

## **BioBites: Structural Energetic Therapy**

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Don McCann, MA, LMT, LMHC, CSETT & Founder of Structural Energetic Therapy®

*Structural Energetic Therapy Institute*

### **Presentation**

**Why Structural Energetic Therapy?** Structural Energetic Therapy seeks to minimize pain and help people function at very high levels. SET is a way to rehabilitate the condition that causes pain. We are mostly talking about musculoskeletal pain - pain that is within the functioning of the muscles and structure of the body.

**The 'Spiral Twist' or Core Distortion.** McCann noted in his early work that every patient exhibited a spiral twist that could be linked to their experience with pain. To rehabilitate these patients, he noted that he would have to resolve this twist. Other modalities saw the spiral twist as 'normal' and didn't have a way to resolve this twist and bring the body back into balance. McCann discovered that he could work on the area of pain first, taking distortion out of that, and then bring the rest of the body into alignment to support those changes. Spiral twist could be identified in individuals exhibiting a variety of conditions - TMJ, plantar fasciitis, cartilage in the knee, hip degeneration.

**Cranial Structural Release.** Using myofascial release pressures to increase the range of motion and release restrictions on motion to bring the cranium into balance became the objective. The cranial work was shown to reduce the spiral twist in the rest of the body, leading to strength and balance throughout the body that didn't exist before. While myofascial release had been used in Structural Energetic Therapy to bring the body back into balance, when this was applied to the cranium, a new level of structural balance in the body that was previously unattainable. This structure then allowed for further rehabilitation.

**Improvements in Strength and Function.** When people are in the spiral twist or core distortion, 50% of the muscles in their body are operating at 50% or less strength or efficiency. In this instance, a tremendous amount of physical potential is not available. With the Cranial Structural core distortion release, kinesiological testing shows improved muscle strength. With continued rehabilitation, strength and range of motion improve while pain and inflammation subside.

**Cranial Congestion.** With greater range of motion in the cranial bones, found that congestion in the cranium could be pumped out and congestion relieved. In 2011, Dr. Nedergaard at the University of Rochester discovered the glymphatic system, which is the principal system for delivering nutrients to and pumping toxins out of the brain. The glymphatic system has been shown to be related to dementia and Alzheimer's. With anesthesia dementia, pumping the brain with this greater range of motion has been shown to improve cognitive function. This pumping process has been shown to work with children with autism, in improving brain health, and in restoring the brain in the aftermath of a concussion.

**The Relation Between Brain Health and Rehabilitation.** Once the brain is functioning at a high level by bringing the glymphatic and lymphatic systems along, people are better set up for other therapies to be effective. The brain is able to function at a high level to integrate with whatever other therapies are being performed.

**Headaches.** Headaches often have to do with a structural problem - the structure of the cranium putting pressure on the cranial nerves, an imbalance that's repeated on a high/low shoulder leading to tension and stress at the top of the shoulder, the way the occiput is sitting on the first cervical vertebrae causing compression on the nerves. Bruxing and tension in the jaw can also lead to headaches.

**The Energetic Aspect.** With the release of the soft tissue, there's also an emotional energy that releases. Our bodies are nothing but energy, and this therapy is working and transforming and moving energy. We're also working to release aspects of the body that are binding up energy flows, as these relate to pain and overall function. When the body is brought into balance, there is a transformation that takes place.

**Conditions Improved by SET.** Carpal tunnel, wrist problems, elbow tendonitis, rotator cuff issues, acid reflux, nervous stomach and ulcer pain, gastrointestinal issues, prostate problems, hip problems, knee issues, plantar fasciitis, concussions, and more can all be improved with SET. SET soft-tissue work relieves pressure, releases adhesions, and allows the body to come into a structure that is stronger and better able to support the needs and functions of the body's various systems.

**Kinesiology.** Kinesiology is integral to SET, in that it allows a practitioner to assess whether a patient is in core distortion and to observe for additional patterns which might be improved with therapy. Patients can be re-tested to determine whether therapy is effective in bringing the body into a structure that affords greater strength and range of motion, thus promoting full rehabilitation. (34:09 minutes)

### **Q&A Synopsis**

**How is Structural Energetic Therapy different from myofascial release therapy?** Myofascial release therapy is used in SET - more specific, more directional myofascial release because we are working to a specific structure. Myofascial release therapy does not have a core distortion release. It does not create a structure to rehabilitate to. SET is all about creating that structure. We have the tool that the other therapies don't have, which is the cranial/structural core distortion release. This is extremely effective in starting and bringing the body into structural balance so we can work with the body as it's trying to get there. If we haven't released the cranium, the body is oftentimes resisting what we're trying to do.

