

Scientific Section of the Cranial Letter

Cranial Osteopathy, Another Piece to Solving the Puzzle of Autism

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While it remains a leap of faith for most people who know very little about cranial osteopathy, stories of breakthroughs in children with mild to severe autism are prompting growing numbers of parents to seek the help of osteopaths. The tiny specialty of 1,200 doctors (only 24 physicians per state in the U.S) is increasingly being flooded

with inquiries and visits from parents of autistic children.

Osteopaths, who attend four year osteopathic medical schools in order to practice, believe that the body's musculoskeletal structure, brain and spinal chord (and the membranes and fluids that surround them) have subtle and inherent rhythmic movement of fluids that are essential to overall health. When these movements are interrupted it can have catastrophic results, one of which is autism of varying severity. Abnormalities in the body's membranes, they say, are an important clue to why normal childhood brain development derails, causing autism. To treat autism, they use a developed sense of touch to diagnose and gently palpate abnormal fluctuations in membranous fluid materials that surround the brain.

"Each child is genetically, biochemically and structurally unique with an individualized history of trauma," says Eric Dolgin, DO, who treats a number of autistic children in his Santa Monica practice.

While it is just one piece of the puzzle, the successful treatment of autism through cranial osteopathy is helping shed light on the causes of this puzzling condition. "The mysterious syndrome that causes disruption of circuitry in brain development can be attributed to anything from birth trauma to exposure to toxic substances," says Dr. Dolgin.

When Ms. Sara Fuentevilla took her son, Steven, to Dr. Dolgin for the first time she was unfamiliar with cranial osteopathy but had heard about its effectiveness and was anxious to give it a try. "Parents are devastated when

their children are diagnosed with autism," says Dr. Dolgin. "I try to defuse the emotional blow. The word "autism" is terrifying, but I tell parents that for lack of a better diagnosis it is a word used very loosely to refer to a wide spectrum of developmental disorders. They can't let the word paralyze them."

Steven, 8, had been diagnosed as "mildly autistic" at Kwis Elementary in the Hacienda La Puente Unified School District. He suffered daily humiliation from other children who made fun of him because he was in the third grade and still couldn't read. He felt deeply stigmatized at being placed in a "special education" class, a feeling that was worsened by the fact he required the help of a grown-up to do simple tasks that his classmates routinely did, like typing in his designated identification number in order to pay for lunch.

Dr. Dolgin, who is President of The Cranial Academy, the professional organization for the nation's Doctors of Osteopathy (DOs), believes that Steven's difficult cesarean birth contributed to many of his developmental delays. The mechanical tension diagnosed on the left side of the occipital portion of the head (bone at base of skull) had created a domino effect, causing a pulling and tugging due to overly tight membranes stretching from the neck to the top of the skull.

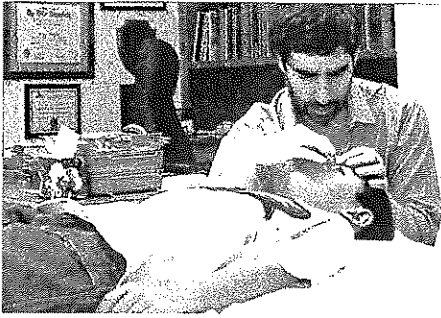


In a difficult delivery, Steven's head had absorbed the brunt of protracted contractions, exacerbated by effects of the drug Pitocin administered during labor to accelerate uterine contractions

and facilitate delivery. Dr. Dolgin also concluded that Steven's overly narrow face, which had not developed properly, was also the result of a traumatic birth experience.

In his first treatment, Dr. Dolgin placed his hands on Steven's head to trace the membranous dysfunction that contributed to the boy's development issues and autism. Without crunching or cracking, he gently palpated

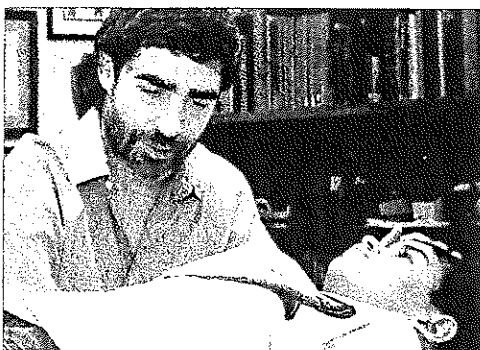
Steven's cranium with his hands, loosening the overly tight membranes around his skull. He also gave the child a mouth appliance to widen his pallet and begin to correct his structural facial problem.



Over the next three months, Steven had seven osteopathic treatments. He was often tired after treatments and felt "woozy." Dolgin explained that he had

increased the flow of fluids in the body and that the nervous system was readjusting itself. Tiredness was to be expected. Six weeks after treatment began Ms. Fuentevilla, a homemaker, says Steven showed remarkable progress. "There always seemed to be a wall that prevented him from easily taking in information, but now he loves to learn," she says. Socially, the change Steven has undergone is dramatic. Whereas he would often stand alone in the school playground repetitively walking around in circles, his mother happily says he now runs and plays with other children.

