

The Osteopathic Lineage of Healing

Restoring innate health through cranial osteopathy and craniosacral therapy

by [Lorrie Klosterman](#) and illustrations by [Annie Internicola](#), November 28, 2007

“To find health should be the object of the doctor. Anyone can find disease.”
—Andrew Taylor Still, founder of osteopathic medicine

It would be rare to find a health practitioner today who denies the healing powers of the body. After all, every one of us sails on a sea of microbes, chemicals, and physical affronts that could sink us daily, were it not for some built-in protections that come with our remarkable vessel, like the immune system, and a host of self-correcting physiological mechanisms. If we need help upon occasion, allopathic medicines can dampen symptoms—the manifestations of the struggle to get well—and allow us to carry on as though we were fine, at least in the short term, and some drugs can buoy us through an assault so grievous that we may not win; bronchodilators for bee-sting allergies and antibiotics for Lyme disease are examples.

Of course, there are many things that medicines can't fix, and, by quelling symptoms, won't address the underlying cause. Osteopathy is a field of medicine that at its foundation trusts the body's inherent capacity to defend and repair itself. It emphasizes that we naturally adapt to and usually survive what our surroundings throw at us, thanks to innate, interdependent mechanisms—and quite complex ones, at that. Nonetheless, our normal adaptability can be disrupted, or external circumstances can become too extreme for the body's capacity for self-maintenance. Then disease may ensue.

Those are among the principles on which Andrew Taylor Still, a medical doctor of the late 1800s, founded osteopathy. He perceived the healthy body as an integrated, harmonious whole, composed not just of physical structures but also of emotional, psychological, and spiritual components. Unhappy with allopathic medicine's concepts and methods, Still developed an approach, osteopathic medicine, to restore the body's own healthy relationships among bones, muscles, the nervous system, internal organs, and fluids. Since the opening of the first osteopathic medical school by Still in 1892 in Missouri, osteopathy has grown to a profession with two dozen colleges and more than 50,000 practicing doctors in the US. Today's doctors of osteopathic medicine (DO) are fully trained and licensed medical physicians, surgeons, and specialists, with medical authority equivalent to that of MDs.

A Skull Reveals

Dr. William G. Sutherland, an osteopath of the late 1880s to mid-1900s, turned an especially inquisitive eye to the skull, and the convoluted suture lines coursing over its surface that demarcated boundaries between skull bones. Sutherland concluded over several years of research

that a minute degree of movement between bones along the suture lines was possible—a phenomenon still fervently denied by some doctors, yet measured and documented by others. Sutherland further perceived that the skull expanded and contracted slightly in concert with a rhythmic pulsation of cerebrospinal fluid within the central nervous system (brain and spinal cord). He called the pulsation the primary respiratory mechanism (not to be confused with lung respiration). From Sutherland's ideas, research, and clinical experience, the specialty of cranial osteopathy—or “osteopathy in the cranial field,” as he called it—emerged, emphasizing the importance of this cranial rhythm.

Drs. Joseph Tieri and Ari Rosen are osteopathic physicians in the Hudson Valley with a focus on cranial osteopathy. Trained in that specialty by cranial osteopaths who were direct students of Sutherland, Tieri and Rosen treat patients from a wide geographic area, since there are few doctors who work as they do. They also teach their specialty to medical doctors (DOs or MDs) through one-on-one apprenticeships, as is the tradition of cranial osteopathy.

“Dr. Sutherland started this approach, and it's handed down generation by generation,” says Tieri. “Health is happening in the body all the time, and the osteopath discovers that process, and helps it follow its natural course. It's treating for health—the ‘breath of life’ is what Dr. Sutherland called it. He found deep, therapeutic movements that could treat the whole of the patient, rather than partition the body into bones, membranes, muscle, and so on. We find that a lot of trauma goes deeper than muscle and bone, into the level that we call fluid. It's a very complex process, and also very subtle. [Learning this approach] takes intense time and effort.”

The Rhythms of Healing

Cranial osteopathy is about restoring healthful rhythms. Rosen explains: “There are very palpable movements and rhythms throughout the body. There is a potent rhythm through the central nervous system [Sutherland's primary respiratory mechanism], but the whole body is also going through the same rhythm.” The doctor perceives abnormalities in that, and mediates changes through hands-on manipulations. “Based on what we feel in the patient,” Rosen says, “we go through a therapeutic process that is dictated closely by what the body needs, rather than what we impose on it, so the patient moves in a more healthful, rhythmic way. A patient's body will hold on to that and continue to progress between appointments.”

Exactly what does the process entail? Patients lay calmly on their backs, while the practitioner prepares as well. “To approach the body at a tempo of health,” says Tieri, “you need to come to the patient by sitting back, being in a receptive mode, and sensing the patient as a whole.” When it comes to hands-on contact, different practitioners use different techniques and pressure. “But it's a very different process than just technique,” Tieri adds. “It's a perceptual skill. It's more about tempo.”

