

Published BY

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GRAFTON NSW. 2460.

SACRO OCCIPITAL SEMINARS FOR THE FUTURE.

SYDNEYMacleay St. TRAVELODGE AUGUST 10th and 11th.
Advanced Class Part 1. Groups 1 and 2.

Melbourne August 17th and 18th.
Basic Seminar Group 3. anyone from Groups 1 and 2 may attend.

REGISTRATION

All registration will be handled from Grafton. Groups 1 and 2 will pay only for the cost of presentation. (Last time in Sydney with 16 attending the cost was \$12 each) Group 3. Registration is \$30 in advance. Any Chiropractor from Groups 1 and 2 attending the Group 3 Seminar will pay a fee of \$15 only.

TEXTS REQUIRED.

Groups 1 and 2. C.C.R.T. \$20 Highly recommended 1st Aid \$15.
Payment requested in advance.

Group 3. 1974 S.O.T. Notes \$60 , 1 Set of equipment \$35 (Total with registration \$125)
Payment requested in advance, in fact mandatory.

As this newsletter is the first and outline is required as to what is to be presented. Naturally you will be informed of all impending events that would be of interest to you. There will be direct extracts of Dr. DeJarnette's communications and extracts from his newsletters and works. Any new discoveries of help will also be disseminated through these columns.

We would also hope that this newsletter will find its way into the hands of all Chiropractors in Australasia for it is in everybody's interest that this is published. We do not expect that all will agree with what is presented, but of this we are certain, these columns will provoke discussion, thought and hopefully better practitioners of CHIROPRACTIC.

Should any typing mistakes be noted we apologize and will try to do better in the future.

SUBSCRIPTIONS

Subscriptions are at present based on \$5 a year from July to June of the following year. New Zealand subscriptions will be \$6 the extra to cover airmail postage.

To those fortunate few who have received this first Bulletin. Please tell others and get their subscriptions rolling in so that our time will not be wasted and the best in S.O.T. can be presented to you to keep all abreast of the most scientific approach in CHIROPRACTIC. For the restoration of life use S.O.T.

SACRO OCCIPITAL TECHNIQUE 1974

We believe the 1974 Sacro Occipital Technique Notes are the best that have been produced, they certainly do fill a great void in total Chiropractic. Take for example the heel tension test. I just wonder how many of you have given this test any serious thought, or are you just leg pullers? Has it ever occurred to you that the heels can do more in correcting upper cord pressures than can any adjustment created by man? The heels, controlled, control the intracranial tension membranes. The next time you see a migraine patient, and we are sure you will see one before you forget the contents of this bulletin, and I feel reasonably certain that the patient will be a category 1, we want you to do the following.

Palpate the suboccipital ridge and the atlas territory. Do this very carefully if you can, X-ray the upper cervicals. Now let's begin the heel tension test. Grasp the heels...not the ankles. Traction on the heels not the ankles. Pull on the heel not into the legs. Pretend the heels are totally alone and you are testing them. Be sure your feet are positioned directly related to the patients feet. Be certain your tension pull is equal right and left. Begin slowly and then feel the tension build in one heel. It feels like someone is turning a turnbuckle to tighten the heel. Don't swing the legs side to side. Don't Jerk. Pull slowly and increase to maximum slowly. When you get the one heel under total tension, have assistant hold heels and you again palpate the atlas. You will be extremely suprised at what you find.

Let's go a little farther. Turn the heel slightly inward, feel the atlas move outward. Atlas always moves opposite the heel. You haven't ever seen anything like this. If the atlas responds as the dura is changed, imagine what you change inside the skull. Every scientific approach chiropractic has ever made to spinal root pressure has had something to do with heel tension. Every atlas adjustment affects heel tension, so heel tension affects every atlas adjustment.

Muscle testing and heel tension. You know that man is made up of many parts, each fitting into something of the whole. You can test man 50 ways if you have time and the patient has the strength to withstand your testing. This type analysis becomes a contest between a sick patient and an eager Doctor. Who do you think is going to win?

