

THERAPEUTIC PULSE

Summer 2011



UPLEDGER
INSTITUTE
UNITED KINGDOM

How long...?

It doesn't seem like 6 months ago that I was doing the last newsletter, but then we all seem to say/feel that about the rate of the passage of time... So here I am again, hoping to come up with some things that will be of interest to keep you updated about the last and the next 6 months.

RADICAL Changes!

You may notice a radical change to the list of courses for next year. We are going to run most of them from a Wednesday to a Saturday from now on (excluding the Advanced, London workshops and the Paeds 1 & 2).

Of course this will please some of you... and not others if it means an extra day away from clinic, however, the work is worth it! It helps me give a bit more support to the two little people in my life (and of course the other big one!). So we will try it out and see how it works. It could also mean a good Saturday night on the town and a day to recover before you go back to work / home!

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Plus

Book Reviews, New Products, Other Training Opportunities & the 2012 Workshop Programme

Enjoy!

Caroline & Al

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UIUK CST SYMPOSIUM

12 - 14 MAY 2012



Watch experts in action, learn new ways to apply these beautiful skills, get inspired, catch up with all the gossip from both sides of the pond, meet, network and socialise with colleagues old and new, find a workshop or two to challenge yourself....

This will all be possible at our **UIUK CST OLYMPICS** - I mean **SYMPOSIUM** (easier to get tickets for!) - next May.

**Book the dates in your diaries now:
12 - 14 May 2012 Central London.**

Keep an eye out for the full programme which will be finalised soon. There will be gems you do not want to miss!

What's coming up?

The **CST1** and **SER1** in London are the next courses, 14-17 October; after that there is a **CST1** in Solihull, 2-5 Dec, at a new venue: St John's Hotel, central Solihull near the NEC, Birmingham International, etc.

This is also where the **Therapeutic Imagery and Dialogue** will be held the same weekend. I am a bit worried about the (lack of) potential of the weather as Stan Gerome, the Florida sun bunny (not sure he'd call himself that), wasn't too happy with the cold week in February when he, so kindly, stepped in at short notice as Hank was unable to teach the Advanced 1. So to those coming: please bring sunshine and love in other ways... Stan really does have a way with the words of dialoguing and his WYSIWYG approach is inspiring if you want to get more skill when those SERs pop up. Solihull in December... Where else?

Practitioner Networking Directory

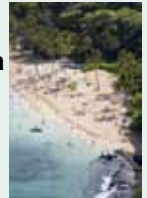
We have worked hard to get the Practitioner Networking Directory up-to-date. For those of you that don't know, this lists those who have done CST2 and beyond and are interested in the potential to network with others who have done courses at different times. The link to the online PDF will be sent in a separate email to students.

If you are on it and details are wrong or you are not on it and feel you should be, let us know. The benefit of having it online is that we can always make sure it is up to date. You may print it out – just please ensure it is only used for the purposes it is intended! If you would like an up-to-date printed hard copy please let me know.

'Beyond the Dura' in the US

19-22 April 2012

West Palm Beach, Florida



Fancy joining us (Al and the boys are coming too!) in Florida for the 2012 Ull conference?

They have titled it New Horizons of CranioSacral Therapy. While the final programme is not yet released, aims include celebrating Dr. John Upledger's 80th Year and the 30th anniversary of the first printing of CranioSacral Therapy.

This is the 11th International Upledger Beyond the Dura Research Conference and will be a reunion of elite CranioSacral Therapy practitioners and an expansion of thought processes and practical applications for CST. We are invited to bring our ideas, our hands and our desire for exploring the future of healthcare.

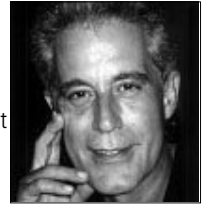
Be there or... get the report at our London

Symposium!

See www.upledger.com

Dialogue, Imagery, CST & Synchronicity

By Stan Jerome LMT CST-D



Synchronicity – experiential coincidences with meaning – abound in the use of Imagery, Dialogue and CranioSacral Therapy. Carl Jung, the eminent 20th century psychiatrist, and Wolfgang Pauli, Nobel prize winner in physics (1945), both realised the importance of this concept. Their relationship, which began as doctor-patient, developed into a lifelong friendship that united the two worlds of psychology and quantum physics. Together Jung and Pauli recognised synchronicity as being a level of reality where matter and mind are undifferentiated.

Here is a present day example: a former US soldier attended an intensive therapy programme for Vietnam veterans at the Upledger Institute clinic in Florida. Deep into a multiple hands CranioSacral session he saw himself walking through the jungle feeling kill-crazy, tired and confused. Through eyes burning with hate he saw a hole in the ground. Aware of the possibilities of mines, he cautiously approached the hole and peered deeply into the darkness. "That hole is a mile deep," he said, yet his instincts knew there was someone at the bottom. As his eyes adjusted to the darkness, he saw the vague outline of a young blond soldier. Fear struck at his core because he knew he had to save his comrade.

Without thinking twice he began to work himself downward, straddling the round walls that surrounded him. Inch by inch he slowly sacrificed himself to the depths of the earth until he eventually reached the bottom. There, injured and dying, was his fellow veteran. Placing him on his back, he began to carry his injured brother back towards the top. After some time he saw the first welcome ray of light. Too weary to carry his new friend any further, the soldier began to push him upward towards the dim light. Step by step, higher and higher, light growing brighter, they neared the top. Breathless and exhausted, he made one last effort and pushed the wounded soldier through the opening in the earth and into the light of day. He saved his fellow warrior.

