

Shawn K. Centers DO, FACOP Pediatrician Osteopathic Physician The Children's HOPE Center President,

American Academy of Pediatric Osteopathy

Integrative Pediatrics & Manual Therapies



OBJECTIVES

1. Understand the role of manipulative therapies in treatment of children

2. Define key aspects of manipulative therapies and their use

3. Understand the role of body based treatment in integrative care

4. Understand the physiological rationale for such treatment



National Center for Complementary and Integrative Health



Body Based Therapies Include:

- Massage/ Soft tissue manipulation
- Chiropractic
- Osteopathic
- Acupuncture
- Feldenkrias/ Movement Therapies
- https://nccih.nih.gov/research/statistics

Manipulative Therapies

• Soft Tissues:

 Involving manipulation of the dermis, fascia, lymphatic, muscles to effect changes to the body structure or physiology

• Hard tissues: Joints ligaments and their articulations

- Soft Tissue:
- Swedish Massage, Ayurvedic Massage, Counterstrain, Myofascial Release

- Hard Tissue: Chirpratic thrusting technque,
- Osteopathic HVLA, Muscle Energy

Medical Application of Manipulative Therapy

 Neuromusculoskeletal Medicine is that component of medicine concerned with implementing systems in understanding health and disease and managing patients. The practice of Neuromusculoskeletal Medicine and directs special attention to the structural aspects of body function and their role in all disease processes, along with those strategies prescribed and or administered to enhance homeostasis within the body unit.

Principles

- The body is a unit; the person is a unit of body, mind, and spirit.
- The body is capable of self-regulation, self-healing, and health maintenance.
- Structure and function are reciprocally interrelated.
- Rational treatment is based upon an understanding of the basic principles of body unity, self-regulation, and the interrelationship of structure and function

Impairment in Structure Causes impairment in Function

 Restrictive Barriers of Function can be treated (Removed) using manipulative treatment.

Technique Types

 Indirect: Move tissue away from restrictive barrier to relax muscles and decrease and reset motor neurons

 Direct: Move through the restrictive barrier and re-establish proper range of motion.

Barriers Of Free Movement

- Chiropractic: referred to as vertebral subluxation
- vertebral subluxation complex is a dysfunctional biomechanical spinal segment which is fixated altering proper structural biomechanics.

Osteopathic

- Somatic Dysfunction
- Somatic dysfunction is defined as impaired or altered functions of related components of the somatic (body framework) system. It can include the musculoskeletal, nervous, or lymphatic systems.
- www.nationwidechildrens.org/somatic-dysfunction
- <u>Glossary of Osteopathic Terminology" (</u>PDF). American Association of Colleges of Osteopathic Medicine. April 2009. p. 10. Retrieved 25 August 2012.
- Washington, K; Mosiello, R; Venditto, M; Simelaro, J; Coughlin, P; Crow, WT; Nicholas, A (October 2003). <u>"Presence of Chapman reflex points in hospitalized patients with pneumonia."</u>. The Journal of the American Osteopathic Association 103 (10): 479–83. <u>PMID 14620082</u>. Retrieved7 December 2012.

All Manipulation involves tactile kinesthetic stimulation

TKS is associated with increased production of

GH, IL2, VIP,

decrease in cortisol levels



- Facilitates weight gain in preterm infants
- Enhances attentiveness
- Alleviates depressive symptoms
- Reduces pain
- Reduces stress hormones
- Improves immune function

Field, T. (1998). Touch therapy effects on development. International Journal of Behavioral Development, 22, 779-797.

Over 14,000 Studies documenting effect of TKS

- Field, T. (1995). Massage therapy for infants and children. *Journal of Developmental and Behavioral Pediatrics*, 16, 105-111.
- Data are reviewed on the effects of message therapy on infants and children with various medical conditions. The infants include: premature infants, cocaine-exposed infants, HIV-exposed infants, infants parented by depressed mothers, and full term infants without medical problems. The childhood conditions include: abuse (sexual and physical), asthma, autism, bulimia, burns, cancer, dermatitis, developmental delays, diabetes, juvenile rheumatoid arthritis, posttraumatic stress disorder, and psychiatric problems. Generally, the massage therapy resulted in lower anxiety and stress hormones and improved clinical course. Having grandparent volunteers and parents give the therapy enhanced their own wellness and provided a cost-effective treatment for the children.