Most of us are in a revved-up, fight-or-flight tempo much of the time: the result of sympathetic nervous system overdrive—that part of our innate workings that carries us through physical and mental stressors. Without balance from relaxation (the purview of the parasympathetic system; the yin to the sympathetic's yang), that speedy tempo can entrap us in a muscle-knotted, immune-impaired, disease-vulnerable state. “That's where the disease process lives,” Tieri says. “It's like having a 100-watt bulb screwed into a 60-watt lamp—that's why people are depressed,

stressed, exhausted.

It can take 15 to 20 minutes just to get a patient to a neutral state, where they are ready to begin the healing process—though that relaxation alone can be helpful. Then, Rosen explains, “We treat patients directly to balance the nervous system. If someone comes in with, for instance, a trauma to their neck, or a headache, they are very focused on that, and their bodies are guarding [that place]. We help them relax into normal function, instead of getting caught up in the strain or injury. Once they get into the treatment, they will feel more relaxation and energy in that region. They often also find an overall sense of well-being, even euphoria—and then a whole host of other issues can be addressed.”

Rosen and Tieri point out that these techniques are very effective and safe for children, even infants. “Their bodies are more malleable, and more fluid,” says Rosen. “Problems such as trauma during birth can usually be addressed more easily and quickly than in adults. We have both treated many children within hours and days of birth.”

Craniosacral therapy

Craniosacral therapy (CST) shares an ancestry and several principles with cranial osteopathy, though it is a distinct discipline. A variety of healthcare workers may become certified in CST through workshops or classes (a medical background is not required). There are different forms of CST, most notably that taught by the Upledger Institute in Palm Beach Gardens, Florida, which was founded by osteopathic physician John E. Upledger in the 1970s. The institute’s high profile (it offers hundreds of weekend workshops and short-term trainings around the world each year) can lead to the misinterpretation that Upledger invented all of craniosacral therapy. He has indeed contributed much to CST through his research, clinical experience, and specific techniques, but it is the osteopathic foundation set forth by Still and Sutherland that underlies all CST approaches.

Margery Chessare is a craniosacral therapist and CST instructor at the Center for Natural Wellness School of Massage Therapy in Albany, and she teaches advanced CST classes in Saratoga Springs. She says that in 1996, nobody in the area had heard of CST, but its presence has grown substantially. “Now everybody who goes through our massage school learns about it in class,” she explains. “And regardless of whether you ever do this work [as a practitioner], learning CST increases your ability to communicate with clients. Students learn new palpation skills, and to listen to another human being with their hands—and also with their hearts and their whole body, not just through the skin of their fingers. They’re learning to use all their different senses.”

Chessare describes the cranial wave, or CRI (cranial rhythmic impulse)—a key concept shared by CST and cranial osteopathy: “It is a constant expansion and contraction going on in the cranium, eight to twelve times a minute. The pulse is conducted from the cranium, through the spine, to the sacrum. Once you learn how to palpate that, you can feel it anywhere in the body.” To detect that rhythm, a practitioner must soften his or her touch to perceive what a client’s body is presenting.

The hands-on methods of CST are often very still outwardly. “For the vast majority of people, a

craniosacral session is extraordinarily peaceful and subtle,” says Chessare, “yet the experience can be profound. If you ask the client or practitioner, either or both will report a whole lot going on. Each session sets into motion the organizing, self-healing capabilities we all have at our core. Reorganization at any level—physical, emotional, energetic, spiritual—can continue for hours and even days following treatment. Many clients report a decrease of symptoms; some find their senses heightened; many say they sleep much better. Virtually everyone comes away with a feeling of well-being, even those who find themselves connecting with challenging or traumatic issues.”

Chessare emphasizes that CST is different from massage, though some forms are more biomechanical—moving structures of the body—than is her approach, biodynamic CST. She doesn’t recommend experiencing CST as a one-time treatment, as spas sometimes offer it, since its effects build over time. But children often do benefit from short-term or one-time CST treatments. “Sometimes the cranial bones might have gotten jammed or misaligned at birth. To just get them on track can make a huge difference,” she says. “I have seen children with visual issues or learning disorders, or little babies who haven’t been drinking or who are crying a lot, change so dramatically. Ideally, CST would be done on newborns. If every child had a minute or two of craniosacral therapy, we would see far fewer learning disorders.”

