

ALZHEIMER'S, DEMENTIA AND CRANIOSACRAL THERAPY Part 1

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This 3 part blog on the Larry King CNN Special on Alzheimer's points out some key elements on risk factors, the pathology of the disease process, and suggestions for prevention and treatment. I will counterpoint key elements of the special with comments on how our research with CranioSacral Therapy complements and enhances these views. Keep reading find out how my new class in Geriatrics offers hope for the prevention and reversal of this disease.. Michael

RISK FACTORS

From the Larry King special on Alzheimer's:

'If this is not dealt with, this will cripple the healthcare system'

President Reagan's Alzheimer's doctor

'By the time you're 85, it's a coin toss as to whether or not you will have it'

Ron Reagan

"They look like your parent but they become your child"

Maria Shriver

"For caregivers, make sure they don't do it alone"

Laura Bush

It is estimated that caregivers (estimated to be 15 million people) spend an average of 202 billion hours annually supporting their loved ones

The following is from a compilation of sources relating to risk and environmental factors that seem to contribute to Alzheimer's and Dementia. Larry King mentioned some of these but some have also been added:

Environmental and Risk factors:

1. Women have double the risk of being affected with Alzheimer's in later life than men.
2. Dietary factors-high calorie/high fat diets, excessive amount of dietary iron and copper, and low intake of folic acids/folates and antioxidative nutrients such as Vitamin C & E.
3. Low demands on intellectual function, which seem to correlate with increased occurrences of Alzheimer's.
4. Sedentary Lifestyle. So Mental and Physical exercise seem to help..
5. History of head trauma.
6. Increased Oxidative stress that heightens oxidative damage in the brain tissue...

To compliment the above view, from a craniosacral perspective we have two additional components to add to this list of risk factors:

- A. Decreased flow of Cerebral Spinal Fluid (CSF) in an aging population.
- B. Increased incidence of inflammatory response in aging humans.

Let's look at both of these in turn:

Decreased flow of Cerebral Spinal Fluid in Aging Population:

A number of years ago Dr. Upledger (the founder of CranioSacral Therapy) commented that the 'turnover' of CSF in middle age adults (the definition of which keeps changing) may be half that of normal healthy younger adults. Our additional research has shown that in elders with Dementia and Alzheimer's, the flow of CSF is again half as much. To put numbers to this, normal CSF flow is 800ml a day, which may

decrease to 400ml daily, and in Dementia and Alzheimer's, down to 200ml a day.

Why is this important? CSF has a 'washing' action, which removes heavy metals across the blood brain barrier. The less flow, the more opportunity for the brain to 'clog up' with plaques, tangles, and other factors typical of the memory loss and eventual overall decline found in Alzheimer's patients.

Increased incidence of inflammatory response in aging humans:

Simply put, as we age many people accumulate 'pockets of inflammation' in the body that are result of disease processes such as Arthritis, Osteoporosis, Diabetes, Cardiovascular disease and the like. In some cases that ongoing inflammation 'overflows' across the blood brain barrier and begins to compromise the brain tissue. In many of the patients in our research project we found prior disease states to be a part of their history..

Part Two-we will discuss the Pathology of Alzheimer's

ALZHEIMER'S, DEMENTIA AND CRANIOSACRAL THERAPY

Part 2

LARRY KING CNN SPECIAL ON ALZHEIMERS AND MY COMMENTS ON HOW CRANIOSACRAL THERAPY IMPACTS RISK FACTORS, PATHOLOGY AND PREVENTION

PATHOLOGY OF THE DISEASE PROCESS

There are a number of theories as to how Dementia and Alzheimer's develops. I will briefly share the CNN perspective and the Craniosacral Perspective on this as well. Understanding how this happens has also given us 'clues' as to how to prevent or possibly reverse the process...

A number of experts on Larry's special shared their views on how Dementia and Alzheimer's develops. Researchers aren't entirely sure, but the convention wisdom is a combination of diet, mental inactivity, inflammatory processes in the brain, genetics and simply getting less flexible, otherwise known as getting older. Think of aging as less flexible, 'more creaky' if you will. The more flexible you are, the younger you are more likely to be, in mind, body and spirit.

Dr. John Upledger has given a more detailed insight into the pathology of Dementia, based on his extensive understanding of biochemistry, the inflammatory processes in the body, and immune system microbiology. He points out that the formation of amyloid 'plaques' inside the brain (a key indicator of advanced dementia and Alzheimer's) may be a 'by product' of the immune system trying to defend itself from what it perceives as an 'intruder' in the brain. Immune system cells begin to attack brain tissue and generate an inflammatory response, and further generate 'pro inflammatory cytokines' which in turn generate even greater inflammation inside the brain. The result is:

- a. Micro inflammation (and swelling) of the brain followed by
- b. Shrinkage of the brain-fluid pathways are destroyed and ultimately CST circulation is decreased.