- Jones, N.A., & Field, T. (1999). Massage and music therapies attenuate frontal EEG asymmetry in depressed adolescents. *Adolescence*, 34, 529-534.
- •EEG asymmetry, specifically (greater relative right frontal activation,) is associated with negative affect. Depressed adults show stable patterns of this asymmetry. The present study assessed the effects of massage therapy and music therapy on frontal EEG asymmetry in depressed adolescents. Thirty adolescents with greater relative right frontal EEG activation and symptoms of depression were given either massage therapy or music therapy. EEG was recorded for three-minute periods before, during, and after therapy. Frontal EEG asymmetry was significantly attenuated during and after the massage and music sessions.

- Hart, S., Field, T., Hernandez-Reif, M., & Lundy, B. (1998). Preschoolers' cognitive performance improves following massage. *Early Child Development & Care*, 143, 59-64.
- Preschoolers were given WPPSI subtests, including Block Design, Animal Pegs and Mazes, before and after receiving a 15-minute massage or spending stories with an experimenter. Results revealed that Performance on the Block Design improved following massage, and accuracy was greater on Animal Pegs in the massage group, particularly in more temperamental children.
- Hernandez-Reif, M., Field, T., Largie, S., Diego, M., Manigat, N., Seoanes, M., & Bornstein, J. (2005). Cerebral palsy symptoms in children decreased following massage therapy. *Early Child Development and Care*, 175, 445-456.
- Twenty young children with cerebral palsy recruited from early intervention programs received 30 minutes of massage or reading twice weekly for 12 weeks. The children receiving massage therapy showed fewer physical symptoms including reduced spasticity, less rigid muscle tone overall and in the arms, and improved fine and gross motor functioning. In addition, the massage group had improved cognition, social and dressing scores on the Developmental Profile, and they showed more positive facial expressions and less limb activity during face-to-face play interactions.

- Escalona, A., Field, T., Singer-Strunk, R., Cullen, C., & Hartshorn, K. (2001). Brief report: Improvements in the behavior of children with autism following massage therapy. *Journal of Autism and Developmental Disorders*, 31, 513-516.
- Twenty children with autism, ages 3 to 6 years, were randomly assigned to massage therapy and reading attention control groups. Parents in the massage therapy group were trained by a massage therapist to massage their children for 15 minutes prior to bedtime every night for 1 month and the parents of the attention control group read Dr. Seuss stories to their children on the same time schedule. Conners Teacher and Parent scales, classroom and playground observations, and sleep diaries were used to assess the effects of therapy on various behaviors, including hyperactivity, stereotypical and off-task behavior, and sleep problems. The children in the massage group exhibited less stereotypic behavior and showed more on-task and social relatedness behavior during play observations at school, and they experienced fewer sleep problems at home.
- Field, T., Lasko, D., Mundy, P. & Henteleff, T., Kabot, S., Talpins, S. & Dowling, M. (1997). Brief report: Autistic children's attentiveness and responsivity improved after touch therapy. *Journal of Autism & Developmental Disorders*, 27, 333-338.
- •22 autistic preschool children who had attended a special preschool half days for 2 years were assigned to 2 groups, touch therapy and a touch control group. Touch aversion decreased in both the touch therapy and the touch control groups, off-task behavior decreased in both groups, orienting to irrelevant sounds decreased in both groups, but significantly more in the touch therapy group.

- Hernandez-Reif, M., Field, T. & Thimas, E. (2001). Attention deficit hyperactivity disorder: benefits from Tai Chi. *Journal of Bodywork and Movement Therapies*, *5*,120-123.
- Thirteen adolescents with Attention Deficit Hyperactivity Disorder (ADHD) participated in Tai Chi classes twice a week for 5 weeks. Teachers rated the children's behaviour on the Conners Scale during the baseline period, after the 5 week Tai Chi session period and 2 weeks later. After the 10 Tai Chi sessions the adolescents displayed less anxiety, improved conduct, less daydreaming behaviours, less inappropriate emotions, and less hyperactivity. These improved scores persisted over the 2-week follow up (no Tai Chi period).

