

Coccyx/Neck Procedure Saves the Day!

Christine began as a patient with me in August 2006. She was 55 years old at that time. She had a diagnosis of Meniere's Disease in 2001. When we began our visits, she was plagued by apparent Meniere's "attacks" that consisted of severe tinnitus, vertigo, nausea, and vomiting. These episodes could last weeks at a time. Heat could provoke them. They would occur unpredictably every few months. She was "on the edge" of an attack at her first visit. You can imagine that this had become a significant disruption to her life, including her very stressful work life.

Since I am a Naturopathic Physician, we spent several visits working on "basics" such as diet, detox, balancing hormones, and endocrine function. She had originally come to me for Microcurrent Treatments, an electrical modality that I occasionally use to address severe acute pain. She had heard somewhere that it might work for Meniere's. So we tried a few treatments, but saw no improvement.

A couple of months after her first visit, we started doing basic Bowenwork treatments and I learned she had a number of other issues, including especially painful, unstable knees that were problematic since birth. Sparing many details, after a few Bowenwork treatments, her current Meniere's "attack" that had been threatening resolved without fully manifesting. Over the course of the next seven years, her Meniere's was well managed with regular Bowenwork with no more attacks until...

In February 2013, Christine felt she was sliding into a Meniere's attack. It was probably her unrelenting stressors of several years duration coming home to roost, as well as some "off time" from Bowenwork treatments. We focused on her TMJ and also used some homeopathy, to no avail. The day after we did Advanced TMJ (which usually improves the tinnitus) her Mother phoned to say she was having a severe attack with vertigo and vomiting. I arrived at the patient's home about 90 minutes later. She was sitting on the edge of her bed vomiting into a bowl. She had been doing that for more than two hours. She was exhausted. She could not close her eyes because that made the vertigo worse which made the nausea worse. So she couldn't get any sleep. The slightest movement provoked more spinning, more nausea.

I helped her out of her jeans with some difficulty. I did something that remotely resembled the Coccyx/Neck procedure - I did the coccyx move with the patient standing (still clutching her barf bowl, no leg lock) and the neck move with her seated, using one hand to support her head and the other to do the move. She was able to recline at 45 degrees after these moves. Thirty minutes later, she was able, with assistance, to make her way to the bathroom. She was able to both urinate and have a bowel movement without vomiting. She was then able to sit in a comfortable chair and sip some fruit juice. She said the spinning was minimal and nausea receding. I phoned her friend who agreed to come and spend the night with her. I also asked her to bring some Dramamine should the whole syndrome threaten to repeat itself.

I checked with her the next day. She continued to improve. No vomiting since before the Bowenwork moves. Dramamine allowed her to get a good six hours of sleep that night and she was able to eat a little. We agreed that the Bowenwork moves seemed to have turned it all around. The next day she felt fully resolved and didn't need the Dramamine anymore.

The patient's friend phoned three days later to report she was having another attack but not as severe as the previous one. She took some Dramamine and felt it was helpful but had vomited twice in the last two hours. I arrived at her home in about 30 minutes. She reported that she was experiencing mild dizziness and nausea and had to be careful to move very slowly and keep focused on a single spot to avoid vomiting.

I was surprised that she was able to lie prone for the brief time required for the two Coccyx/Neck moves. She turned over from prone to supine after the moves and I supported her to rest at a 45 degree angle. She stated immediately upon settling that the dizziness was resolved. After a 20-minute rest, she stated that the nausea was resolved. This treatment was done at about 3 pm. I phoned her at 7 pm and she said she felt well into recovery and was able to eat a little.

She still suffers from variable levels of tinnitus that we "manage" with the TMJ Procedure. But to this date, she has not had a recurrence of these severe attacks. She was able to keep her travel plans to fly to California two weeks later and visit her son.

I had used the Coccyx/Neck Procedure a couple of times prior to this with minimal result. Watching her recover within minutes before my eyes, during both episodes, was truly remarkable. Bowenwork never ceases to amaze! I think the important thing I learned from this experience is to not conclude a procedure is ineffective because it has not worked in the past. Everybody is different and even the same body changes with time. Never give up and with Bowenwork it never hurts to try!

About the author: Dr. Joanne Hillary graduated with highest honors from the National College of Naturopathic Medicine in Portland, OR. She is a fully licensed medical practitioner in the State of Washington and serves on the Washington State Department of Health Naturopathic Advisory Committee which addresses statewide issues and policy in regard to the practice of Complementary Medicine. Dr. Hillary is also a member of the Washington Association of Naturopathic Physicians and the American Association of Naturopathic Physicians in addition to a number of other community and charitable programs. Dr. Hillary studied Bowenwork with Oswald Rentsch, Sandra Gustafson, Robyn Wood, Crystal McGraw, Jenefer Huntoon and Daniel Carter. Dr. Hillary practices in Spokane, WA. Her website is <http://hillaryshealth.com/index.html>