After a period of silence the veteran opened his eyes, looked at his therapists and said "I felt like I just went into purgatory and the young blond soldier was me."

Following this and subsequent sessions the personality and pain symptomology of this man changed drastically.

Even his sense of humour, which had been repressed for 30 years, began to emerge. He took off his sun glasses so that people could see his eyes. He no longer felt threatened by those around him. His physical and psychic life had been totally modified. It was a tremendous synchronicity.

What is happening when we employ imagery, dialogue and CST?

When imagery, dialogue and CST come together, we seem to enter a level of consciousness where physical and psychic reality meet. In this case it allowed the Vietnam veteran to bring forth images from his non-conscious that saved him from purgatory. A profound decrease in physical pain and freedom from emotional guilt ensued; in essence his reality was changed. Jung called this transformative experience a 'synchronicity', a change in the psyche that produces a change in physical reality. As Jung also pointed out "it is the nature of synchronicity to have meaning and, in particular, be associated with profound activation of energy deep within the psyche. It is as if the formation of patterns within the unconscious mind is accompanied by physical patterns in the outer world."

It appears that the flow of imagery is a way for unconscious information to emerge into consciousness. An open dialogue with these images (finding out what they need and want to bring to us) can induce incredible change – a psychophysical restructuring.

F. David Peat, an investigator into quantum mechanical structure and quantum theory says, "it is as if this internal restructuring produces external resonances, or as if a burst of 'mental energy' is propagated into the physical world." This restructuring goes on to affect not only the individual but his relationships with family, friends, society, the earth, the universe and the creator. It is a kind of inner atomic explosion. But from where do these images unfold?

A reductionist might say they unfold from a network of chemical and neurological functions in the brain. Jung, however, hints in his writings at a deeper psychic where matter and mind are not separate and an ordered intelligence exists. He termed this level of reality the 'psychoid'. Peat explains the psychoid as containing matter and mind yet going beyond them.

These ideas may seem quite abstract. Yet they are also where Heisenberg, founder of Quantum Mechanics, believes the universe may have had its beginnings, where even fundamental particles themselves are 'realisations of underlying abstract symmetries'.

What practical purpose does all this have?

Imagine that a client, John, goes to a CranioSacral therapist for the treatment of back pain. Using the arcing technique (a way of finding active lesions in the body), the therapist finds a spot at T6. He asks if an image wants to come forward from that spot. John says, "Yes, I see a stone." Does the stone have a colour? "Yes, it's black". Does this black stone have a shape? "Um, it looks pretty round." How big does this black, round stone look? "It looks to me about an inch in diameter." Does this black round one-inch stone have a name? There's a quietening in the sessions and John softly says "Grief".

The image has now been personified. It has shown us its size, shape, texture and even given its name. The image now has all the elements that something in material existence has – even a life of its own. The therapist then asks permission to speak to Grief directly. Grief says, "Yes that would be OK." Grief, how long have you been in John's body? "A long, long time." How did you get in there? "John put me here." Does John know he put you there? "I don't think so but I tried telling him." How did you try telling him? "By making him uncomfortable at first then turning into pain."

John knows you are there now. Grief, do you have a reason for being there that you would be willing to share with us? "Yes, I've protected him for a long time from events in his life that he couldn't acknowledge at the time." How does it feel to have John acknowledge

you now? "It feels good." What would you like to happen next? "I'd like to be free." What would you need in order to be free? "I need for John to feel me as grief."

Turning the dialogue back to John we ask if its OK for him to feel grief. John says yes. As he gives his permission he begins to see a series of unpleasant past events that caused him a great deal of emotional pain. With these memories comes a corresponding softening of tissues at T6 as well as sighs and tears.

This softening of tissues is the dissolving of an energy cyst, a place where energy is stuck in the body. As the tissues relax, John's back pain also releases. The result is synchronistic. Through his acknowledgement of his grief John has allowed a change in the energy of his psyche, which also altered his physicality. We then ask Grief if there is anything else he needs right now. Grief says no. Asking John if he needs anything, John says, "I'm grateful for the information Grief has shown me". They thank each other and the session closes.

Small subtle releases may affect the whole body–mind function

Edward Lorenz, a researcher in weather patterns, offers a parallel known as the butterfly effect. He describes weather patterns as being so sensitive that even the slightest variable, such as the flapping of a butterfly's wings, might affect tomorrow's weather.

Peat uses the 'straw that broke the camel's back' analogy when describing small loads of weight that may eventually cause drastic effects resulting in the collapse of metals.

Dr H Peters, a biologist who explores phosphorous and plankton levels in lakes, believes that small modifications in a lake's normal phosphorous levels, such as may be caused by fertilisers and pollutants, can change the entire ecology of the lake.

And John E Upledger DO OMM, who has expanded the common mechanistic view of cranial osteopathy to include the release of emotions and blocked bodily energy, constantly says that less is more when dealing with changes in the craniosacral system.

