Pediatric osteopathy I Milano September 2011 Bruno Ducoux DO Looking for the informaton behind the form, find the stillness, and let the health manifests itself Osteopathic treatment of newborn a study from the french Academy of Osteopathy Critical analysis of the risk factor attributed to osteopathic care of the 0-9 months infants No accident in litterature No accident for insurance compagnies offering professionnel insurance to osteopaths 220.000 babies treated in France in 2005 300.000 babies treated in France in 2006 Decrees of the law on Osteopathy from March 2002: treatment of babies under 6 months need a medical certificate of non conterindication Comparativ study A coherent complex system Researches The large book of medecine is slightly open Allopathic medecine is mainly chemical, looking for illnesses Osteopathy belongs to the vitalist and mechanical chapter of medecine - A.Abehsera For vitalists:Vis natura Medicatrix is the healing process. God's Pharmacy is within us Pediatry is a mainstreal field to apply these principles John Martin Littlejohn DO Body as a vital machine Vitality means activity What's life for a physioligist? Free circulation of blood and nerves Emotions:reflect of vitality Asking for places of retention The hand is a sonar looking for places different from the basic noise Energy cysts (Upledger) and memories Tissue desorganisation and memories Entropy is enhanced;dysfonctional place for the homeostasy Contribute to a facilitated zone (I Korr) Osteopathy in four dimensions 3 dimensions of space and time: 4 dimensions Nicholas Handoll DO Looking for Neutral/ Coherence Dynamic stillness Sutherland Beginning of self treatment R.Becker Balancing a vibrational system R.Fulford Sounds as vibrations Felt sense Behind the five senses and words Link between physical, emotional, mental and intuition Eugene Gendlin Chicago 1953: a systemic experience in a holistic environment Presence or focusing The map is not the territory Put words on sensations Three brains Mc Lean Cortex Limbic system Reptilian brain Coordination of the senses Spinal cord Brainstem Cortex Posterior parietal cortex areas for integration Peripheral sensory systems:internal effect of external input Compensation from one element to another Motoric development Musculosqueletal Fascial Membranous Fluid Adaptation and plasticity Influence of genetic and epigenetic factors Imbalance with the environement: stress Separation with mother: stress Change in their inner world

Vibrations E Swedenborg

pp<u>lication</u> Anything of a firm and hard nature, such as wood, stone, metal, is subjected to great tremulations even by a slight touch An expended membrane is the best medium of tremulation The tremulation of a string will cause a sympathetic vibration in another string; a membrane similarly affects another membrane; that is, if both are tuned in the same kev Our vital force consists in little vibrations Tremulations in the air make rings and circles, and are heard on all sides round the center of the motion; that is, if the whole mass is not being moved In tremulations, there are millions of variations Vital force in a newborn Nothing is stable on a newborn in the whole body Everything can change and move regarding the informations received Life and felt senses can accomodate what seemes hard and non moving (bone) The respiratory and digestive system are not really effective before birth; the nervous system is not mature after birth Vibrations in the newborn Motion takes place in the fluids in a contiguous system Vibrations are reflected thru the connective system to the whole body New informations will change the matter if the informations move thru the fluids Vibrations and main senses Vestibular, auditory system and ears Visual system and eyes Somato sensory system and musculosqueletal elements Vibrations transformed in electrical and chemical signal for the brain Inbalance in the environment Separation with the mother Hyperstimulation Non answering to needs Perceptual studies on babies Senses:function exists before structure Week 7: smell, taste Week 9: touch Week 10: vestibulary system Week 12: auditory system Then, migration of neurons to the cortex Week 22/ memory and answers to auditory stimulations Source: Pr J P Relier Fœtus and senses Interactions Smell Heat Heart beat Touch oice Intonation Respiratory rythm A systemic approach of complexity Conditions of motoric and sensorial developpement Central axis Grounding and opening Respiration Digestion Lateral chains and hands Proprioception General listening and treatment Three dimensional space Time: present moment: fourth dimension Senses: see, smell, ear, taste, touch Felt sense, intuition: sixth sense Put words on your sensations Cranio-medullo-sacral axis The growth of the notocord is not positional B.Freeman Midline in central position for birth During work: importance of this axis Jnifying factor in the process of birth Modern Birth conditions Parental stress and hyeractive mothers Lack of the presence of the women lineage Preterm babies from 26 weeks of pregnancy Generalisation of epidurals Mothers lying during work Pressure on the belly during work sections... Negative birth conditions Medications Prematurity Lack of familial environment

