins. There was a vast improvement in the intercranial membrane system. Included in the treatment were several techniques for the cranial nerves V, VIII,,VIII X, tentorium cerebelli, viscerocranium

Results and Follow-up

At the follow up appointment the pain in her TMJ had gone, there was decreased pain in her occipital area, the eye could close easier, there was still dryness in her right eye. She no longer experienced nausea

General Listening at the follow-up was significant for right kidney second degree ptosis, as well as Fascial and Mandibular nerve restriction.

The patient has had 3 sessions of treatment and is managing her pain much better. I have recommended she return in 3 months for a reevaluation. She has also been given a set of fascial exercises, and has been taught some skin rolling on the areas of the face to release tension in the fascial and trigeminal nerves.