Course Reviews

Dialogue, Imagery, CST & Synchronicity... cont'd

Synchronicities therefore may be extreme or subtle. What should be realised is that we are now expanding into a vast and wonderful paradigm that further unites psychology and physics. This view of the universe is not just dependent on Newtonian cause and effect, but rather on paradigm in which treatment may be looked upon as being an event as wonderful as the unfolding and enfolding of the universe itself.

This is a universe of unlimited potentials. It is a universe unfolding from a well of creativity. If we are willing enough to traverse deep below our own repressions, it is a universe where a new order may be found – a place where synchronicity dwells.

***Spend four days with Stan Gerome at
Therapeutic Imagery & Dialogue 1
2-5 December 2011, Solihull, West Midlands***

How The Brain Spoke

to Hermione Evans



I applied for this course with some trepidation, realising that it was almost 12 years since I last attended a CranioSacral course. I also thought that at my age, most of my peers having long since retired, spending so much money on one course, seemed a rather extravagant gesture. But on neither count should I have worried.

What was my motivation for applying? In truth I cannot say it was just for the benefit of my patients. If anything it was for my benefit, as it had been a long time since I had had anyone with whom to share treatments and at some deep level I felt the need to look after me. But I did also feel that my craniosacral skills were becoming limited; we had moved house to mid Wales and patients had been relatively thin on the ground. Bristol was relatively near to Wales. But there was also one thing that I did not take into my calculations: the Universe. The day I set off our son informed us that our eldest grandson had been diagnosed autistic. Would I learn something that would be useful for him?

Learn was indeed the operative word. There was much to learn. Not if you are a neurosurgeon perhaps, but for someone whose remembrance of the brain was definitely hazy, it was a struggle to retain all the information. My difficulty was not only knowing what all the brain parts did, but trying to envisage them as they snuggled together within the cranium. I found I would have my hands on someone's head and have no idea where the part of the brain to which I was supposed to be talking actually was. The assurance that intention was all, and that neuroanatomy could be studied later was not really a reassurance. On the 3rd day my left

hemispheric throbbed and felt as though it had been neatly severed from the right with not a left – right cranial connection in sight, the only conclusion that could be drawn was left cranial overload. When I complained to my husband that evening that the whole thing was one big fog, he suggested that perhaps it was my age and time to give up! A suggestion which I naturally refuted.

I started the 4th and final day somewhat dejected. Others talked about how they felt lighter and clearer. Was I the only one to feel confused and heavy headed? But then the miracle of the Upledger training took place: finally I moved from left brain to right brain, finally I connected and the headache cleared, finally I could feel and see the brain parts, finally I was beginning to remember what some of the parts actually did. And as I sat on the train going home, I became aware of a great sense of joy and well being, of excitement and anticipation at being able to use this new knowledge and of a mantra that kept repeating itself in my head: "Trust and obey, there is no other way. Trust and obey there is no other way..."

Yes this course is challenging. For me the most challenging course that I have yet done with the Upledger Institute. But it is one that I would not have missed. I was called upon to use my new understanding the very next morning and it was a joy for both myself and yes, you have, guessed, my patient. It seems absolutely right that a CranioSacral therapist, of all therapists, should have more than a hazy idea of the interior functioning and mechanism of the brain. I have no hesitation in recommending this course. But in the end when all has been mentally absorbed, the therapy, as ever, becomes a case of 'less is more' healing at a most profound yet simple level. Trust and obey.

The Brain Speaks workshop was held in May 2011

Reflections on CST1

by *Kathy Drake, DO*

Having trained as a structural osteopath, stepping into the hitherto unknown field of cranial osteopathy and CranioSacral Therapy has been a big change of direction for me. After years of bone crunching with the subsequent strains put on my own poor weary joints, I decided to seek out a more subtle approach, and have been on a rich and varied voyage of discovery since March this year.

I had originally decided to go down the cranial osteopathic route, and took the excellent College of Body Science's three day anatomy course in preparation for a 40 hour cranial osteopathic course the following week. Meeting Caroline Barrow and other Upledger trained colleagues, at the 'Inside the Cranium' course, I was impressed with their incredibly professional yet unintimidating approach that I was inspired to find out more about the organisation. I dutifully did my 40 hours in Leeds, which was pretty amazing, and then managed to squeeze in as a last minute addition to the CST1 course in London the following week. My husband was not amused, but I was hooked by this stage and needed more of my cranial fix!

I had no idea what to expect, having been ensconced with 40 osteopaths the week before, but I was not disappointed. The course was amazingly well run and

professional and everyone was so friendly. You would have thought my brain would have been saturated after so many hours of concentrated study, but I found it invigorating and inspiring, with not one dull moment. There was just the right mix of practical and theory and I really liked the way each technique was preceded by the relevant theory.

The course leader, Maggie Gill, was every inch the professional and she kept us engaged and entertained with a nice smattering of anecdotal examples to bring the subject to life. I still find it hard to get my head around how it was that the level of information was pitched in such a way that everyone seemed to be within their comfort zone, being not too overwhelming for those with basic knowledge, yet not too 'dumbed down' for those with more experience.

I really liked the structure of the 10-step protocol and the way we worked towards the finale of carrying out a supervised 10 step treatment on a fellow student. My highlight was having a year long shoulder problem released during my turn as a body!