Medical interventions:forceps Too long or too fast process Birth complications Lack of bonding

Unresolved prenatal or birth trauma Emotional difficulties from parents Bad environement (violence, noise, smoke, feeding, bonding)

Events compromising needs from babies

Birth process under our hands

Fight: passive then active Work, presentation, orientation, expulsion 4 phases of birth (S.Grof; B.Montaut) Manual tissue listening Position of ease Be still and know (Sutherland) Vital forces help the Health present

> Birth process Birth stages Scoliotic mother Birth as a fight? Difficult birth Axis? Asymetry Intraosseous occiput Back to sleep campaign

Babies on the back Motricity of the digestive system Lymphatic drainage Motility of the diaphragm Consequences on psychomotor developpement Position of the head

Plagiocéphalies (PPOP)

Asymetry

Positional asymetrie in utero

Genetic

Engénétic Développement in a liquid environment Constaints (oligoamnios, déformation uterine, syndrom of the ground floor, gémélarité...) Physical and emotional events from the mother Skills acquired Neurons mirrors;cerebral plasticity Insula as integration center Consequences of asymetrical positions

Différentiel diagnosis: craniosynostoses Asymetries during birth process Fronto occipital with torticolis, occipital, brachycephali Back to sleep campaign 1992: exagerations Placebo effect ofosteopathy Return to normal? Early Osteopathy

Midlines

Obstetrical approach of the basi cranium Obstetrical door:Intraosseus occiput Level of treatment Memories and vibrational model Put words on sensations Cranial Bowl

Physical

Emotional Metabolic

Attention Intention Presence density Practice

Tools:new senses New perceptions New perceptual universe Neutral as significant detector Time and neutral Neutral and space Levels of perception Intentional Touch Levels of perceptions

Physical perceptions

| | Emotional perceptions |
|--|--------------------------------------|
| ensions Zibratory fulgrup | |
| anala of aitheration | |
| ooking for neutral | |
| Communication | |
| inks with mother | |
| | |
| | Metabolic perceptions |
| peed of tissue answers | |
| Aver and viscera | |
| Interent sensations | |
| accinations and drugs | |
| | Vibrations and main senses |
| /estibular, auditory system and ears | |
| /isual system and eyes | |
| omato sensory system and musculosqueletal elements | |
| /ibrations transformed in electrical and chemical signal for the l | brain |
| | |
| | |
| | |
| | |
| | Fulcrums |
| n a living system, everything is moving; wheel exemple | |
| point of balance to maintain homeostasis Donna L Taylor | |
| pparently non moving place | |
| Axis of force | |
| Presence of the therapist can be a fulcrum/Tricot) | |
| resence of the therapist can be a fulctuin (fileot) | Vibratory fulcrum |
| Perception, non mecanical, which led to a point of balance, forc | e opening new doors |
| The inhering potency in the system develop from that vibratory | fulcrum; eye of the storm (R.becker) |
| Dptimal receptivity point | |
| Point of transformation | |
| | |
| | |
| | Ante natal memories |
| ntention of the parents | |
| gnition system | |
| Genetic and epigenetic influences | |
| Water environnement during pregnancy | |
| Aidline | |
| igt from inside: respiration through skin | |
| No need for food/perpetual nutrition | |
| Respiratory diaphragm | |
| Jpper respiratory diaphragm | |
| Pelvic diaphragm | |
| Cranial diaphragm | |
| | Fascias |
| | Connective tissue physioloy |
| | Simon Sellam |
| solation | |
| Totection | |
| ransport | |
| Attache | |
| Réception | |
| Inveloppe | |
| follow vibratory model | |
| | |
| | Fascias |
| argent organ | Vehicle for emotions |
| argest organ | |
| lasticity | |
| Bone as a dense connective tissue | |
| Continuity even in the cranium and viscera | |
| see Gabarel; Paoletti | |
| | |
| | Cranial chains |
| | Three main vertical chains |
| | |
| o prepare the baby to verticalisation | |
| opposed to gravity | |
| Relation with electromagnetic forces | |
| and the electron might the fortes | |

