

*Caution: These notes should be used in conjunction with the recorded interview. While every effort is made to ensure accuracy, APM cannot guarantee freedom from any errors. Treatment should be based on the advice given by the expert speaker during the interview. Please let us know if you find any errors in this text so that we can correct them.*

## A Visceral Approach With Jean-Pierre Barral

### About Jean-Pierre Barral

- Osteopath, member of the Registre des Ostéopathes de France, and Physical Therapist.
- Developer of Visceral Manipulation (VM); a modality based on organ-specific fascial mobilisation.
- Served as Chairman of the International College of Osteopathy at St. Etienne, France. Also served on the faculty of Médecine de Paris Nord - Université Paris Nord as Chief of the Visceral Manipulation Department - the first time in the world that a VM therapist was part of a medical faculty.
- Also developed Visceral Vascular Manipulation, Nerve Manipulation, and New Manual Articular Approach, in collaboration with Alain Croibier, D.O.
- Named by TIME Magazine one of the Top Healing Innovators to watch in the new millennium.
- Curriculum Developer for the Barral Institute where he has taught manual therapy courses based on his modalities since 1985. The courses are also taught by a certified team of International Teachers.
- Author of several books on Visceral manipulation, The thorax, Urogenital manipulation, Manual thermal evaluation, Trauma, Manual therapy, and Visceral vascular manipulation, among others.

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## Visceral manipulation

- The boundary between chiropractic and osteopathic approaches to visceral manipulation is now smaller. Efforts now are directed at bringing the two professions closer by focussing on their similarities. Both professions have the same goal to help people by employing similar approaches.
- In the UK, chiropractors and osteopaths cannot advertise visceral treatment because evidence that satisfies the Advertising Standards Agency (ASA) does not yet exist.
- With pragmatic studies, more evidence can be shown to the medical community about the benefits of the visceral approach to treating structural/health issues.
- Conventional doctors cannot simply integrate visceral manipulation into their treatment approaches because it challenges their understanding of conventional medicine.
- When the visceral manipulation course was offered in the '70s, half of those who enrolled dropped out because it was not osteopathy as they understood it. Since then, visceral osteopathy and cranial osteopathy have gained increasing recognition.
- Crohn's disease: visceral manipulation can help address the symptoms, not the disease per se`.

### Case 1:

- 18-month old baby admitted three times in the previous four weeks with severe bronchiolitis as a result of a respiratory syncytial virus - possibly with a brewing bacterial infection.
- On the first occasion, baby also had croup on top of the viral infection. Doctors considered but rejected an induced coma and ventilator.
- The baby required nebulizing and salbutamol to keep his airways open. Other than that, his medical treatment has been conservative.
- He was admitted again twice in 48 hours and ended up exhausted after 72 hours of accessory breathing with a tracheal tug and full and exaggerated rib excursion.
- Breath sounds are now clear and baby is off all medication, but his shoulders are still slightly elevated due to mild hypertonia of the accessory muscles. He is being described medically as a "happy wheezer."

**Notes and treatment approach:**

- A lot of infants are born with not enough surfactant in their lungs. Surfactant is a liquid made by the lungs that keeps the airways (alveoli) open. Contrary to the general notion that babies are fragile, they are very solid and easy to treat using osteopathic approaches.
- Most of the time, the problem is not the muscles but with pleura. The clinicians worked on releasing the pleura within the thorax and on its attachment to C7 and the first rib. They also released the subclavius muscle, the conoid ligament and the trapezoid ligament to free the shoulder.
- The clinicians then decompressed the ribs to improve circulation and worked on the arterial and venous pulmonary system, and lymph system (i.e. thoracic duct). This all helps to address inflammation around the alveoli.
- An oximeter is useful to measure the peripheral oxygen saturation in the blood and the pulse rate. Compare the oxygen levels before and after applying manual techniques.

**Other relevant notes:**

- For patients with back pain, check the ribs, lung and heart. Work on atrial fibrillation has been quite successful with the aim of helping to avoid a transient ischemic attack. Take the blood pressure and pulse of both arms – note whether there is dysrhythmia or arrhythmia.
- Research endeavours to examine how osteopathic approaches might be useful to treat heart and brain issues.
- Osteopaths should use their hands as much as possible to feel what's going on in the patient's body i.e. more than is shown in x-rays.

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**Case 2:**

- 29-year old nurse, single mother of two, one born by C-section, the other vaginally, presenting with mid-right episodic back pain which moves around and is not easily reproduced in the clinic.
- Abdominal pain in the right lower quadrant, acute on palpation around the ileocecal valve. Appendix removed as a child.
- Night sweats (red flag) but apart from being stressed she describes herself as very healthy.

### Notes and treatment approach:

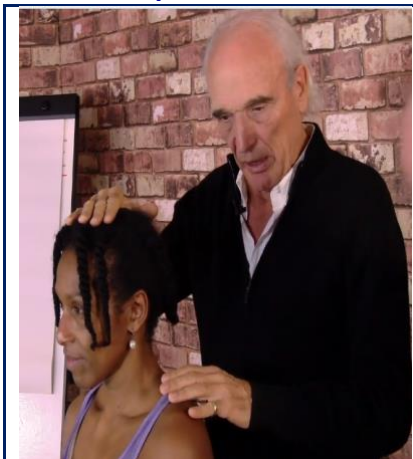
- Check the inguinal area; nerves in the inguinal canal may be tight or compressed.
- Listen to the patient's body - match your assessments with what the patient says about his/her condition. Use your hands to palpate.