I left the course with a far greater understanding and confidence in this area than when I arrived and I would highly recommend it to anyone. It has inspired me to go away and practice like mad in preparation for the CST2, when I'm ready. Thank you Upledger for putting me on this wonderful path.

Can You Help with Research?

Following the successful publication in the Journal of Alternative and Complementary Medicine (January 2011, 17(1): 13-17) of the outcome study that Rachel Harrison, John Page and colleagues carried out, Caro O'Neill and Rachel are keen to continue and expand on the research study.

What this means is that we are looking for anyone who has taken SER2 (or SER1 but regularly goes to a study group) to get involved. You would commit to taking the NEXT 10 NEW patients who come to you just for CST, asking them to complete a questionnaire before and after their series of sessions and sending these in when completed.

It's actually great practice to get into anyway. We are also exploring how we can look at the effects of CST with specific symptoms. Please contact Caro O'Neill to get involved: carooneill@btconnect.com

Smile

Smile, because it is impossible
To smile and frown at the same time!
A smile that reaches the eyes
Communicates
Love
Joy
Friendship.
It will be received with warmth
And returned
Multiplied.

Smile and open your heart
Celebrate the wonderful warm feeling
That it generates both inside
And on the outside.

Smile.
Never stop smiling!

Mary-Clare Armistead

Advertising & the CAP Code - Update

Advertising what we do: What has changed about what we can say?

As many of you will know, there have been recent changes affecting what we can and cannot say within our advertising literature – in particular, since March 1st 2011 what you put on a website is now under the same rules as what you may, and may not, put in written marketing communications.

What's new?

The Remit of The CAP Code

'All ads in the UK, wherever they appear, must be legal, decent, honest and truthful in line with the The British Code of Advertising, Sales Promotion and Direct Marketing (The CAP Code)...' so states the opener from the Copy Advice website. This Code is produced by the Committee of Advertising Practice (CAP) which is regulated by the Advertising Standards Authority (ASA). The Copy Advice website is run by the Committee of Advertising Practice (and is quite useful should you want to find out any more).

What has happened now is that the remit of the Committee of Advertising Practice has been extended to include digital advertising, so now as well as applying to:

- adverts in newspapers, magazines, leaflets, circulars, mailings, e-mails, text messages (including SMS and MMS), faxes and catalogues
- advertorials (advertisement features)
- posters & other promotional material in public places and ads within videos and DVDs;

from 1 March, 2011 it also includes:

- advertising and marketing communications on websites and social media, eg Facebook and Twitter
- online advertisements (including banner or pop-up adverts), paid-for search listings.

It does not apply to verbal communication, ie telephone calls or face-to-face conversations, press releases or editorial content in journals or books.

So how does this affect us?

We should all advertise our treatments in a professional and responsible manner that does not mislead clients. However, what the CAP code considers misleading is a little different from what many of us have long assumed.

Basically, to adhere to the CAP Code there should be no claims made that a therapy can/may treat or improve a medical condition, including pain, unless such claims can be substantiated with 'evidence'.

Ah, Evidence...

What does CAP mean by Evidence?

This is all about the evidence base, or research that shows that an isolated condition can be 'proven' to be helped by a particular therapy. This typically means that a study of sound methodology would have been published in a peer-reviewed journal; or, on being reviewed by a suitably qualified individual possessing relevant expertise, the data could be submitted to the ASA or CAP and considered acceptable as evidence.

Of course, there are many reasons why many CAM therapies do not have this sort of evidence... (a subject for another day?) (though it doesn't preclude us trying - see Can You Help with Research - p.6).

So what can we say?

It seems to be accepted that our therapies can relax, improve mood, reduce stress and the like. See the Copy Advice website for more info. It is the claims about specific conditions they are concerned about, from the point of view of misleading the public.

First, be aware that these bodies are not proactively looking for advertisers who are breaching the CAP Code. They are not a legal body who can threaten legal action. They are not attempting to regulate practice, just advertising material and would investigate only in response to an official complaint. In short, if a complaint is made about something you have in you advertising communication you would generally be asked to remove the offending material / claims / statements etc. Assuming you complied there would be no further action.

More info: Copy Advice: www.copyadvice.org.uk
Advertising Standards Authority: www.asa.org.uk

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My Introduction to Angelman Syndrome

Ann Margaret Whittle CST MCSS

Angelman Syndrome is a rare condition characterised by severe learning difficulties and unsteady, jerky or trembling movements. It is caused by a variety of disorders related to chromosome 15.

It was a British pediatrician who first described the syndrome in 1965. People with AS are sometimes known as 'Angels' because of the syndrome's name and because of their innocent, smiling and happy appearance.

Epilepsy occurs in about 90% but may improve with age. There are severe development delays and the children are usually slow to walk, often not until 3-4 years of age.

I have had the privilege of working with Miklos, his courageous mother and his patient, gentle and mature brother Marton for the past six months. His mother has worked tirelessly to improve his condition, finding every possible therapeutic experience for him and alarmingly having to have him hospitalised with epileptic fits until the medication could be appropriately adjusted.

Working CranioSacrally with Miklos has been an experience I will never forget. He first came when he was just three and was placid and compliant. He would immediately go into still point and as we played on the floor with the toy box he would lean onto me and sometimes just relax or go to sleep while I held him. Immense heat manifested as I worked with a pronounced frontal override but generally he would use the time with me to work at his own pace in his own way. He had no strength in his legs and could not stand. His mother was very realistic and said without any self pity 'he will always be a baby'.

