

Children's Earaches (Otitis Media) and Craniosacral Fascial Therapy (CFT)

Ear infection is the number one reason parents bring their child to the doctor. It can result in hearing loss, speech impairment, and learning difficulties. Before the age of six, 90% of all children in America will have had at least one ear infection. Medical doctors treat children with this condition with antibiotics and sometimes surgery, which do not eradicate the root cause of the problem. Over two million ear tubes will be inserted in American children this year, the most common surgical procedure for children.

Many children have ear tubes, which only last 6-12 months, inserted in their tympanic membranes. The primary function of the tube is to act like a drainage pipe, allowing the infection to drain out of the middle ear into the external ear. Without tubes, the infection can build, cause pain, and possibly destroy the three small hearing bones (incus, malleus, and stapes) in the middle ear. For this reason, doctors recommend surgery because a child could possibly lose his/her hearing with multiple ear infections. The tubes eventually fall out because the body rejects them as foreign objects. If the condition persists, further surgery may be required.

For the natural correction of earaches, the Gillespie Approach focuses on four factors:

1. Craniosacral Strain

The temporal bones will probably be out of alignment and restricted in their motion, causing a very short brain cycle of less than 6 seconds. The head will usually feel asymmetrical or lop-sided. Usually one temporal bone will be pushed in or medially (internally) rotated, and the other temporal bone will be pushed out or laterally (externally) rotated. Sometimes both temporal bones will feel like they are pushed in. The brain will usually feel very restricted around these positions, resulting in a very short brain cycle.

2. Fascial Strain

Fascial strain may start in the trunk of the body, traverse through the neck, and end in the temporal bones. The fascia can powerfully pull at a force of up to 2,000 pounds per square inch and create ear dysfunction.

3. Tight Muscles

Tight muscles may also be pulling on the temporal bones. If these soft tissues are restricting the motion of the temporal bones, muscle therapy also needs to be instituted.

4. Dietary Modifications

Similar to asthma, mucous-forming foods can clog the auditory (Eustachian) tube that connects the nasopharynx to the middle ear. This stagnation of fluid allows a breeding ground for bacteria to build up in the middle ear chamber causing infection and the earache. Children should avoid dairy products 100% (not cut back some!) for lasting results. In some cases the gluten in wheat may also be a factor.