

Clinical Solutions: Building on the Sutherland Approach to the Neurocranium

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April 24-26, 2020

ABSTRACT

The study of structure-function interrelations by osteopathic physician, William Garner Sutherland, DO greatly expanded the manual medicine armamentarium and provided new clinical management strategies.

The **Sutherland Approach** (referred to in the literature as osteopathic cranial manipulative medicine, OCMM) is associated with an understanding of what he termed, the “Primary Respiratory Mechanism (PRM).” Integrating his approach provides pragmatic clinical insights to mitigate pain, optimize homeostasis, reduce allostatic load and enhance overall patient health. The manual methods introduced are applicable to the treatment of somatic dysfunction anywhere in the body and include balanced membranous tension (BMT) and balanced ligamentous tension (BLT) techniques.

This course will describe the Sutherland Approach from an anatomic-physiologic context and will focus on the neurocranium, particularly the cranial base. Hands-on workshops will introduce multiple manual techniques that can be integrated into the management of common patient complaints including headaches and symptoms linked to cranial nerve dysfunction. (A limited number of techniques related to the viscerocranium will also be presented to improve temporomandibular joint sinus functions.) On the final day of the course, the hands-on workshops will include an integrated review of the techniques as applied to clinical conditions.

This program is part of the Danish Society of Musculoskeletal Medicine (DSMM) training.

Goals &/or Learning Objectives

At the end of this workshop, participants will:

- Understand the Sutherland Approach and its application in various health care management strategies;
- Relate observational and objective palpatory findings to various diagnoses of somatic dysfunction of the head region;
- Understand the rationale for indications/contraindications of various manual techniques when applied to the neurocranium;
- Identify key areas of somatic dysfunction of the neurocranium and cervical region in relationship to common clinical symptoms;
- Be able to integrate manual medicine approaches to mitigate signs and symptoms associated with cranial nerve dysfunction, headache, congestive phenomena affecting the CNS and central sensitization.

Hourly Program Proposal (Next Page)

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PROGRAM

Friday, April 24

- 9:00 **Introduction to the Course**
- 9:15 **Embryology & Anatomic Overview Related to the Cranium and CNS**
LAB: Small group skull identification of key landmarks
- 10:15 **The Sutherland Approach: Primary Respiratory Mechanism (PRM) – Conceptual Origins**
- 10:45 **Break**
- 11:00 **Discerning & Understanding the 5 Components Making Up the PRM**
CNS
Cranium
Cerebral Spinal Fluid (CSF)
Fascia, Dura and Other Membranes
Sacrum
- 12.15 **Lunch**
- 14:00 **Palpatory Diagnosis: Inherent Motions including Cranial Rhythmic Impulse (CRI)**
LAB: CRI – Differentiating Primary from Secondary Respiratory Motions
LAB: Core Link & Myofascial Interconnectiveness
- 15.45 **Break**
- 16.00 **Palpatory Diagnosis in OCMM**
LAB: Tenderness/Asymmetry/RestrictedMotion/TissueTextureChange = Somatic Dysfunction
LAB: Handholds for Motion/Asymmetry – Vault, Frontooccipital, Becker, Temporal
LAB: Sacral Handhold & Naming - Sutherland Approach vs Mitchell & Strahan Approaches
- 17.00 **Break for dinner**
- 19.00 **SBS Patterns: Observational – Quadrant Diagnosis**
LAB: Craniofascial Asymmetry & Discussion
- 21.00 *End Day 1*

Saturday, April 25

- 8:00 **Review/Complete Day 1 ... Plus Questions & Answers ... Overview Day 2**
- 8:30 **Palpatory SBS Pattern Diagnosis (Part I): Physiologic Patterns + “Air-Hand Dance” (Verse I)**
LABs: Video; Cranial base bones & Air-Hand position for each pattern
LAB: Verse I Air-Hands → Vault Hold(s) for Physiologic SBS Patterns (Note: FrontoOccipital)
- 10:00 **Break**
- 10:15 **Palpatory SBS Pattern Diagnosis (Part II): Non-Physiologic Patterns + “Air-Hand Dance” (v II)**
LABs: Video; Cranial base bones & Air-Hand position for each pattern
LAB: Verse II Air-Hands → Vault Hold(s) for Non-Physiologic SBS Patterns (Note: FrontoOccipital)
LAB: Full Air-Hand Dance
- 11:15 **OCMM Treatment Overview: Indications/Contraindications – OCMM Methods**
LAB: Review examples of “stacking” of minor motions to balanced ligamentous tension & following to release
- 12:00 **LUNCH**
- 13.30 **Clinical Implications & Manual Approaches: OCMM for CN 1-VI Function/Dysfunction (Part I)**
LABs: Frontal Lift; SBS Stacking with BMT; Inion Dural Fulcrum; Temporal Dx; V1-2-3 Counterirritation Technique
- 15.00 **Break**
- 15:15 **Clinical Implications & Manual Approaches: OCMM for CN VII-XII Function/Dysfunction (Pt II)**
LABs: Temporal-Occipital BMT; Sphenopalatine Ganglion (on skull); Occipitomastoid V-Spread; Condylar Decompression
- 17:00 **End Day 2 Special dinner**

Sunday, April 28

- 9:00 **Review/Complete Day 2 ... Plus General Questions & Answers ... Overview Day 3**
Small Groups LAB - Q&A Bones & Skulls
- 9:45 **Trouble-Maker of the Head: Symptoms, Diagnosis & Treatment of Temporal Bone**
LAB: Diagnosis & Treatment Techniques Related to Temporal Bone Somatic Dysfunction
- 10:15 **Break**
- 10:30 **OCMM: Addressing Fluid & Venous Physiology**
LAB: Venous Sinus Drainage Treatment Series
LAB: CV4
- 12.30 **LUNCH**
- 14.00 **Integrated OCMM: Enhancing Homeostasis & Quality of Life for Patients with Neurodegenerative Disorders (Panel: Incl osteopathic research related to Parkinson Disease, Multiple Sclerosis, Alzheimer)**
CLINICAL INTEGRATED LAB: Open thoracic inlet → Suboccipital inhibition/decompression → OM Suture V-Spread → Venous sinus drainage (integrating paced breathing & inion) → CV4
- 14.50 **Integrated OCMM: Enhancing Homeostasis & Quality of Life for Patients with Inertial Disorder (MVA/Whiplash)**
- 15.40 **Review, Wrap-Up and Participants' Q&A; MiniTest**
- 16.00 **End of Day 3**