His craniosacral rhythm was originally quite weak particularly in the legs and feet and as that improved the correlation with his ability to stand, pull himself up and begin to walk, supported with his mothers hands, was very moving to watch. The literature does state that walking generally improves between 3-4 years and here we are now at three and a half - and it certainly has.

What I have observed, however, is the pronounced correlation with that ability to manifest physical strength and the robustness of the CSR, especially as it has gradually strengthened in the legs and feet.

Please note that I am making no claims here. I have merely observed and am stating the fact. I wish that beautiful and gentle family all good things as they return home this summer.

To whom it may concern...

from Philip Wragg, April 2011

I am 63 and have suffered from low back trouble since age 28. This compounded in the neck and shoulder area by helping my 30 year old disabled son Tom (who has a head injury from a car accident 10 years ago and is wheelchair bound) move around.

About 4 years ago I heard about CST and began receiving treatment, initially every week. Through these treatments my mobility has improved so that I now see my therapist only every 5-6 weeks - and only then if I have overdone it!

Given my own positive experience my therapist, along with other colleagues, has also worked on Tom over the last 3 years with quite exceptional results. Their treatment has triggered a sea of change in his mobility such that he can now use his right arm and hand. Poor circulation in his right leg has improved dramatically as has his balance; he can now walk up to 100m with relatively little support.

His general physical and mental wellbeing, confidence and speech have also improved greatly and continue to do so. In short CST has transformed both our lives and I can wholeheartedly recommend it, from specialists properly trained and accredited.

Thanks to Sheila Hoy for passing this on.

The Butterfly Bone - the Sphenoid *part one*

By Caroline Barrow

Previous articles have looked at the intricacies of a few bones of the skull. I wonder if you have a favourite? While the maxilla and temporals are up there, the sphenoid is also often favoured for its delicacy and butterfly-like beauty. Its greater and lesser wings flare out from a central body and the delicate pterygoid processes point downwards, as anchors for the palatines of the back of the hard palate. See what you think...

One of the key reasons many people working with CranioSacral Therapy love this bone is because it is a linchpin in the cranium: it articulates with all the other cranial bones. In addition to these (the frontal, temporals, parietals, occiput and ethmoid) it meets the vomer, the palatines and the maxilla behind the hard palate, and the zygoma in the lateral part of the orbit. Cranial osteopath Dr Sutherland, first described the variety of 'lesions' it can get into, ie the different directions it can very subtly twist or be twisted into and the effects it can have on its neighbours if this occurs – or of course the effect its neighbours can have on it! As we will see shortly there is so much going on in, around and through this bone that working with it can have quite an effect.

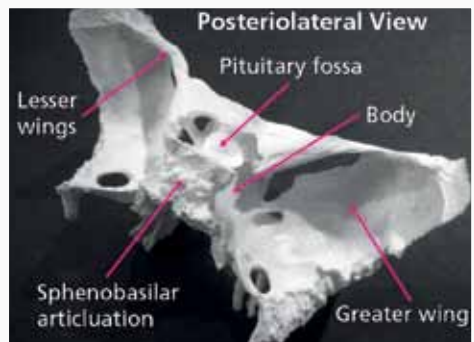
The easiest place to start looking at it is from inside the cranium. You see the curves of the greater wings as they make up part of the middle fossa of the cranial floor and the body in the midline with its rectangular bumpy surface for articulation with the occiput at the sphenobasilar junction. This is a synchondrosis, or a fibrous joint that ossifies by the mid 20s or so; it is also a joint that causes some to question how the sphenoid can have any even slight movement from the osteopathic/craniosacral standpoint, but that is a topic for another day!

Most of the lateral side of the greater wing articulates with the squamous part of the temporal bone, the very top part reaching up to the parietal, while the more posterior edge aligns with the petrous part of the temporals.



Anterior midline (at the front, in the middle!) is the articulation with the delicate ethmoid, which extends inferiorly a cm or two, ('into the page' in the image above) as these bones make up the roof of the nasal cavity.

One delicate feature of this bone is the lesser wing. This is a very thin piece that reaches out sideways from either side of the body, making up the very back part of the anterior cranial fossa (front top shelf in which the brain sits) articulating with the frontal bone as it does so. When you look at many models it appears as if the lesser wing joins the greater at its outer edge, but in fact in life the connection between these two is made by the frontal bone. There is a large hole between the greater and lesser wings which we will look at next time.



The inward curving ends of the lesser wing attach the tentorium cerebelli, one of the big sheets of the dural membrane which slides in between the underside of the temporal lobe of the cerebrum and on top of the cerebellum, as do two upward pointing pieces at the back section of the body. They are called the anterior and posterior clinoid processes.