•What if the functional restriction or barrier occurs at birth?

Highly Associated With Initial Birth Trauma



Autistic children are 12 times more likely to suffer birth trauma or complication than their non-autistic siblings.

A British study reported on high rates of autism in one specific hospital near London. This hospital had an autism birth rate 21 times higher than that of neighboring hospitals. It was the policy of this hospital to schedule all mothers for elective Csections one week prior to their due dates.

• Osteopathy

• Osteo---gr. Structure of the living organism or structure of life

• Pathos---gr. Deep force within the organism which causes blockage or "suffering" in all aspects of ones life

Birth

- Is the process of
- coordinated,



 efficient, involuntary contractions that lead to progressive cervical effacement, dilatation, descent, and delivery of the new born baby

All Births Are Not Ideal

- Poor maternal nutrition
- structural inadequacies before pregnancy
- drug use
- psychosocial stress
- inadequate preparation for labor
- inadequate first breath secondary to anesthesia use

But What If

- The process of birth is not a
- coordinated
- efficient
- natural



What if the LABOR IS

Prolonged

complicated

difficult



In both a a cesarean section and a vaginal delivery and infants neck can be hyperextended. Strained muscles and connective tissue can compress the blood vessels and nerves



Marland

During a normal delivery

- As the head descends into the pelvis the pubic bone exerts pressure on the presenting part of the skull
- If these forces exceed the limit of the tissue the baby's head may become strained. If these strains are not treated they become dysfunction.



In both a a cesarean section and a vaginal delivery and infants neck can be hyperextended. Strained muscles and connective tissue can compress the blood vessels and nerves



Marland

Soft Tissue Strains



The soft tissue which includes the covering of the skull can be damaged.

The connective tissue that connects one part of the skull to another and holds the brain itself can be twisted or strained

This will result in blood flow changes In the brain itself







Signs &

Symptoms

- Respiratory Problems
- Poor Suckling
- Irritability
- Sleeplessness
- Vomiting
- Eye Movement Problems
- Ear Infections
- Recurrent Infection

- First Born
- Prolonged labor
- Rapid Labor
- Induced Labor
- Multiple Labor
- C-Section
- High Risk Pregnancy
- Maternal Illness

Was there



DIFFICULTY IN LEARNING TO SUCK EFFECTIVELY CHILD CRY EXCESSIVELY INCONSOLABLY THROW HIS HEAD BACK OR **ARCH HIS SPINE** PREFER TO STAND IN THE LAP RATHER THAN SIT

THESE ARE SIGNS THAT TRAUMA HAS OCCURRED TO THE SOFT TISSUE OF THE BABY

IN A BABY ALL TISSUE IS SOFT TISSUE

At delivery the neck may be hyper extended upon the occiput base of skull) causing compression of the occiput (base of skull) on the atlas (first cervical vertebrae) and muscle imbalance affecting nerve supplies and blood flow to the brain






this may cause compression of the jugular foramen causing irritation to the vagus nerve and jugular vein which pass through this area





The jugular foramen which contains the vagus nerve and jugular vein which drain 98% of the blood leaving the skull is an area particularly vulnerable to injury



The fascia is the white covering over the muscles

If there was significant trauma the consistency of the fascia will be changed

it may cause the the problem to persist for years The vagus nerve is the longest of the cranial nerves.

