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Healing hands

A Hong Kong-based physiotherapist is producing remarkable results in the treatment of a wide range of ailments, simply by the laying on of hands and the subtlest of manipulation. Virginia Sheridan reports

THE BABY EATS, THE BABY spits up - after every meal, throughout the day, uncontrollably. Afraid that he'll choke if she lays him flat, his mother puts him to sleep in an upright car seat. Hospitalisation, medication, nothing abates the seven-month-old's gastric reflux.

'It got to a point where he wouldn't eat because it was so painful,' explains the mother, Tracey Holden. At the advice of some friends and a doctor, she decides to try a 'hands-on healing' technique called cranio-sacral therapy.

'After two visits, there was a significant reduction of the reflux. After four visits, it was virtually gone,' explains a happier Holden. 'I don't believe it was just a coincidence. I believe it was Caroline Rhodes.' Rhodes is a Hong Kong-based physiotherapist who specialises in cranio-sacral therapy (CST) for newborns. Though it may sound like a 'New Age' notion, the treatment was based on the findings of two United States osteopathic (holistic) physicians - William Sutherland, who contended in the 1930s that the skull plates remained flexible throughout adulthood; and John E Upledger, who observed the rhythmic movement of the dura mater (the membrane that encompasses the spinal cord) and believed it to be a key element in the body's ability to heal itself. Though there has never been a clinical study that has conclusively proven these theories, the technique seems to have legions of followers including practitioners as well as patients.

CST focuses on the membranes and the cerebral fluid that surrounds the brain and protects the spinal cord - the area extending from the bones of the skull and face (the cranium) to the tailbone (the sacrum). A practitioner makes slight physical adjustments to help the body 'release the restrictions' that would inhibit its natural self-correcting mechanism.

Watching Rhodes perform a CST treatment is like watching grass grow. Her movements are subtle, almost imperceptible. Indeed, it is difficult to tell when the treatment has begun, or whether it has

taken place at all. There are no machines, no medications, not even any incantations. And Rhodes - soft-spoken, gently cradling a newborn in her hands - looks far more like an admiring aunt than a practicing physiotherapist.

But the parents who line up in her waiting room don't seem to care too much about what the treatment looks like. They have come for results. And Rhodes' success with babies suffering from colic, reflux and cranial asymmetry is legendary among mothers' groups. Even hospital midwives have her details on file.

Kay McArdle, an executive director with Goldman Sachs who describes herself as a 'sceptical former lawyer', was initially hesitant about the treatment.

'Another doctor in her practice had recommended her and I thought, 'Right, let me do more research.' But her name kept coming up and I couldn't find anyone who'd had a negative experience.' Not only did McArdle bring in her four-week-old infant, Max, to be treated for a digestional problem, but she herself became a patient. 'After labour, I had difficulty walking. My spine was caught in my pelvis. Caroline manipulated my face and head as well as my back - the first time I've ever had anyone touch my head for a back injury - but it worked. And Max has stopped crying for hours. I recommend her to loads of people.' What impressed McArdle most about the treatment was the fact that it is non-invasive with no known ill side effects. 'Children with reflux are given strong medication in Hong Kong hospitals. My preference is to avoid medication of any kind,' said McArdle, who, as a new mother, also appreciated how much Rhodes accommodated her. 'She saw Max on a Friday and was so concerned about follow-up that she was willing to come in on a Saturday, her day off.' Yes, but what is a CST practitioner actually doing? 'The spinal fluid circulates at a certain rate,' begins Rhodes in an attempt to explain the treatment. 'You can feel this most easily at the head and hip. I work with the rhythm of this fluid and then use these bones as a sort of handle to make adjustments in the nervous system.' The movements are not sudden jolts, as with some chiropractic treatments, Rhodes stresses. 'The baby's bones are not yet fused together, so it doesn't take much pressure to move them slightly.

'Just the slightest of touches - like this,' she adds, lightly tapping her knee. 'So gentle it's almost like sneaking in before the nervous system senses that you're there.' Rhodes believes that, when the bones of the head shift - due to a forceps birth or pressure from sleeping on one side - it changes the diameter of the hole in the base of the skull. 'This is where all the blood vessels and nerves exit the brain to supply the rest of the body. The Vagus nerve in particular - its name means 'the wanderer' - exits through the skull, around the heart and to the stomach,' she explains, tracing the route on the diagrams she has laid out on the treatment table. 'I think that the problem with reflux babies may be a restriction in the connective tissue that affects the nerves, rather than a problem with the stomach.' Rhodes has also observed that colicky babies seem to have a twisted pelvis.

'Why, I'm not sure - what I do know is that there is a dramatic change in the baby's disposition when I adjust the area.' This is

eight-week-old Shiekara White's fourth visit with Rhodes and her parents are pleased with the results. Their baby girl has become more 'restful' at night, and her digestion problems seem to have subsided. Now they are asking Rhodes to 'reshape' the infant's head. 'There was a bigger bump on one side than the other, and it's improved since we've been coming here,' says the infant's mother. 'I'm glad we're doing this now. I think it will make a big difference for her later in life.' She admits that many of the parents bring their infants to her for cosmetic reasons - to realign a face that may have been slightly distorted in the birth process. But she says that these physical cues As yet, it's a small portion of her practice - she still does conventional physiotherapy work (as well as CST) on adults.

But to the parents of her happier little patients, she will always be known for her 'baby magic.'

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