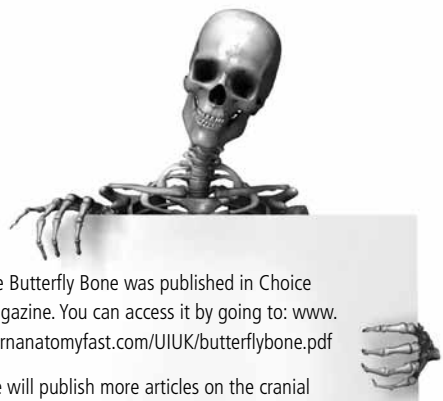
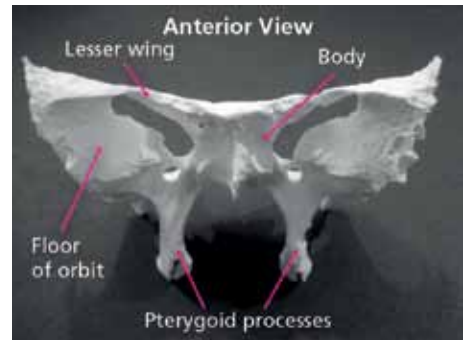
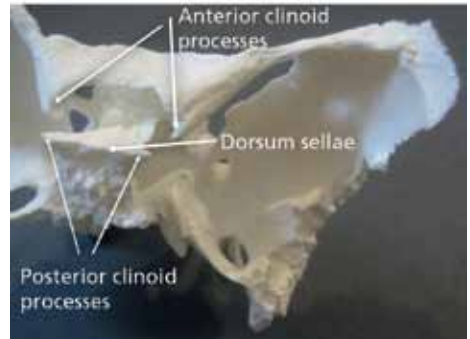
The central area is called the body of the sphenoid and is also full of features. Inside the bone itself are two holes, separated by a septum: the sphenoidal sinuses. Lined with mucous membranes like the other sinuses in this area – we saw the maxillary sinus last time and they are also present in the frontal bone and ethmoid – it has a tiny hole from it allowing it to drain into the upper nasal cavity.

In the middle of the body of the sphenoid is a dip or fossa called the sella turcica or pituitary fossa in which the pituitary gland sits. There is a small rectangular chunk of bone that sticks up at the back of this known as the dorsum sellae; this is the piece those posterior clinoid processes come from.

Looking from the underside of the skull you can see the two pterygoid ('ter-a-goid') processes hanging down, each splitting into a medial and lateral pterygoid plate to which attach the medial and lateral pterygoid muscles of..... the TMJ. So here is another strong connection to another bone, the mandible, albeit through muscular attachments. These two pterygoid plates are also important for a connection with the palatines which is a more complex arrangement but just make a note of their position for now and if you really want to know more about that then let me know.

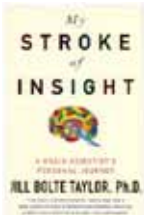
I know I've missed a few but those are the main features of the bone – next time we will take a look at what passes through the number of holes within and between it.

Part 2 next time.



The Butterfly Bone was published in Choice magazine. You can access it by going to: www.learnanatomyfast.com/UIUK/butterflybone.pdf

We will publish more articles on the cranial and facial bones as time goes on and you can also see them in colour on the weblinks: www.learnanatomyfast.com/UIUK/articles.htm



My Stroke of Insight

by Jill Bolte Taylor

My Stroke of Insight is an extraordinary tale from a neurophysiologist who experienced a stroke and was cognisant most of the way through it. We talk about the different 'functions' of the left and right brain on day 1 of CST1, and remind people of the usual left brain logic, linear thinking, and the right brain creativity and insight: she experienced the latter without the 'encumbrance' of the former. What a fascinating read.

Jill actually lost the use of her left brain due to a huge haemorrhage, yet survived the stroke (it took 8 years to regain its function). Without the left brain control of language, logic and reason she lived for a while with a natural seemingly hardwired connection to universal consciousness.

'The right brain processes everything in parallel so puts you in touch with your connection to everything; the left brain processes in series to give us the 'I am' which keeps us separate from each other. Her insights are incredible and, not being too long a book, is well worth the time. You can also see her present a short talk on TED.com.

My Stroke of Insight is published by Hodder & Stoughton 2008



Moving Forward

by Mary-Clare Armitstead

Mary-Clare Armitstead (or Scragg - one of our CST alumni!) has had a book published called Moving Forward. It is a poetry anthology of her rollercoaster ride through a tough time in her life, when her marriage broke down, her daughter wanted to leave home and her house was flooded. She discovered a need to express ideas which turned into a compulsive desire to write and now she is sharing her whirlwind exploration of life's changes.

As you would expect from a CST practitioner (also a qualified osteopath), she displays a lightness of touch to her prose and the poems are not high brow or difficult to grasp. She doesn't pretend to be a psychologist or counsellor but simply offers up her reflections on the commonplace and mundane as a way of showing how her path was mapped through the pain of her experiences. And best of all, that path ends in joy.

Moving Forward is published by Vanguard Press 2011 £7.99

I'm in love

With my walking boots!
Whenever I put them on
I feel so happy
It's infectious
It brings a grin to my face
And a warm glow inside
It all started in the desert.
My long trek,
My walk from my past to my future.
My sense of accomplishment
With all the walking
Myself belief -
I can do this
I can walk
I can handle life
My boots are now my best friend.
They have accompanied me
on my walk.
On my way
Seen me safely though
Protecting me
Supporting me
Guiding me, cushioning me,
I associate them with
good feelings and good times
Warmth, friendship, love.
They have started me walking
At home
Over the fells, the beach, the fields
Through becks and over bridges
Watching spring unfurl along the way.
Celebrating new beginnings
Lamb
Blossom
Birdsong.
Now each day
I put on my boots
I relish the feeling they create in my core
I give thanks that I'm alive,
I smile...
And I tell my boots that I love them.