Leading to neutral Three main central chains

Present during pregnancy

Anterior chaî

| Pineal gland, straight sinus, squamous occiput, tympan, hamer, mandibula, tongue, pharynx, pectoralis major, anterior deltoïde , flexor fingers | | |
|--|--|--|
| Physiology: succión, mouth-hand, affectivity | | |
| Physiology, schéma of flexion | | |
| | | |
| | | |
| Facial chain Super at birth | | |
| Carl at Diffi | | |
| junction brain faux / cerebellum tent, sphénoïd, ethmoïd, nasion, face muscles in relation with sub occipital muscles, longissimus dorsi, | | |
| to sup members : super spinatus, deltoid post, triceps, finger opening muscles | | |
| To inf members iliocostal, sacrolombir, lombar ponevrosis, sacrosciatic ligt, gluteus, harmstrings, soleos, flexor, plantar muscles | | |
| rnysio: balance the anterior chain, non verbal postural communication, opening to the outside world | | |
| Central chaîn | | |
| Axis of life | | |
| Sphénoid, pituitary, sinus cavernosis, ptérygoid muscles, ligt nuchaie,rectus abdominus, psoas | | |
| To sign moets - pectorans minor, epitomojas intastes, extenso ingrans, To inf mbers iliacus minor, epitomojas intastes, extenso ingrans, | | |
| Physiology: breathing and posture: péritoneum; digestion | | |
| Systemic approach | | |
| Attachement theory | | |
| Fight Harlow 1972: Learning and love: If the baby monkey goes first to the nurse provided with milk, if remains mostly attached to the nurse covered with a pul- fabric | | |
| We were not surprised, says Harlow, to discover that contact plays an important role in the emotional ties that bind mother and child, but we did not think he would win so totally on the food factor . | | |
| Imprinting | | |
| Lorenz demonstrated how incubator-hatched geese would imprint on the first suitable moving stimulus they saw within what he called a "critical period" between 13–16 hours shortly after hatching. | | |
| In child development, the term is used to refer to the process by which a baby learns who its mother and father are. The process is recognised as beginning in the | | |
| womb, when the unborn baby starts to recognise its parents' voices.[1] Bobies reactions | | |
| Cries as a signal | | |
| Smile as an interaction | | |
| Sucking as a relation | | |
| 3 phases (J Bowbly) The inner representation of this parent, child bond becomes an important part of personality | | |
| our earliest relationships become an important part of our lives, and that the internal working models guide us throughout future relationships. | | |
| children's behaviors can be best understood in terms of their adaptive value, they seek a full understanding of the entire organism-environment system, including physical, social, and cultural aspects (Hinde,1989) | | |
| | | |
| This 'transmission' of attachment patterns supports the idea of internal working models that extend into adulthood as guides for future relationships, secure base and internal working models with and adulthood as the secure base and internal working models are internal. | | |
| secure base and internal working insorte state and pay at important for in the development of relationships in infancy, emanood, and additiood www.personalityresearch.rel/papers/pendry.html | | |
| 3 phases of reaction | | |
| | | |
| rrotest: Ketusal contact, aggressive | | |
| Detachment: rejection of the mother | | |
| Bonding | | |
| Exchanges between inside and outside | | |
| Base for satisfactory experiences | | |
| Soff estim | | |
| Parents environment | | |
| Consequences on limbic system and brain stem | | |
| Psychosocial issues | | |
| Trimety, depression, psychosis | | |
| Pain | | |
| Ameliniques nociceptor fibers | | |
| A delta myelinic fibers rapid response | | |
| C any end there sensory information slower response | | |
| Spino thalamic way: thalamus somatosensory homeostasis Somato sensory Cortex | | |
| brain stem; substance grey emotional | | |
| C fibre: images of the body and emotions | | |
| Autonomic nervous sytem | | |
| Inatamus | | |
| Sonato sensorial cortex | | |
| Insecurity syndrom | | |
| during pregnancy | | |
| Unsaid psychological and cultural conflict leads to dysmenorea and sterility | | |
| During degranity: depression and psychic troubles, autonomic troubles | | |
| Source: Pour en finir avec la peur d'accoucher Josette Fort in les dossiers de l'obstétrique Octobre 2006 | | |
| | | |
| Phases 1 and 2 | | |
| Phases 3 and 4 | | |
| From activation to freedom | | |