Ms. Patrice Stanzione, Steven's third grade teacher, says that while she isn't qualified to conclusively attribute the child's leap in progress to osteopathy, changes did begin after he started seeing Dr. Dolgin. "It's odd and rare but Steven has made tremendous advances socially and academically. And he's had a huge leap in confidence," says Ms. Stanzione. Steven was also switched to a new classroom with a smaller ratio of students to teachers, allowing Steven to receive added attention. Still in summing up Steven's progress, Ms. Stanzione added: "It's not the norm at all."



Despite such success stories, however, cranial osteopathy is often eschewed by conventional medical doctors.

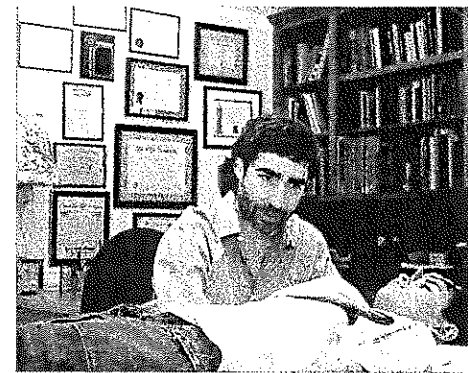
Historically,

cranial osteopathy has been relegated to the level of "quackery." "Most doctors lump osteopaths into the same category as chiropractors," says Miriam Mills, MD, specializing in pediatric medicine at the University of Oklahoma, "They have no idea what doctors of osteopathy learn about treating the body without

medication or surgery." Ironically, however, osteopathic techniques that were shunned were eventually integrated into mainstream medicine. In the 1950s, for example, osteopaths were ridiculed for their warnings about the over-prescribing of antibiotics in children, which later became a widely-held belief of western MDs.

Today, society's openness towards complimentary medicine is helping fuel a growing movement of patients to osteopathic practitioners like Dolgin for myriad conditions.

Osteopaths stress that treatment for autism is slow, and patience is necessary. Moreover, the degree of success varies. "I can't help every child but I have been able to significantly improve many children with development issues," says Dr. Dolgin, who treats many children for otitis media and other learning disorders, as well as autism.



Like many parents, Ms. Ildiko Stevens says she was willing "to go anywhere and do anything" to help her son, Armand, 5, who was diagnosed with autism as a

toddler. Ms. Stevens, an attorney living in Beverly Hills, is part of a controversial group of parents who believes that her child's autism was the direct result of vaccinations while a toddler. "My child is not autistic, he was poisoned," says Stevens, adding that Armand's symptoms began shortly after he was immunized as a toddler with the MMR vaccination for measles, mumps and rubella. Shortly after that, Ms. Stevens says he became mute and stopped engaging in cognitive activities or play with other children.

Although there isn't conclusive research, many osteopaths believe that there are links between pediatric inoculations and the incidence of autism. They often advise parents to space vaccinations farther apart than conventional pediatricians recommend and to avoid combination vaccinations designed for multiple diseases to prevent overwhelming the child's immature immune system.

During Armand's first visit, Dr. Dolgin diagnosed shock in the membranous tissues covering Armand's central nervous system (called dura) and found his vitality very low, indicating a weakened immune system. After four months of cranial osteopathy, Armand started to demonstrate verbal skills and improved cognitive development in speech and intellectual capabilities. The

speech pathologist reported she had never seen such "rapid and dramatic change," in an autistic child, according to Mrs. Stevens. The speech pathologist was reticent to attribute Armand's progress to osteopathic treatments, stressing the point that Armand was also being treated by a homeopath, behavioral therapist and nutritionist, all of whom could have contributed to his improved condition. Mrs. Stevens, however, is convinced osteopathy--in great part--is what helped Armand, who is now engaging in two-way conversations and is a prolific artist. "He wants to play with other children for the first time in his life and even likes hugging (them)," she says, referring to the common symptom among autistic children of backing away from any physical contact. That said, she concedes that Armand, who has been treated by Dr. Dolgin for a year, still has behavioral problems and requires treatment for speech development and socialization. "We are not out of the woods yet," she says.

As Dolgin points out, the road back for autistic children is long, characterized by leaps ahead and periods of slower improvement. Having practiced for twenty years, Dolgin, who is a highly-respected DO in the US, prefers not to crow about his successes with autistic children, but rather steadfastly treat these children, confident that he will make progress over time.

Ultimately, the effectiveness of osteopathy in treating autism resonates most through the words of children and their parents. "Now, I'm smart," says Steven Fuentesvilla gleefully. "I don't have to go to summer school." ▲