Mary-Clare Armitstead

Product News

New - Dural Membrane Models

Got some of these in, they got bought, so got some more. They are a great model of the cranial dural membranes. While simple they are quite elegant and help give a 3-D sense of the structures we are aiming for in our cranial techniques.



They also fit neatly inside our painted skulls to help you understand more of the anatomical realtions. And you know how excited I get about such things...



Membrane Model: £25

Painted Skulls: £135

Human Body Cube



These are just fun. The 'cube' consists of 8 small cubes, which are covered with quality, rip resistant synthetic paper. You can't help but play with it to find all the well labelled pictures of the different body systems. They include

Cost: £6.50

the anatomy of the bones, muscles, nerves, digestive system, urinary system, heart, blood vessels, lungs, eye, ear, skin, teeth and womb... all very cleverly fitted together.

All this, and more, available on the website's Shop for Resources pages!



And while you're online... find us on Facebook as... Upledger Institute UK

Personalised Leaflets

We now have the standard Discover CranioSacral Therapy leaflets available. We have redesigned them to enable you to personalise them on the back with your own clinic and contact details. You can order them online on the Shop for Resources --> CST Related Products page or contact us for an order form.

We also have the Discover CranioSacral Therapy for Children leaflets in a matching design but different colour for those of you who have taken the Paeds classes.

Prices:

£15 for 50

£25 for 100

£45 for 200

plus postage

of £1.75

per 50



Gift Vouchers

Gift vouchers are available on the website for £5, £10, £20 & £50.

Put them towards any products or courses.



Quiz-tastic...

Tried the quizzes on CST1 & 2 yet? Good prep before coming on the next class, to a study group or as a reminder.

Go to **www.upledger.co.uk**, the **Finger on The Pulse** page and see how you do!

Current Study & Networking Group Leaders

Group Leader	Location	Telephone	Next meeting
Nikki Campbell CST MCSS	Marlow, Bucks	07989 416237	23 September 2011
Jo Crill CST MCSS	Wandsworth, London	020 8874 9601	By request
Fiona Gilbraith CST MCSS	Perth, Scotland	01738 551682	18 September 2011
Maggie Gill CST MCSS	Rottingdean, E Sussex	07967 046943	TBC
Joe Gore CST MCSS	Redruth, Cornwall	01209 315701	22 July 2011
Rachel Harrison CST MCSS	Edinburgh, Scotland	0131 6698966	4 September 2011
Janet Hiller CST MCSS	Abbots Langley, Herts	01923 265370	18 September 2011
Sheila Hoy CST MCSS	Banbury, Oxfordshire	01295 780027	22 July 2011
Mags O'Brien CST MCSS	Telford, Shropshire	07939 049218	9 October 2011
Carolyn O'Neill CST MCSS	Holsworthy, Devon	07717 400152	7 October 2011
Kiera Petersen CST MCSS Contact: Gloria Vahid	London	07788 598212	TBC
Mary-Clare Scragg CST Contact: Chris Langham	Ulverston, Cumbria	01768 774601	August 2011 - TBC
Maggie Silverston	Andreas, Isle of Man	01624 816807	TBC
Lesley Stratton CST MCSS	Pixley, Herefordshire	07957 435276	TBC
Carol Wells CST-D MCSS	Long Ashton, Bristol	01275 463769	10 September 2011
Ann Whittle CST MCSS	Frimley Green, Hants	01252 834784	By request
Rob Williamson (N)	Chelmsford, Essex	01245 283251	14 August 2011

There is a very reasonable charge of £15-£25 depending on the length of the meeting and often a prearranged topic for discussion and practice. Networking Groups (N) are led by those who have experience in leading groups but have not (yet!) done their techniques exam. An updatable list of the dates, locations and topics of the groups they are holding (as far as I have been let know!) is on the 'Training Calendars' page of the website but I have included those I know about above. Please just let the group leader know in advance if you are coming.

We really do encourage you to get in touch and get involved, both to support the leaders who are giving their time and to support your own practice and development – it would be a rare thing not to learn anything or gain from getting stuck into a session.



Other Training Opportunities

INTRODUCTORY WORKSHOPS

Want to lead them?

A few years back John did a course to train people up to teach Introductory Workshops. These folk run them periodically and they can be really useful for patients, friends and anyone else wanting some of the basics - as well as to those of us who have had the chance to assist on them and support our colleagues.

Recently there has been some interest in running another - are you interested too?

You must have done to Advanced 1 (or be doing the next one) and have your Techniques qualification - or at least have applied and be in process of it.

It is taught around an actual Introductory Workshop with a day before and a day after.

To register your interest or find out more just get in touch and I will start to pull it together.

REMINDER: Special Price Re-takes for Exam Bravehearts

Since the main thing for those taking the exam is to check their understanding of the work, their hand positions etc, there is also a huge amount of value in redoing the course as a participant.

I appreciate that this is different from TAing but if you are not able to get a TA slot quickly enough to suit your exam preparation we are offering a **special retake fee of £200** (instead of the usual £300) but which will also include some time with a qualified TA to ask any specific questions and help you out personally.