Has branches that go to the :

EAR

HEART

GASTROINTESTINAL SYSTEM

AND DEEP IN THE BRA

THE AMYGDALA









Figure 1 Brainwaves in seizure, ADHD, and autism spectrum disorders

SEIZURE DISORDER

Left Temporal Lobe & Amygdala 30-100 cps (gamma waves)

HYPERACTIVITY/ ADHD

Frontal Lobe & Amygdala 10-14 cps (alpha waves)

AUTISM Frontal, Prefrontal and Temporal Lobes & Amygdala 1-7 cps (delta waves)

Vagus nerve dysfunction initiates :

GASTROINTESTINAL DYSBIOSIS



HYPERSENSITIVIETIES TO THE ENVIRONMENT INCLUDING SOUND PERCEPTION, ELECTROMAGNETIC FIELD REACTIONS

YEAST OVERGROWTH, DEVELOPMENT OF GLUTEN-CAESIN-SOY SENSITIVITY,

HYPERPRODUCTION OF NEUROTRANSMITTER SUCH AS SEROTONIN



TO LOSS OF RECEPTIVE (UNDERSTANDING) AND EXPRESSIVE (BEING ABLE TO SPEAK)LANGUAGE.

If fascia (connective tissue) is damaged during delivery

 The tissue becomes more solid resisting deformation or change in shape causing the nerve and blood flow problems to persist



When fascia is in a solid state

- Adhesions can form within the fascial layers themselves as collagen fibers become intertwined and glued to each other. This type of adhesions is called cross linkages.
- The underlying muscles conform to the shape of the fascia
- Muscles change their basal rate of firing (gamma gain)



- Animal studies show in order to change a fascial strain the tissue must be manipulated in a special fashion over a certain period of time
- Fast forms of ultrasound, physical therapy or massage will relax muscles but will not affect fascial tissue effectively . Therefore, underlying dysfunction will return.



- Because the fascia and muscle are responsible for positioning the bones in the body, restricted fascia will pull osseous structures out of physiological alignment, causing
- dysfunctional movement,
- breathing,
- low muscle tone
 dysfunctional posture
 patterns



When fascia becomes damaged as a result of a traumatic incident, its matrix twists, shortens and contracts; and in so doing,

- inhibits circulatory flow
- increases nerve stimulation
- decrease lymphatic return



Gentle Osteopathic Manipulation

 When muscles are placed in states of relative shortening and gentle sustained stretch is applied the fascia behaves more as a liquid. By moving in directions of ease we can allow the collagen fibers to unwind, and for adhesions to break



pressure gradient

- There may be as much as a 100mm/Hg difference in one side of the skull compared to the other during delivery.
- Further, these difference often cause the bony plates to override one another
- Instrumentation -forceps- and especially vacuum extraction can further cause changes in pressure gradients (vacuum extraction commonly causes bleeding around the dura)

Occipital Bone

- 4 parts at birth
- squamous 1
- basilar 1



- condylar 2
- articulates with the lateral masses



Jugular Foramen

- Anterior lateral to the condylar part between condylar part and petrous portion of the temporal bone
- jugular vein
- cranial nerve
- CN IX sucking
- CN X Vagus- Vomiting
- CN XI Torticolis



this may cause compression of the jugular foramen causing irritation to the nerves which pass through this area IX,X, XI **CN X vagus CN XI torticolis**





Nerves

- Hypoglossal N. passes between base and lateral masses
- involved in tongue movement and suck response
- compression may cause problems sucking, latching on, swallowing

First Breat

The progressive contraction and neck extension has profound significance in the initiation of pulmonary respiration. The respiratory activity associated with vigorous vocal activity of the newborn serves to expand the cranial mechanism restoring free physiologic motion. **Technique of Occipital Atlantal** (OA) Decompression

 two fingers at the base of the infant's skull between the occiput and the 1st cervical vertebra allowing the weight of the head to fall onto fingers.

 The opposite hand cradles the cervical spine. The technique is completed as the tissue under the two fingers is noticed to soften or relax.