## Visceral manipulation in practice

*Demo - from 29:00 to 42:33 in the broadcast recording*

### Approach for a new patient

#### 1. Feel the patient



- Listen to the patient's body. Palpate and try to collect the information the body wants to communicate through your hands. Do this with the patient either standing or sitting.
- Check for tension or any fixation in the body. Speak with the patient about his/her symptoms *after* you have done your assessments. This way, you will be totally focussed on what the patient's body is saying.

#### 2. Palpate the skull, hands, and feet





- Check the head again, this time with the patient supine. Any tension on the right means possible issues with the teeth, sinuses, or face.
- Check whether there is a difference between the two hands / two feet.





- Check the skull for tension in the trigeminal nerve.
- Release the palatine nerve first, this helps release the trigeminal nerve.

### 3. Palpate the inguinal area

	<ul style="list-style-type: none"><li>• Palpate the inguinal region for any tension particularly on the left side i.e. sigmoid, rectum, and genital system.</li><li>• Check the palatine foramen to see if there are any swollen lymph nodes then release the nerve to provide relief.</li></ul>
	<p><b>Note:</b> Listen to tissue tension - your hand attracts the tissues. When your hand tends to turn as you palpate, there is a stricture. If it glides, there is a dysfunction (e.g. cyst, tumour, inflammation, adhesion, etc.).</p>

### 4. Palpate the spine

	<ul style="list-style-type: none"><li>• Check lymph nodes in the patient's neck. Swollen lymph nodes can cause problems with the shoulder and neck.</li><li>• Check the spine for efficient side bending while the patient is in a sitting position.</li></ul>
	<ul style="list-style-type: none"><li>• If the fixation is on one side only, do not touch the spine. Manipulate only if the fixation is on both sides.</li><li>• Address a bi-fixation by releasing the nerve in the skull.</li></ul> <p><b>Note:</b> A dilation of the venous system and any scars in the genital system can create tension and problems on the spine.</p>

### On treating intestinal issues

The approach may vary from working on the vascular system (i.e. mesenteric artery) to the spine – sometimes it helps to refer patients to microbiologists for alternative medicine prescription (i.e. natural mushroom).

## **Relevant notes:**

### **Osteopathic practice in France**

- In France, osteopaths get to treat people with dysphonia, urinary incontinence, adenoma of the prostate, issues with the genital system, etc. The profession gained public recognition by word of mouth. There are over 30,000 registered osteopaths in France and about 5,000 in the UK.
- The regulations for osteopaths in the UK are tighter than those in France. Complaints against osteopaths or osteopathic practices in France are handled in law courts.

### **Osteopaths now**

- The new generation of osteopaths has specialists and experienced/seasoned osteopaths as their teachers.
- Human dissection sessions give specialists and researchers the opportunity to learn anatomical details from macrostructures to microstructures i.e. the cell. Working on the fascia means influencing the nervous system while working on the cranial nerves means influencing the arterial and vascular systems.
- To become good at osteopathy, the key is to have proficient knowledge of human anatomy so that practitioners will know where to palpate and administer manipulations. The intent is to permit the body to adapt to the processes necessary to make healing possible.
- Some osteopaths who became fully-fledged medical practitioners have resorted to giving drug prescriptions over time rather than applying manual techniques when treating patients.
- Osteopaths should be fuelled by hard work and curiosity in finding the best treatments for people. Their limitations should not discourage them from going further to help patients.

### **Other notes**

- People with adenoma of the prostate have more than a 50% risk of impotence post surgery. Osteopathic approaches can be applied so that patients do not need to undergo operations or take drugs.
- With hyperplasia of the prostate, internal work helps to release the pressure on the urethra and release the venous congestion affecting sexual dysfunction.

- There is no straightforward approach to treat inactivity or failure of the parasympathetic system to dampen down the sympathetics. When working on the vagus nerve, check the cardiovascular system and digestive systems.
- Genetically-inherited asthma is difficult to treat. “False asthma” from gastro-esophageal reflux disorder is easier to treat.
- When the *Helicobacter pylori* bacteria invade the digestive tract, allergies may occur. Manual approaches can be employed to help the body get rid of the bacteria or reduce bacterial proliferation in the body.
- The trigeminal nerve is the most important of the cranial nerves. It can cause intense pain for some patients when it is under pressure or irritated e.g. headache, migraine, etc.
- Jean-Pierre Barral has been researching the brain since 1981. The aim is to address function and pressure issues associated with complications of transient ischemic attack where patients lose their ability to speak and move. Efforts are directed at preventing the attacks and employing the best approach to stimulate blood circulation (basal vertebral artery) during rehab to restore functional movement.
- The Barral Institute has about 80 teachers and offers around 30 courses.