Place a well patient supine. Have him hold his arms straight up and keep them in that position for ten minutes. When you first begin, see how difficult it is to push those arms down, but at the end of ten minutes, they fall down. Now just what have you done to this patients cardiac output mechanism and his total nervous system? Supposing in the ten minute period you touch eight spots and try to push his arms down eight times. How much energy did the patient consume from his own resources and how much energy did you consume? This becomes a contest, not an analysis or diagnosis.

Let's do it a more scientific way. Palpate the Occipital Nibres. This takes nothing from the patient and takes very little energy from the Chiropractor. It is a most informative effort. You spend time time only on the vertebra in trouble.

You do not distract the patient by having him do unrelated physical efforts. In fact no physical examination should be considered competently done untill the occipital analysis has been properly carried out.

BLOCKING

A word of advice... when inserting the blocks, elevate the patient high enough so the blocks do not drag the skin along with them. If this happens the skin sets up pain syndromes and they may be far reaching. In the summertime, patients perspire so in removing the blocks wiggle them out. Once in a while, rub them with Johnsons Baby Powder. Handle your blocks with the respect they deserve they are your secret pair of hands doing far more than you will ever know. They are the only things that will make a more precise correction than you can make with you hands.

Omaha 1974.

Seminar dates September 30th. to October 5th. The information I have requested on the trip to the annual seminar in Omaha has not arrived (postal strike). But brief it here is what information I have. The fare will be \$640 return to L.A. with a 25% reduction on US. internal flights, providing you stay 14 days. Now comes the saving. It is arranged thru my travel club to pay the fares in USA. At the same number of dollars thereby saving on the exchange. To accept this offer all must join the club before departure. Advantages of the club are many and I advise you all to join. Write to - Mr. Hogan-Doran BARC. Box N335 P.O. Grosvenor Street Sydney NSW. 2000. Mention my name and your projected trip and you will get all the details. More in the August News.

SEMINARS. Emphasise to all who are interested, money for texts and blocks is required well in advance because of overseas mail delays (not to mention ours), and supply difficulties for blocks, boards, and rolls.

THE SCIENCE OF SACRO OCCIPITAL TECHNIQUE.

Newton's third law of motion states, 'for every motion and opposing motion, there must be an equal and opposite motion'. This third law is the mechanical basis for chiropractic and is the working hypothesis for S.O.T.

All physical body movements demand vertebral movements. When all vertebral movements are of equal demand values, all return values will be equal and opposite, and all involved structures will realign. When demand action is met by unequal return action, one or more vertebra are left stranded in a foreign position. This then becomes a position of unequal motion and motion then becomes the value by which a true vertebral subluxation is judged. Chiropractic is all of man. No one area is all of it and no one area is immune to trouble. Newton's third law relates to motion and this means that if this law is violated then and only then can vertebral misalignment become a subluxation due unilateral motion of a plus quality.

The journey from misalignment to subluxation is not great and the time often is in seconds, and again years may elapse before this transition occurs. Spinal pain is not the result of a new injury to a new structure, but is the ending of a misalignment of a vertebra and the beginning of a subluxation of a vertebra.

The vertebral subluxation is always pathological. The misalignment is not pathological unless the structure is being or has been destroyed.

The pathology of a vertebral subluxation is local and general. Locally, the capsular structure is involved. The meager blood supply to the disc is decreased, and this produces changes of degeneration. The annular structures are stretched and in many cases, ruptured. The spinal nerve sheath is inflamed. The dural covering of that nerve root is inflamed. The dural sheath may be under nerve root traction, as the Rami Communicantes become involved muscular, visceral, and blood vessel pains develop. Symptoms occur and soon manifest the indicators of changes and the beginning or ending of the disease. The vasomotors become involved with systemic circulator changes. The dural membrane excites the intracranial dural membrane and this in turn sets up intracranial problems.

The vertebral adjustment will not reverse soft tissue pathology. Soft tissue pathology often reverses itself during such health care, but only because such adjusting improves the patient systemically. (that ought to set all of you thinking)

QUESTION

Send your answer on one page during this month, so we may evaluate you and we will publish Category 2. information next month.

Q. List all signs for Category 2. (By committing an answer to paper you will learn.)
N.B.

All who came to Sydney last month, make it to Sydney again in August and let's have a great learning experience again.
