

## *Big Effort from a Little Body*

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Bonnie had quite a history for a three-year-old: diagnosed with hypotonic cerebral palsy, cortical vision impairment, a seizure disorder provoked by fever with systemic infections, seasonal allergies, and a circulatory disorder. She had already undergone two surgeries for ear and throat issues.

Bonnie's mother reported that her daughter was unable to control her head, turn or roll over, sit or stand, crawl, manage her body, arms, or legs, produce a bowel movement without medication, control her bladder, speak, or see. Allergens produced fever, which then brought on seizures. Her extremities would "go cold." She could not chew food. And she could not extend her legs. She was on nine medications for her many difficulties.

In Bonnie's first visit, symmetry differences were negligible at listening stations. Her body exhibited low tone with an extremely tight internal core system, as though in shock and depleted. She indicated much more extension than flexion palpable throughout her craniosacral system, but there was very little movement overall. Significant restrictions were found throughout her body, including the dural tube, diaphragm, and cranial vault.

My subjective observation of Bonnie's energy during evaluation and treatment was that she maintained 100 percent focus and presence in her body. She helped in every way she could to facilitate the bodywork just by the dynamic force of her will. She worked hard during the entire forty-five-minute session. Bonnie conveyed in her craniosacral rhythm, quite emphatically, that her inner healer helped her.

Bonnie maintained this level of focus in each of our five appointments. As soon as she exhibited any fatigue, we concluded her visit. This limited our treatment time to thirty or forty minutes each visit.

Due to her great spirit and the therapeutic input of CranioSacral Therapy (CST), I believed Bonnie would improve. I admit I was a bit surprised by how much she improved and how rapidly!

CST techniques applied included the 10-Step Protocol, arcing, energy cyst release, SomatoEmotional Release, global/regional tissue release, and silent therapeutic imagery and dialogue with her inner healer, using the significance detector method for yes/no answers. Flexion still points were performed at the ankles; this technique was taught to Bonnie's mom to perform twice daily for two minutes each time for the purpose of increasing the cerebrospinal fluid flow through the child's system.

Bonnie's mom reported that within two hours after the first appointment, Bonnie produced two huge bowel movements. This was the first time in her life she had produced a bowel movement without medicine being administered. The day following the first visit, the child straightened out her legs at school. The school called her mother asking that Bonnie be picked up because the teacher feared a seizure onset. She was not seizing, however. By the evening, Bonnie was attempting to push up with her legs to bear weight. By the third day following treatment, the mother noticed that Bonnie seemed to be expressing a personality—she asserted independence and individual preference. She became a three-year-old!

At our second visit, Bonnie's mother reported that Bonnie had been standing and bearing her weight regularly, and her bowels were still much improved without medicine. She also commented on Bonnie's continuing personality development. I remarked that Bonnie always expressed a determined will and strength to me by her cooperation in our work. Perhaps she became able to express herself outwardly because she gained some ability to move.

Over the course of the remaining appointments, Bonnie developed the ability to straighten and relax her legs at will. She could also grab and hold items with her left hand and arm, which made it obvious she had developed some limited sight. She turned to her side on the treatment table and controlled her arms, head, and body with the support of the table. She was able to repeat this at home. Bonnie produced tongue thrust and more head control. She began vigorous head shaking side to side when she especially liked something. By our final visit, Bonnie had improved control in all physical gains, and she attempted to push up into crawling posture by the end of the session.

Bonnie's father ultimately was transferred too far away for Bonnie to continue CST appointments with me. Unfortunately, CST was not available in her new area. I don't know what Bonnie's outcome will be or what further gains she can ultimately make. I do know that she really wants to improve and is very strong internally. It is my hope that this child continues to improve, and lives a full and joyful life.

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