

A LETTER FROM QUEENSLAND



Dear Elaine and Ossie.

Greetings and salutations from Far North Queensland. Some case histories I have been able to help in the Intensive Care Unit of the Cairns Hospital using the Bowen Technique.

I always try to apply Bowen whenever the situation permits, and have had some wonderful results using the Asthma moves.

A 17 year old girl, Rachel, had a history of mild asthma, normally well controlled. She developed a bad chest cold which deteriorated into a severe episode of asthma that did not respond to conventional medications, even at their maximum dose. Rachel was admitted to ICU with the view to mechanically ventilating her because she was becoming very tired and not oxygenating sufficiently. Her Peak Flow measures (which are an indication of how much air she was able to move through her chest) were down to 80cc. A healthy girl of her age should be able to blow 500-600cc.

I came on Night Duty to find the staff preparing for ventilation, and saw her gasping and very frightened. I went straight over to her and started doing the upper back moves while she was sitting upright in bed, drips with Ventolin and Aminophylline going in both arms and an oxygen mask on her face. After I did the front diaphragm move, I stood back and waited. I noticed that she started to relax and was able to take slightly deeper breaths. I then had to convince the doctors to give me some more time to work with her and hopefully avoid the need to ventilate her at all! As one can imagine they thought I was having them on and wasting precious time, but they too were able to see that she was not deteriorating any further, and fortunately said that they would wait and see if what I was doing was really helping.

Initially, I "Bowened" Rachel every half hour, noticing her chest muscles and diaphragm becoming more relaxed each time, and she was able to speak a few

words. She eventually fell asleep, and I repeated the moves one or two hourly. Her peak flows started to improve very gradually, from 80-85cc, and by morning she was up to 95cc. I went off duty wondering how she would go through the day without any more Bowen. When I came back to work the following night she sat right up and said "massage!" to me. (I had not tried to explain what I was doing to her the previous night because she was too distressed and exhausted, but she had obviously realised that it had helped her). Her peak flows were up to 140cc. I Bowened her once that night, and by morning she was up to 180cc.

We were able to reduce most of the medications she was on because she was recovering. Within a few days she was discharged from hospital, thankful that she never had to go onto the "dreaded ventilator"!

Another situation in which I have used the Asthma moves was on a six month old baby that was diagnosed with Whooping Cough. The baby was already ventilated by the time I saw him. The staff were constantly having to administer drugs that would keep him (chemically) paralysed so that his chest muscles would relax, and allow the ventilator to do the breathing.

I very discretely applied the "Baby Asthma" moves as best I could and left him for an hour. When I came back I found that he was coping much better and not requiring as much sedation. I repeated the moves and left him for the rest of the night.

By the next day, the babe was able to breath well enough on his own and was taken off the ventilator. The "whoop" in the cough was gone. Within a few days baby had recovered fully from the infection and was discharged from hospital.

I also used the Bowen Technique on my nursing and medical colleagues who invariably have aches and pains from lifting heavy patients and standing for long hours. They often ask me to do that "muscle tweaking thing" on sore spots. It is always a pleasure to oblige!

You may be interested in some of my abstract rambling ideas that come to me from time to time (usually at full moon on night duty in the Expensive Scare Unit!!).

I practice Homeopathy and have found the Bowen Technique and Homeopathy to be very compatible. I have observed that some of the principles and rules that apply to Homeopathy also apply to the Bowen Technique.

For example, Homeopathy observes Hering's Law of Cure. i.e. the body will heal itself of a disease and the symptoms will abate from above downwards, from the inside outwards, and in the reverse order to which they appeared. In my experience this is the general pattern that occurs with patients who have had a Bowen treatment.

The Bowen Technique recognises that it will facilitate the body to heal itself AS FAR AS IT IS ABLE TO. If the vital force of a person is severely diminished through chronic degenerative disease processes or malnourishment, it will probably take a longer time to heal than someone who is fit and healthy.

Homeopathy assesses the integrity of the vital force in the prognosis of recovery. One does not give high potency remedies too frequently to a devitalised person, as it may aggravate the condition. Similarly, a Bowen therapist will not do many major moves in one session, as they may "overload" and aggravate the person's condition.

When dealing with an acute situation such as a knee injury or asthma, the moves may be repeated as often as required. In Homeopathy, low potency remedies may be repeated often in first-aid type situations.

In Bowen, a person is treated wholistically, their emotional and physical well-being is considered, and moves on Pages 1,2, and 3 address the whole body. The Bowen therapist applies the moves

and then waits a week to see the patient's response physically and emotionally. The Homeopath assesses the whole constitution of the patient and prescribes a remedy that covers as much of the patient's symptoms and characteristics as possible. The minimum dose is used to illicit the body's own healing response.

Homeopathy is a subtle, non-invasive method of treating a person and bringing them back into balance. The Bowen Technique is a very gentle, non-invasive method of resetting the body in order that it may heal itself. When they are used in conjunction with each other, they synergistically facilitate a remarkable healing response.

Best wishes to both of you, and all other Bowen therapists who may find some benefit from my "ramblings"!

Yours in Bowen,

Sandra Leahy
Atherton, Qld.



Elaine with Dr. Joanne Whitaker, our new Advisory Council Member. How much Bowen were they discussing at this time????