

INTEGRATION OF CRANIAL/STRUCTURAL AND SOFT TISSUE

By Don McCann, MA, LMT, LMHC, CSETT

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Massage therapists around the world have taken to cranial work and have seen the vision of helping to facilitate homeostasis for their clients. Since massage therapists address musculoskeletal pain it is only natural that new adaptations of cranial work have arisen and that rehabilitation from musculoskeletal pain has become a focus.

Cranial/Structural therapy is a cranial therapy that seeks not only a restriction-free cranial rhythm, but also the elimination of soft tissue restrictions in the cranium that can create structural distortions throughout the entire structure. This therapy not only releases restrictions within the normal cranial motion (which can be hydraulic or energetic or mechanical), but it also addresses additional soft tissue restrictions that hold the structural balance or imbalance of the body. Cranial sutures like any joint in the body are limited in range of motion by soft tissue restrictions in the reciprocal tension membrane, the tentorium, the dura, or the fascia/musculature. Therefore, Cranial/Structural therapy includes soft tissue releases to achieve long lasting release of restrictions around the cranial sutures that will produce long lasting structural rehabilitation from musculoskeletal pain.

The chief cranial distortion that we all have is the core distortion that directly affects the cranial motion and the SBS (Sphenobasilar Synchronosis). Put simply, the soft tissue around the cranium connected to all the cranial bones, specifically the sphenoid and the occiput and their interrelationship with the other vault bones, has restrictions in the soft tissue that cause an imbalance in the cranial motion. This cranial imbalance is reflected in the pelvis with one ilium rotating anteriorly, the other posteriorly, and the sacrum tipping from the lack of support of the anteriorly rotated ilium. This creates not only a long and short leg, but also a tipped unlevel sacrum at the base of the spine which results in exaggerated curvatures, some as severe as scoliosis. Imagine the excitement when it was discovered that the distortion in the cranium was the same distortion found in the pelvis, and that when the distortion in the cranium was released and balanced the rotation of the iliums was significantly brought into balance creating a weight bearing support for the sacrum and an immediate lessening of the distortion on the entire structure. Especially exciting was the reduced curvature of the spine and the leg lengths becoming equal. Thank you for getting through this paragraph because this information can open a world of new possibilities for relieving your client's painful musculoskeletal symptoms.

One of the big challenges in treating clients with severe musculoskeletal issues such as disc conditions, migraine headaches, degenerating joints etc., has been trying to create long term structural support to maintain the improvements that move the body into balance to facilitate maximum healing and pain free function. This is even more important with the advent of stem cell injections as the structural imbalance would just damage the new tissue if left in the same imbalance, and results would be minimal. This is also the case with prolotherapy and bone tissue replacement. The good news is when the core distortion in the cranium is released and balanced, this new balance brings the pelvis into weight bearing support allowing the above mentioned therapies to be more effective. Even more important is that the need for those therapies is often eliminated. However, it is also necessary to integrate myofascial soft tissue releases for the rest of the body. This is especially true in the areas where the imbalance has created pain and degeneration. Let us look at what this integration can do.

When the core distortion is released from the soft tissue of the cranium, the pelvis returns to weight bearing support with the dramatic reduction of the degree of rotation of the iliums and leveling the of the sacrum. This starts an immediate process of the soft tissue unwinding out of its previous holding patterns throughout the body. This often results in a quick reduction of painful symptoms, and prepares the body for more extensive myofascial therapy to release and balance the other soft tissue throughout the body. Prior to having the core distortion released the client's body had literally grown into the distorted pattern and much of the soft tissue is limited in the degree that it can unwind.

If a client had come for a session with back pain and a bulging disc, the unwinding from the Cranial/Structural Core Distortion Releases would have taken some of the pressure off the disc as the spine straightened, but the client would probably still be in pain due to the compensation in soft tissue around the area. If the curvature of the spine had so much pressure that it caused a bulging disc, then the soft tissue would have significant inflammation, fibering, shortening, and splinting that could not unwind without specific hands-on soft tissue therapy. This would also be true not only in the area of the spine but around any joint in the body where pain and degeneration were a problem. This is a pain site-specific observation. However, if long term rehabilitation from pain is your goal then you need to look throughout the entire structure of the body, not just at the specific site of the pain. Releasing the core distortion from the cranium affects the pelvis and reduces the long leg / short leg discrepancy, but any distortion in any part of the body can have an effect on the site of the major collapse and pain. Therefore, to fully rehabilitate the body so that it can maintain the improvements it is necessary to treat the entire structure of the body which has also been in core distortion for the lifetime of the client to achieve a balance that will support the area that had been in pain. If this is not done, the areas with the greatest imbalance will still be creating problems and painful symptoms in the client's body. In other words, the area that was most damaged will not be supported by the rest of the body, but will be still stressed by lack of support from other imbalanced areas of the body. A simple way of looking at this is any imbalance in the body affects the whole, and a weakened area will be most affected.

Thus, for maximum rehabilitation the concept of integrating the Cranial/Structural Core Distortion Releases with soft tissue myofascial techniques to treat the tissues that had the most structural and direct effect on the area of pain is most effective. Initially, spending extra time on these areas and not trying to treat the whole body in the early sessions directly addresses and relieves the client's pain for which the client is grateful. Once this is achieved it is then necessary to release the soft tissue throughout the rest of the body to support the increased balance in the area that was the original presenting pain. For the client who had a bulging lumbar disc, after the cranial distortion was released with Cranial/Structural Core Distortion Releases, the initial soft tissue treatments would work with the pelvis and leg distortions from the long leg/short leg discrepancy and the low back. Once the client had little or no pain in the area of the bulging disc the rest of the structure would then be treated. Usually, next in importance would be the upper part of the spine with treatment of the head/neck/and shoulders area. This would be followed with a thoracic session to take the rest of the core distortion holding patterns out of the musculature releasing the curvatures in the thoracic spine which would allow the entire spine now to maintain a vastly improved pain free support. Additional soft tissue sessions would still be needed to release the remaining imbalances in the rest of the legs, feet and arms.

Once the cranial core distortion has been released, the structure of the body is trying to balance and release the holding patterns of the core distortion from all the soft tissue. It can only do so much on its own and needs a therapist's skilled hands to assist it. Since the soft tissue is now beginning to unwind out of the core distortion the therapist has an opportunity to work more

effectively with the body as it tries to unwind into a new more supported balance with all levels of soft tissue releasing. Because the entire structure is trying to release at once it is possible to work all levels of connective tissue even in the first session.

Using this model it is possible and beneficial to work deeply to achieve maximum results even in the first session. An approach into the soft tissue that will first release fluid, ischemia and inflammation prepares the area for deeper work. Deeper strokes then allow the myofascial holding pattern to unwind, and are most effective when providing direction to the unwinding in the same direction that the body is trying release. The soft tissue and the client are now prepared for deeper more specific strokes to release adhesions, scar tissue, and lengthen connective tissue fibers.

As you can see, integrating Cranial/Structural therapy with soft tissue myofascial work can produce rapid long term results in rehabilitating clients with musculoskeletal pain. This new integration of advanced techniques may be the answer for many of your clients who keep returning with the same problems over and over. I have been developing this integration and using these techniques successfully for the last 25 years. Even the most complex cases who have given up hope after having been everywhere seeking treatment have been able to resume normal life activities pain free.