Mechanisms of Birth Trauma

• 1 - Direct Trauma

• 2 - Hypoxic Imprinting of Tissue

• 3 Hypoxic Autonomic Dysrythmia



Direct Trauma

 Injury caused by passage through the birth canal, instrumentation, or sudden pressure changes as in caesarian section



The source of this injury is often fascia

- "We Begin with the Fasca and we end with the fascia"
- Fascia is the great organizer of the body





- Fascia consists of
- collagen fibers
- Bathed in a liquid bath called ground substance.
- Ground substance is colloidal.
- colloids-- have the unique ability to behave as either liquids or solids depending upon the forces applied to them



If fascia is impinged upon

- By a high velocity force over a short period of time
- Or held in a constant position for a prolonged period of time
- The tissue becomes more solid resisting deformation or change in shape



Hypoxic Imprinting of Tissue

 Distortion patterns in cranial soft tissue reflecting the position of the body in moments of relative hypoxia



Hypoxic Autonom Dysrythmia



- Hypoxic Autonomic Dsyrythma
- Autonomic dysfunction due to compromise of autoregulatory behavior associated with hypoxia
- fetal distress
- precipitated and maintained by membranous-cranial articular strain patterns





10 year old with symptoms of ADHD on 30 mg Ritalin

Progress over successive treatments

Entrainment Level Ratio



Osteopathic Studies

- 80% of exhibit dysfunction at birth
- Symptomatology of traumatic birth
- such as persistent
- vomiting,
- colic,
- torticolis,
- irritability
- newborns with skull asymmetry
- is often dismissed
- outward signs of underlying structural inadequacies



Otitis Media & Birth Trauma

 Studies by Henrieta Fallor, MD presented at the 3d International Conference on Otitis Media showed that those babies who experience malposition or trauma are three times more likely to have OM in first six months of life

 A posterior occiput and c-section were the greatest risk factors



Eustachian tubes in children are shorter and more collapsible any structure placing tension on the Eustachian tube will increase the likelihood of obstruction or reflux. -sucking dysfunction -temporal dysfunction pharyngeal tightness

Sucking Dysfunction

- Lack of breastfeeding
- separate muscular sequence is used by infants that breastfeed as compared to those that bottlefeed
- Irritation of the glossopharyngeal (CN IX) and the hypoglossal (CNXII) nerves resulting from compression of the jugular foramen and hypoglossal canal from trauma interfere with sucking

Irritation of CN XI

- Tight Sternociedmastoid
- prevents physiologic temporal motion
- ---techniques that address temporal bone mobility
- relaxation of the sternocliedomastoid muscle





KCOM

• 158 children



- children with any degree of plagiocephaly had a 40% increase incidence of otitis media in first 6 months
- children with three or more cranial strain patterns at birth had a 73% increase risk of developing

Research & Practice

- The difficulty with Osteopathic Research is it is difficult to design double blind studies without unethically withholding treatment from children who need it
- 100 years of Osteopathic practice has taught us that
- there are factors which place children at risk


Risk Factors

- First Born
- Prolonged labor
- Rapid Labor
- Induced Labor
- Multiple Labor
- C-Section
- High Risk
 Pregnancy
- Maternal Illness

Signs & Symptoms

- Respiratory Problems
- Poor Suckling
- Irritability
- Sleeplessness
- Vomiting
- Eye Movement Problems
- Ear Infections
- Recurrent Infection

Late Effects

- Hyperactivity
- Dyslexia
- Behavioral Problems
- Orthodontic Problems
- Scoliosis
- Learning Difficulty





Neurological Issues In Children

- <u>Research of The Osteopathic Center For</u> <u>Children -College Of Osteopathic Medicine Of</u> <u>the Pacific</u>
- Effects of Osteopathic Medical Management on Neurologic
 Development In Children JAOA92(6):729-744
- <u>Relation of Disturbances of the craniosacral Mechanism of the</u> newborn:study of 1250 infants JAOA65:1059-1075
- <u>Cerebrovascular Blood Flow Changes in the Middle Meningeal</u> <u>Artery Secondary to Cranial Osteopathic Manipulation in</u> <u>Children Int. J of Cerbrovascular Research 2001:1123-35</u>

• To find health should be the object of the doctor. Anyone can find disease.

The Osteopath seeks first physiological perfection of form



We look at it [the body] in perfec health which means **Section and** mony not in part, of the whole body.





www.osteopathiccenter..org