Michele Tomasicchio is a licensed massage therapist with training in CST through the Upledger Institute. “I incorporate a lot of CST into my massage therapy sessions,” she says. “Often I do deep tissue massage and add some of the craniosacral holds. Clients can get a better result with the combination.” But her work goes into arenas far beyond the physical. “CST touches on the central nervous system, which controls all the major systems of the body, and includes emotional issues,” she says. “We’re not just physical beings, but also emotional, mental, and spiritual.” She recounts some of Upledger’s studies, and the clinical research that continues at the institute today, which show the benefit of CST on conditions with more than physical manifestations—posttraumatic stress disorder in war veterans, for instance, including those returning from Iraq.

Even something as commonplace as recurrent headache may have emotional underpinnings that CST can access. “I have a client who was working every day in an electromagnetic field,” Tomasicchio recounts. “It really affected him. He had to leave his job because of headaches, as well as anxiety. So we worked on the headaches, but some emotional issues came up during a session. He had a somatoemotional release.” Somatoemotional release is when being touched triggers a flood of feelings related to an earlier injury or trauma—whether physical or emotional. “It could have been something someone said to you,” says Tomasicchio, “and you’re holding that [past trauma] physically, in your tissue. It can cause intense feelings, like anger and resentment. CST taps into that, and helps the person release it. For some people the release can be an actual feeling of the experience.” Though it can sometimes be powerful and scary, the practitioner helps get you through to a freer, more centered place. Tomasicchio adds, “Your body is not going to show something that it’s not ready to release.”

Tomasicchio suggests that people looking for a CST practitioner educate themselves about that person's background. "I understand the concern that someone can take just a first level training and say they do craniosacral." She recommends finding someone who has several levels of training, especially if you have emotional issues that may run deep. You can ask a practitioner about credentials directly, or, for those with Upledger training, consult the institute's online database of practitioners (searchable by zip code).

A medical doctor goes deep

Ron Wish is an MD based in Nyack who focuses on craniosacral therapy in his healing practice and teaches an intensive CST training program. His approach and training include somatoemotional release. Wish explains, "Sometimes people need to go back to old traumas—physical abuse, sports injuries, old infections, hospitalizations, surgeries, childbirth [as a trauma for the baby or the mother], abortions, and miscarriages—to help resolve the memories that get stored in the tissues and cells, not just in the mind."

Wish first came across CST as a medical student traveling abroad. A chiropractor offered it to him as a method he was experimenting with; Wish found it brought him unexpected relief from the mounting physical tension in which his profession's demands were enveloping him. Later, Wish sought CST for chronic pain, and discovered it also helped him shed difficult experiences from his youth that still influenced his body. "The way I can hold space for people as I do this work," he confides, "is by having gone through stuff myself." As a board-certified family physician who started out in allopathic medicine, Wish has been using primarily CST for years now, in combination with energetic and psychotherapeutic methods, "because it works very well for me and my patients."

Wish describes CST as hands-on work "in the middle of the spectrum, with intense chiropractic on one end, and distance energy healing on the other. Most of the time, we have our hands on our patients with an extremely light touch. We're not trying to break through resistance or force anything into place. We are trying to follow where the body wants to go to feel more harmonious, freer, truly aligned. I never pop or crack or do any kind of forced adjustments. But once people are relaxed and have released [tension], things can gently pop into place on their own." Patients often have sensations they aren't used to noticing, he says, such as vibrations, pulsations, heat discharges, and other manifestations of the body relaxing and releasing tensions of old trauma.

In a phrasing perhaps unexpected from a traditional medical doctor, Wish adds, "The body is a sacred vessel. And the body doesn't lie. Our minds can make up lies, but our bodies are very straightforward. They want to feel good and be free. Our mind inhibits that process, because it means going back through pain, and we tend to avoid that. This work is like peeling layers of an onion. First, people shed superficial layers of tension. As they go deeper, they get to know themselves more fully. Most people carry layers of suffering; as you shed those, you feel better and lighter. That's where healing takes place."

Resources

Joseph Tieri, DO, and Ari Rosen, DO:
Stone Ridge, (845) 687-7589; Rhinebeck, (845) 876-1700;
New Paltz, (845) 256-9884; www.stoneridgehealingarts.com

Margery Chessare, BA, LMT: (518) 893-0421;

www.sipn.info/chessare.htm

*Ron Wish, MD: Great River Craniosacral Therapy Institute,
Nyack, (845) 358-4815; www.drwishcraniosacral.com*

Michelle Tomasicchio, LMT: New Paltz, (845) 255-4832

The Cranial Academy (osteopathy information):
www.cranialacademy.org

Inter Linea, online publication devoted to osteopathy:
www.interlinea.org

*The Biodynamic Craniosacral Therapy Association of
North America: www.craniosacraltherapy.org*

The Upledger Institute: www.upledger.com

Klosterman, Lorrie. (2007, December). The Osteopathic Lineage of Healing. *Chronogram Magazine*.