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## *What is It?*

*A*s I travel around the country teaching I find the most frequently asked question is:

How do I first explain CranioSacral Therapy (CST) to my patients who have never heard of it before? I am a massage therapist, how do I tell someone I also do CST?

Tell your patients, “Hey I’ve learned a new technique that may help you in addition to our regular (massage, PT, OT, Chiropractic, etc.) session. Would you like to try it?”

The patient may ask, “Well, what is it?” My lesson from many sessions is in the frequent times patients have asked me to explain, prompting me to create the explanation I’ll share with you now.

This is what I tell them: “Everyone has several kinds of rhythms in their body. There is the cardiac rhythm, in which the heart beats 60–80 times per minute. Then there is the respiratory rhythm of your breathing, in which you inhale and exhale 15–20 times per minute. Underneath those rhythms is another one called the CranioSacral Rhythm (CSR). In this rhythm your head gently expands and narrows and your spine gently lengthens and shortens in an effort to exchange and circulate cerebrospinal fluid. It does this 6–12 cycles per minute. The membranes that surround your head and spine act as a little hydraulic pump that draws this clear fluid out of your blood, bathes the brain and spinal cord with it, and then returns it to the blood supply. In this way the

cerebrospinal fluid is filtered and renewed. It is important fluid because it supplies nutrients, carries away waste products, and acts as a fluid protective covering for the brain and spinal cord.”

“The cardiac rhythm can be felt at the neck, wrist, and ankles. The rhythm of the lungs can be felt at the shoulders, neck, chest, and belly. Like these other rhythms, the CranioSacral Rhythm can be felt from all over the body—the legs, pelvis, sacrum, shoulders and head.”

“If I were to hold your ribs and resist your lungs from expanding, you would move to allow your lungs freedom to continue their rhythm. What we do in CranioSacral Therapy is *very gently* hold the rhythm and watch as the body gently moves to free itself. As it does this, releases occur and restrictions in the body change. Just as bruised ribs from a fall might keep you from breathing properly, a fall on your tailbone or a bump on the head may keep your beautiful craniosacral system from working properly.”

“So we gently hold and wait for releases. Releases occur in the form of heat, pulsing, muscle twitching. Sometimes the eyes may blink or gurgling sounds occur in the digestive system. You may feel part of your body soften, or gently shift and spread. Breathing patterns may change. A deep feeling of relaxation is a common reaction to treatment.”

Some releases are gentle, but sudden. I offer this analogy as an example: “Have you ever come home from a hard day and said to yourself, oh boy, am I tired, I can’t wait to go to sleep tonight? So you get into your bed, the room is dark, and the house is quite; you can feel sleep overcoming you. Your eyes get heavy and just start to close—and surprise!!!!!! Your body jumps. Has that ever happened to you?” Ninety-eight percent of patients nod their head yes to this. I continue, “The other thing that can sometimes happen with this work is that your body may get very still before or during the release process. It’s a special point because it is a Significance Detector for your body. Sometimes as your body is rest-

ing here on the air mattress and my hands are listening to the rhythm of your craniosacral system, your body might move into the position it was in when you got hurt. This often happens with people having pain and dysfunction from slips, falls, motor vehicle accidents, and traumatic events such as being beaten up in a fight. Your rhythm automatically stops, and releases begin to occur. You enter a point of stillness we call a significance detector because the position the body moves into, or what you are thinking, is often an important (significant) part of the healing and letting go process.”

Sometimes there are emotions held in the body that are a part of the release process. I once had a patient who could not remember what had happened after being in a single-car accident. She was a single mother caring for two young children. She was in a lot of pain, unhappy, and concerned because her pain and limited range of motion in her neck and arms had gone on for over a year. She was fearful she would be unable to continue to care for her children.

She had been to conventional therapies such as PT, OT, Chiropractic, and had been seen by orthopedists and neurologists. Nothing seemed to help.

When she came to me I explained to her about CranioSacral Therapy, and the cranial rhythm. I also told her about releases and allowing the body to release what it will. I asked her to lie down on her back and I began to listen to her rhythm at her feet, then her thighs, then her pelvis. At the pelvic diaphragm, she gently turned and curled up into the fetal position, closed her eyes, and said her ankles, wrists, shoulders, and neck hurt. She said she could see the color red. She then began to cry. Her rhythm had stopped.

I kept my hands in the pelvic diaphragm position, with the patient still on her side. I told her these were emotional and physical memories held in her body that were releasing and if she could

stay with this process for a few minutes it would be helpful. She was able to stay with the process for five or six minutes and then she stopped crying, straightened out on the table and sat up.

She said, "You know, now I can remember the accident." She explained in detail that she didn't see the black ice and she felt the car start to skid. "I saw the telephone pole coming towards me and I tried to press hard on the pedals, my feet went under the pedals. I straightened my arms out with a strong grip on the steering wheel and I remember being so scared and thinking about who would care for my children and what would happen to them. When the crash came I felt pain in my ankles, wrists, and shoulders. I felt my neck snap and the last thing I saw just before I blacked out was the red hood of my car crashing through the windshield."

She then tried to turn her neck and exclaimed, "Wow, I can turn my neck and I don't have pain. What just happened?" I explained about still points and Significance Detectors. That is to say, her body moved into the position it needed, in order to release the effects of the trauma from the motor vehicle accident. It also provided her with a SomatoEmotional Release (SER), releasing an emotional charge that accompanied the trauma at the moment of impact and immediately after.

She came in twice after that session for massage and exercise, and then I discharged her to return to family life pain free.

So, CranioSacral Therapy is a gentle method of listening to the body and encouraging change. It is using very light touch (5 grams) to encourage releases that may include heat, pulsing, gurgling of the digestive tract, muscle movements, and breath change. Releases may be emotional, in the form of tears, laughter, and/or memories—that may produce feelings of fear, shame, sadness, anger, remorse—that also can come to the patient's awareness and thereby release.

## What is It?

The most important part about CST, and a real lesson from every session, is that the body will lead the way, and do what the patient needs—and do what the therapist is able to help facilitate. Therefore, massage therapists, PTs, OTs—those practitioners who want to work with the physical body—will do that (facilitate), and experience, by and large, all physical releases, (heat, pulsing, etc). Those therapists who feel confident in assisting with emotional release usually invest a lot of time and energy training in SomatoEmotional Release and may facilitate that event for the patient. The body is able to recognize the level of work the therapist is able to facilitate.

After a short discussion with the patient covering some of the elements I've mentioned, I ask if it sounds like something they would like to try. They usually say yes and away we go on our adventure.

Excerpt from “Lessons from the Sessions”  
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