| Modern Birth conditions | | |
|---|---------------------------------|--|
| | Collective dimension | |
| Parental stress and hyeractive mothers | | |
| Lack of the presence of the women lineage Preterm babies from 26 weeks of pregnancy | | |
| Generalisation of epidurals | | |
| Mothers lying during work | | |
| Pressure on the belly during work | | |
| Forceps C sections increase China M Odent | | |
| www.primalhealthresearch.com | | |
| | | |
| | Negative birth conditions | |
| Decompturity | | |
| Lack of familial environment | | |
| Medical interventions:forceps | | |
| Too long or too fast process | | |
| Birth complications Lack of bonding | | |
| Lack of boliding | | |
| Events | compromising needs from babies | |
| Unresolved prenatal or birth trauma | | |
| Insecure mother Emotional difficulties from parents | | |
| Bad environement (violence, noise, smoke, feeding, bonding) | | |
| Epigenetic consequences on next generations | | |
| Ocytocine adventure | | |
| | internet and a sure har de | |
| Eight: passive then active | irth process under our hands | |
| Work, presentation, orientation, expulsion | | |
| 4 phases of birth (S.Grof; B.Montaut) | | |
| Manual tissue listening | | |
| Position of ease Be still and know (Sutherland) | | |
| Vital forces help the Health present | | |
| s na notes a spine means presen | Other difficult births | |
| C sections as urgency | | |
| Cordons Instrumentation (forceps, ventouses, cuillers) | | |
| Utérine expression | | |
| Fœtals sufferings | | |
| a more contracted. | A demonstration and advantation | |
| Influence of genetic and enigenetic factors | Adaptation and plasticity | |
| Imbalance with the environement: stress | | |
| Separation with mother: stress | | |
| Change in their inner world | | |
| Adult brain: 2 layers: trauma memory of the past routine automat | ic pilot | |
| Mirror neurons and resonances | | |
| Alimur metroris anal resolution co | | |
| | When treatment is needed | |
| Birth difficulties | | |
| Respiratory or digestive troubles (colic, regurgitation, asthma, bronc | hitis) | |
| Nervous or dermatologic problems | | |
| Crying or behavioral difficulties | | |
| Lack of weight Attention desorders | | |
| Preventive approach | | |
| and the second se | | |
| | | |
| Babies as therapists | Non verbal relationship | |
| Preverbal transference and counter transference | | |
| Right to right hemisphere connection | | |
| Empathy and not sympathy | | |
| Let the child in us be present | | |
| | | |
| V | erbal relationship with parents | |
| Be aware of their feelings | | |
| Preverbal signs Asking questions in a way the parents can be open to share with the | r osteopath | |
| Don't ask too many questions | | |
| Feel the right way to be in touch with the baby | | |
| The first touch is the only one | | |
| Know when and how to finish a treatment | Ouestions | |
| | General approach of a todler | |
| In the waiting room | | |
| Don't be late | | |
| | | |

Be precise and short questionning with the parents Feel where and which position to treat the child Be precise and speek to the child with its own words General osteopathic treatment Symetry Axis Begin by the feet and come up to the head Global biomecanical examination Horizontal and vertical axis Systemic appreciation Vibratory fulcrum Patient examination Mobility Vibratory fulcrum Symétry along midline Reactions of the tissues Respiration; Diaphragms Emotions Birth process Somatic sensory system Not only the touch Informations from the skin, muscles and connective tissues Cortex: parietal portion Proprioceptivity in relation with eyes and ears Influence of sensory systems on cognitive development Key of motor development Coding locations and landmarks as different from self Active patterns regarding environnment Stimulating signals are electric impulses to the CNS Balancing and opening Conditions of motoric and sensorial developpement Central axis Grounding and opening Respiration Digestion Lateral chains and hands Proprioception Treatment process Non doing but being Looking for health present Vibratory fulcrum Midline and diaphragms Neutral including the nature Still Point Ignition process Treatment is: Health directing trafic Sources Osteopathische behandlung von Kindern Haug 2010 An osteopathic approach to children J. Carreiro 2003;Elsevier Biodynamic craniosacral therapy M.Shea 2002 L'aube des sens by E Herbinet and MC Busnel chez Stock L'aimer avant qu'ils naissent by J P Relier; Robert Laffont www.academie-osteopathie.org On tremulation E.Swedenborg; 1719 www.osteopathie-france.net www.osteo-chartrons.net www.frop.fr