**Has SET helped people with Ehlers Danlos Syndrome and/or Craniocervical Instability/POTS?** It's helped a few with that. I can't guarantee because that's a rather complicated system, but it has helped some. It would be something I would try, but I can't say absolutely we can see results. Any time we start bringing the functioning in the cranium back, we start seeing changes throughout. And the balance with the cranium allows the cranium to function at a higher level for a long time afterwards. I would say it can help, but I can't guarantee it will solve the problem. There are some other issues there that might not be addressed.

**Does SET help traumatic brain injury?** Absolutely. With traumatic brain injury there are a lot of things that happen. First of all, cranial wounds jam more from being hit. It's going to prevent some of the functions that work from the movement of the cranial bones. Secondly, we get swelling in the brain that can't be pushed out because the glymphatic system collapses. Thirdly, we get a lot of damaged cell tissue; and because of the further imbalance of the brain because of

the imbalance of the cranial bones, we get strains on the neurons that will eventually create chronic inflammation. With the cranial/structural core distortion release, we're mobilizing and balancing out the bones of the cranium, which will allow the reciprocal tension membrane and the falx cerebri and the tentorium to balance back where it's supposed to be. It's also the part that all of the major glymphatic vessels come through, and so it's going to take the pressure off of those and allow those to open up and function. And third, release is going to allow the petrous ridge to support the tentorium, so that instead of being collapsed and cutting off the drainage of the brain, that'll open back up. When we get to this point, we are then going to have a range of motion of the cranial bones, in balance. We're going to compress the cranium to allow the cerebral spinal fluid to inflate some of the compressed vessels of the glymphatic system. They're going to inflate and begin taking away the build up of waste products, dead cells, the blood, and whatever is left in the brain that needs to be taken out. This allows the chronic inflammation to go down and resolve these issues, which are working against brain function. This manual therapy directly addresses the issues surrounding traumatic brain therapy, which medicine frequently does not have much of an answer for.

**Can SET help those suffering with symptoms associated with psychotropic drug off-tapering?** As the cranium is released and pumped out, we can pump out the accumulation of that in the fat cells in the brain. This is handled by the glymphatic system. If the glymphatic system isn't operating at a very high level, we can restore that and use that to pump out the brain - this has been very effective with anesthesia and similar.

**Is the cranial work, particularly the pumping, self-administrable?** One might try, but will not have the sensitivity that a therapist would have. You need to go to a therapist for the frontal occipital decompression and for the cranial/structural core distortion release. This is important because it's the cranial/structural core distortion release, which creates a new range of motion that is not typical, that allows the decompression to be so effective.

**Are there things that a patient who has received SET therapy is advised to do to sustain progress?** It depends on where patients are in their rehabilitation. For patients to maintain two weeks pain free between sessions, it's better not to stretch or weight lift because the body will often be pulled back into its old patterns. Once the patient can maintain for two weeks, some gentle stretching or gentle rehabilitation works. One of the things I find is that where there has been imbalance and pain, there are often damaged fibers. Those fibers need to be strengthened before they are pushed, otherwise those fibers tend to be reinjured. In situations where something has been torn, until a patient can maintain for four weeks, it's not a good idea to strengthen. For the lumbar, the back, we typically give gentle leg raises to strengthen the intrinsic muscles that stabilize the spine. These are easy, gentle exercises. I like some of the pilates and the yoga therapies but only if these do not push the body further than it should be pushed. It's best to go by the individual person.

It's also important to note that if it's the first or second session, the body will be dumping a lot of toxins. There have been toxins locked in the body from chronic holding patterns, muscles being in spasms, etc. For this we might recommend far-infrared saunas, hot epsom salt baths, and even the [Bemer](#) has been known to pump more toxins out of the body.

**Have you ever documented the effectiveness of SET with X-Rays or MRIs to show more tangible, long-lasting results?** Because we are not working in medical clinics for the most part,

we have a difficult time documenting this. This is also true because once people are out of pain, they're not generally having imaging done. We have had a number of scoliosis patients for whom we have seen some tremendous changes through MRIs and X-Rays. We have some research projects in the beginning stages because it would be nice to have that documentation behind us; but for now we have been focused on what works for getting people out of pain, learning along the way and getting people trained to replicate what's been effective.

**How do you find a SET therapist? Are there many out there?** Please visit <https://structuralenergetictherapy.com/find-a-therapist/> to find a therapist. If the website is not functioning properly, you are welcome to call **813-949-2245** to find a therapist. There are approximately 200 therapists who are licensed to practice.

**How often should someone see a SET therapist?** If in pain, weekly is recommended. Once pain-free can be maintained for one week, go to 10 days, then two weeks, three weeks, and four. If you're coming in with a concussion or something similar, we'll start with weekly, then gradually move to two weeks, etc. If an individual is coming to maximize their potential as an athlete, come weekly for the first four to five weeks, then come every other week. When you get into your sport and start pushing it, you might come weekly for a while to overcome any injuries or anything else that comes up as you're pushing your body.

**Does insurance cover SET therapy?** It depends on the practitioner, on the insurance, and on state-by-state.

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