Oh, and by the way, this also effectively destroys the brain tissue (including axons and synapses) that conducts electrical/chemical flow and form the neuronal network that creates our 'holistic' memory, images, and 'recollection' Simply put, our ability to remember-both short and long term-is diminished as this network is progressively destroyed. The long-term consequences of this usually result in a shortened life span as well.

In part 3 we'll examine prevention-How CranioSacral Therapy offers an alternative for prevention and reversal of the disease through our new approach to Geriatrics

ALZHEIMER'S, DEMENTIA AND CRANIOSACRAL THERAPY

Part 3

LARRY KING CNN SPECIAL ON ALZHEIMERS AND MY COMMENTS ON HOW CRANIOSACRAL THERAPY IMPACTS RISK FACTORS, PATHOLOGY AND PREVENTION

A new training on how to support parents, caregivers, and therapists working with the Geriatric population.

PREVENTION

There is no known cure for Alzheimer's or Dementia. By their own admission, Pharmaceutical companies admit their products can only manage the symptoms for some amount of time.

However, the Craniosacral perspective does offer encouragement.

As we mentioned in Part 1, there are two factors from a craniosacral perspective which we feel contribute to Dementia and Alzheimer's:

1. A decrease in production of Cerebral Spinal Fluid (CSF)
2. An increase in the inflammatory response in the body over time.

Increase in CSF Production. In a study published in the American Journal of Gerontological Nursing in 2008, (Craniosacral Stillpoint Technique: Exploring its effects in Individuals with Dementia) we reported that the regular administration of a cranial technique called a still point had positive results over an extended period of time in patients with moderate to severe Dementia.

Decrease of the inflammatory response. Along with 'pumping up the volume' of CSF, Craniosacral therapy and allied techniques have the effect of calming the body and lowering body wide inflammatory response, which again may be a precursor to dementia being exhibited as a symptom.

In our pilot study on Dementia and Alzheimer's, we took individuals from a rest home and evaluated how the simple application of CST, with the application of what is called a 'still point' made a difference in their lives. It would be enough to prevent the progression of this disease from one stage to another. We actually saw clinical and statistical significance based on an intervention with CST-measuring the impact before during and after the study. The bottom line is that the effect of CST 'lingered' even after the intervention stopped. As we continue our research, we are investigating how CST might not just slow or stay the progression of the disease, but even reverse some of the effects. One anecdote from the study-a 100-year-old woman in a nursing home in Minneapolis was able to feed herself and began to speak in sentences over a 6-week period of time.

Prevention, Treatment, CST & Geriatrics

CranioSacral Therapy as a preventative measure is highly recommended. We feel the influence of CST on patients with Dementia and Alzheimer's, no matter what stage they may be at, is so effective that we have are developing a class to train caregivers and therapists. The class is called CranioSacral Therapy and Geriatrics-a 2 day class to train laypeople and therapists in treating individuals who also show signs or who actively display symptoms of Dementia and Alzheimer's.

Michael Morgan LMT, CST-D is an instructor for the Upledger Institute in Palm Beach Gardens, Florida. He has pioneered

ground breaking research on CST, Dementia, and Alzheimer's and is developing a class in Geriatrics-CranioSacral Therapy and Geriatrics-to train caregivers and therapists on how to apply CST techniques to their loved ones and patients. The first two day version of this class will become available in the fall of 2011.

Lessons Learned from the first CSG2 Class

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I had the honor of teaching the first 2 day CST and Geriatrics class last week in Southern California.

Here are some observations about the class:

1. It works! Students were able to easily learn how to palpate the CranioSacral Rhythm and learn how to do a stillpoint on each other. The easy pace of the class gave students time to have all their questions answered, get validation, and gain confidence in their own ability to treat.
2. Our variations on a theme-how to modify the stillpoint to treat patients in a geriatric setting was also very successful. Students learned how to treat in situations that will support more challenged clients.
3. The mix of beginning and more advanced students worked very well. Advanced students (SER 1 and above) were able to refine their listening skills and prepare themselves for apply their knowledge to a geriatric population. In addition, they became a resource for the new students who may want to refer their patients for more advanced work.
4. Our presentation of the mechanism of what causes Dementia and Alzheimer's-including the inflammatory process-was well received and simple enough for everyone to 'connect the dots' to their own experience.
5. Last and not least-we were able to treat 3 Geriatric patients-all in their 80's-who felt the benefits of the treatment. Students were also able to feel and see the changes that their CranioSacral Training brought about. The students were able to practice a simple protocol that, in 15 minutes, allowed them to relax their patients, find areas in the body that needed treatment, and reduce inflammation in the body. What we also found was that in the process of treatment, many of our seniors were able to tell their life story and have somebody listen. It was very validating to see our seniors respond in such a positive way.