

## Bowen Therapy in Practice

### TMJ and Migraines

© By Victoria Bowmann, Ph.D., USA

One of the concepts of Bowen Therapy is “Less is Best.” This means that only a few moves can bring about results. Often times, a practitioner will administer several well-chosen moves and consider that the totality of the treatment. A combination of patterns is often used to address the entire body. Neither is right or wrong, the goal is relief and resolution of pain and stress held in the structure and muscles of the patient.

Please refer back to volume 18 #1 of Explore! for the Professional, in which the move was discussed. It is carrying skin away from the muscle, putting a gentle challenge into the muscle, and then flattening the fingers (or thumb) thereby causing a pluck or “plop” to the muscle. This sends a physical and energetic frequency through the muscle and related areas. The brain registers this information and begins directing the body in its healing. When one is looking at a diagram of Bowen instruction, arrows indicate the direction of the move. Therefore, the “slack” of skin is away from the arrow; next a challenge to the muscle is in the direction of the arrow and then the move. It is always in the direction of our arrow. Please note: moves are bilateral. One usually does the left side first, followed by the right side. Sometimes a pattern of several moves is completed before addressing the opposite side.

When confronted with headaches, and especially migraines, it is important to first do the temporal mandibular joint (TMJ) moves. This is the “set up” order for the greatest results.

Our patient is lying face up on our treatment table. Place a pillow under the knees to relax the low back, however, do not have a pillow under the head or neck unless it is absolutely necessary, such as a case of extreme curvature of the spine.



First one must put in the dividers. This is a medial move (toward the spine) in the center of the neck (1). It is often between cervical vertebrae 3 and 4. The skin slack is moved away from the spine, a challenge is put on the spinalis erectus muscle, and the “plop” is felt as the move is completed. Start with the left and then the right.

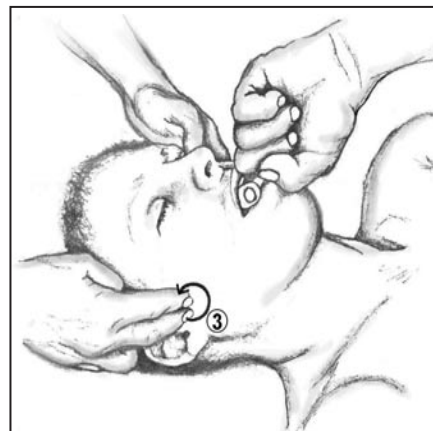
The second move (2) is a medial move at the base of the skull. Just below are numerous sub-occipital muscles. Place the first fingertip of each hand next to each other on the midline. Move your fingers out only one finger width. Carry skin (there won't be very much) laterally. Move medially across the rectus capitis posterior minor. A common response is “chilly bumps” running the length of the body. The release is both physical and a detoxification point.

From earlier articles, it is now time to “Hit the Lats”. One will recall this as a superior

and medial move to the vastus lateralis tendon. Stand beside the left knee and challenge the lateral edge of the tendon. Hold firm in this position until the pluck is complete. Now move to the right knee and complete the move on this side.

One is now standing at the top or head of the table. Instruct the patient to swallow and then to gently bite their finger. The reason for the finger is to hold the TMJ open and stable. When the moves are complete, there should be only slight impressions of teeth marks on the finger. This position is held for the following four procedures.

The following moves are bilateral, left side first, followed by the right side. Work both sides of each illustration before moving on to the next.



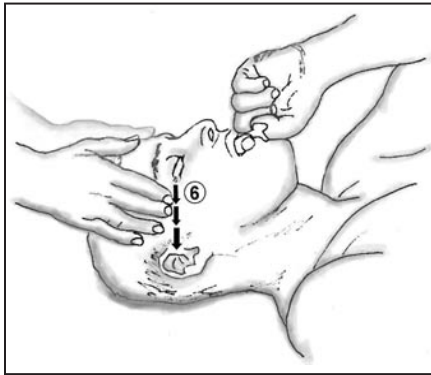
Place one's first two fingers directly on the TMJ. If necessary, ask the patient to open and close the mouth to isolate the correct position. Gently rotate the fingers in a circular pattern (3) across the joint: downward, inward, and upward.



Are next moves are on the inferior border of the mandible, on the posterior aspect of the mylohyoid muscle. Start closest to the jaw and execute three short moves (4) across the belly of the digastric muscle.



Place the thumb on the anterior margin of the masseter muscle (5). The open position of the jaw forms a depression. Roll across the masseter muscle into this depression and apply pressure for five seconds.



Our final move of the TMJ procedure is across the temporalis muscle (6). Start closest to the outer corner of the eye and execute three moves across the belly of the temporalis muscle. The last move is just in front of the ear.

If the headache procedure is unnecessary, "Hit the Lats" to complete the treatment. Please refer to *i explore! Vol 18 #3 "Bowen Therapy in Practice: Sciatica"* for a thorough explanation of the technique for the vastus lateralis tendon.



If the headache procedure is necessary, complete the work as shown in Illustration (6) and then "Hit the Lats."

### HEADACHES AND MIGRAINES



This procedure is called the "spider walk" because of the method in which the work is done. Gently place the hands as shown, with the thumbs directly above the eyebrow and in line with the first finger at the crease of the nose. Finger two is the zygomatic process of the maxilla. Finger three is at the lower edge of the ear and finger four is on the TMJ.

Start by simultaneously lifting both index fingers (1) away from the skin for 5 seconds. Softly, place them back on the face. Now lift (2) the second fingers for 5 seconds and replace them. Continue with (3), (4) and the thumb (5).

This process is done twice unless the patient is suffering from a severe migraine. In this case, repeat the process a third time.

We do not lift the hands off the face. Instead, lift finger (1) away from the skin for 5 seconds. However do not replace it on the face, instead lift finger (2) and wait 5 seconds. Continue with the other fingers until only the thumbs are on the forehead. Gently lift the thumbs and hands away from the face. Step back and allow the patient to rest for 5 minutes before getting off the table.

If the migraine is still present, the patient should go home and sleep. They will often awaken without a headache. Many who suffer in this way will find fewer episodes and of less intensity when having Bowen Therapy. They are encouraged to return when they sense an approaching headache.

### CONCLUSION

The individual procedures of Bowen Therapy offer a gentle approach to greater health. The inspiration of Tom Bowen has helped countless individuals. It takes a little courage to trust your hands with such a simplistic methodology. As the stresses within the musculoskeletal body unravel, patients will sing your praises. ☺

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