This is only available for CST1 & 2 to those who have committed to the exam process and does not mean you will be taken off the TA waiting list. Book online selecting the deposit amount as the fee or get in touch to sign up.

UIUK-Overseas & TAing Opps*

Please get in touch with John Page via eastercottage@live.co.uk



CST1 Wrocław Poland 28 Sep - 2 Oct

CST1 Athens 29 Oct - 1 Nov

SER1 Athens 3-6 Nov*

CST for Paeds 1 Wrocław 9-12 Dec*

CST2 Wrocław 9-13 Jan 2012

CST1 Cape Town 4-7 Feb 2012

CST2 Jo'burg 9-12 Feb 2012

CST for Paeds 1 Jo'burg 25-18 Mar 2012*

MERIDIAN COURSE Developed & presented by Carol Wells



**24 & 25 March 2012
Long Ashton, Bristol**

This two day workshop is designed to enhance your basic knowledge of the meridian system and enable you to have a deeper understanding and viewpoint of this system to use with CranioSacral Therapy.

There will be a lot of practise work interspersed with relevant information and knowledge for you to use and try within your work. It is particularly useful to use with whole body evaluations and regional tissue release.

The practical work will be demonstrated and taught in simple units alongside associated body energy work and understanding your own Qi (energy) using meridian stretches and meditation.

The workshop will be conducted in an enjoyable learning environment.

COST: £150 to include lunch.

Handouts, including a full colour Chinese clock, will be provided. For information on accommodation, venue & further details please contact Carol Wells on 01275 463769 or carolwells@yahoo.co.uk



College of
Body Science

LOVE ANATOMY

No Basic Anatomy, Physiology and Pathology?

Join our specialised **Intensive Certificate Course**, designed for the CST therapist. We cover the basics of all the body systems, give you a good selection of the pathologies to start you off (there are always more to learn as you come across them in clinic) and make sure you have specific A&P for the cranosacral system. It is intensive and full on, requires a fair amount of home study too, but gives you a great grounding and framework to build on over the years. It is also great for those people who did their basics a few (...) years ago and may feel a bit (or alot!) rusty. Includes some time in the Dissection Room and an exam.

Intensive Certificate	4 - 6 October, 15 - 17 November 2011,	Axbridge	£850
A&P Course (12-days)	10 - 12 January, 7 - 9 February 2012	& London	

Have Some, Want More?

Our other courses are designed as post-graduate courses for those who have at least a basic A&P understanding, as well (usually) as past masters who want to refine and polish their knowledge. At the end of it people really do feel much more confident in their understanding, their ability to visualise structures in 3D and to apply the knowledge to what they do with their hands. They do what they say on the tin and the up-coming ones are:

Know Your Nerves (2-day)	24 - 25 July 2011	Launceston	£195
Know Your Neuroanatomy	14 - 15 September 2011	London Bridge	£220
Musculoskeletal Day in the Dissection Room	21 November 2011	London Bridge	£135
Inside the Cranium	7 - 9 February 2012	London Bridge	£350

I can honestly say that people who come on these courses generally have a great time, learn a *lot* in a small amount of time (did I mention they are intensive?), understand it *in relation* to what they do and get inspired enough to go back to the books themselves.

Hear it, see it, feel it, learn it, know it... and all that jazz.

***'Caroline is possibly the best anatomy teacher that I have come across ever!
The course was wonderfully informative, helpful and challenging.'***

(A quote from an email after a class I taught last year - however do bear in mind that she doesn't specify how many other anatomy teachers she's actually come across...!)

Interested? Questions? see www.collegeofbodyscience.com or call 0845 108 1088

You can also book via the upledger.co.uk website

Workshop Programme 2011/2012

Course	Date	Location	Fees
CST1	14 - 17 October 2011	London	£610
SER1	14 - 17 October 2011	London	£610
CST1	2 - 5 December 2011	Solihull	£610
Therapeutic Imagery & Dialogue 1	2 - 5 December 2011	Solihull	£610
CST2	9 - 12 December 2011	Perth	£610
Advanced 1	22 - 26 February 2012	Axbridge, Somerset	£1050 + accom
CST1	7 - 10 March 2012	Bristol	£610
SER2	7 - 10 March 2012	Bristol	£610
CST2	23 - 26 March 2012	London	£610
CST1	23 - 26 May 2012	Brighton	£610
SER1	13 - 16 June 2012	Bristol	£610
CST for PAEDS 1	29 June - 2 July 2012	Axbridge, Somerset	£610
CST2	11 - 14 July 2012	Bristol	£610
CST1	15 - 18 August 2012	Solihull	£610
CST2	24 - 27 October 2012	Brighton	£610
CST1	23 - 26 November 2012	London	£610
SER1	23 - 26 November 2012	London	£610
CST for PAEDS 2	25 - 28 January 2013	Axbridge, Somerset	£610

To book...

As usual, bookings can be made on the website or by contacting us for a registration form. Any questions just get in touch.

Got Your Finger on the E-Pulse?

Do remember to sign up for email updates if you haven't already as we are able to share more articles, ideas, blog updates and news a bit more frequently.

Finally... please keep the **Things to Blog About** coming, and thanks to those who have contributed so far. Check out what's there on the website when you have a moment.



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UNITED KINGDOM

Therapeutic Pulse

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