

The Gillespie Approach Newsletter

Spring 2013

BY DR. BARRY GILLESPIE

"CONTENTED BABIES AND HAPPY FAMILIES CREATE A MORE PEACEFUL PLANET."

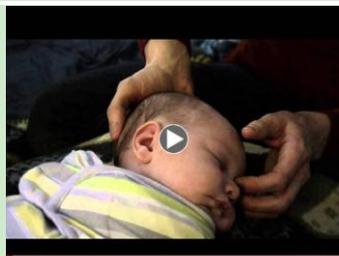
VIDEOS

VIDEO CHANNEL



Please visit
The Gillespie Video Channel
4 Amazing CFT videos

Here is the latest Video:
Infant CFT



Roman's Craniosacral
Fascial Therapy

SEMINARS

The Basic CFT Seminar for Children and Adults

May 17-19, 2013
Los Angeles, CA

Seminar Fee \$1500.00

[Click Here for Seminar
Preview](#)

Contact:

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1-917-535-8583

The Introductory Baby Brain

What's Happening In CFT

Necrotizing Enterocolitis (NEC)

Our team has discovered that CFT can possibly prevent NEC in newborns. In all honesty I had never heard of this disease until some NICU professionals recently brought it to my attention. For some "unknown" reason in NEC, the blood vessels and lymph drainage in the intestinal area become restricted in some low-weight NICU babies. Their intestines then become necrotic, and death can quickly ensue. It is a horrible disease. NEC is the #1 killer in the NICU with about 1,000 babies dying of it in the US every year. From our preliminary clinical observations and without basic medical research, we believe that tight mesenteric fascia appears to be the most probable cause of NEC.

When I first saw that 1,000 babies died a year, it was a typical intellectual exercise for me, like 100,000 people in the world die every day from starvation. Day after day, I do not see these people starve, so it becomes a statistic. I do not think about what happens in the NICU everyday either. It went somewhere in my brain, got lost, and OK, what's next in my life?

Today that perception changed. I saw a young boy from Florida, who was a 34-week-old preemie in the NICU. An "infection" quickly went through the unit and the two twins on either side of him died. The doctors did not tell anyone what the problem was, and they told all of the NICU parents not to panic. But what is a parent to think? The nurses changed the linens continually and kept everything as clean as possible. The father, who was on pins and needles for weeks, said his boy was lucky to survive.

The father described a death scenario similar to NEC. One newborn died very quickly, and the other one died 48 hours later. The emotions bubbled up in me. What did the parents of the twins feel? How does anyone handle that? How does the medical staff handle that? What does the extended family feel? It was overwhelming for me.

With the boy's parents watching during my examination, my eyes started to swell up, and I was fighting back the tears. I was taught to be the trained professional....haha, so much for that class. Is it OK for the "doctor" to cry at some point? After all this is the human

Score and CFT Seminar for Newborns and Infants
May 20, 2013
Los Angeles, CA

Absolute Prerequisite: The Basic seminar

Seminar Fee: \$400.00

[Click Here for Seminar Preview](#)

Contact:
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1-917-535-8583

The Basic CFT Seminar for Children and Adults
Sept 20-22, 2013
Philadelphia/King of Prussia

Seminar Fee: \$1500

[Click Here for Seminar Preview](#)

Contact:
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1-610-666-9060

LEARN MORE

Please visit my website for more information.

www.gillespieapproach.com

Please email me with any questions about the seminars or if you have questions about integrating The Gillespie Approach and CFT into your practice at drbarryrg@me.com

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experience, isn't it? When they left, I let it all out for about 20 minutes. There are still tears coming out writing this piece.

There is no diminishing that fact that our research with distressed babies is *huge* for all babies coming onto the planet. But now the stakes have risen to the life and death level. I believe that parents will have a positive "felt need" for preventative CFT in the NICU because they don't want their baby to die. Parents can do without CFT by taking drugs for their headaches, and their children can also take drugs for their asthma and earaches. Their babies can seemingly grow out of their distressed issues like colic and reflux without CFT too. After all, these are all "just" quality of life issues. But now some babies from a vulnerable NICU population of 200,000 Americans per year may die without CFT. The game has changed dramatically.

My friend, Celia Pardue RN, has decided to leave her current job and reenter the NICU in the Philly suburbs *just for the purpose of introducing CFT into the Philadelphia NICU scene*. I explained our newborn research to her in 2006, and she knows how important it is for babies. She also tears up at the thought of the consequences of NEC; she has been there and knows what it feels like. We are so excited that she is onboard to move the work forward. We are also excited to be so close to the top pediatric hospitals in America.

Our goal is to develop teams of CFT/NICU therapists in America to clinically prove the answer to NEC. We want every baby who enters the NICU to be checked for fascial strain, and if needed, to be treated with CFT as a preventative measure. We believe that when used appropriately, CFT is a safe, high reward/low risk procedure. We believe that an answer to NEC is definitely possible. We want to give everyone hope and end the terrible heartbreak. God holds the Plan.



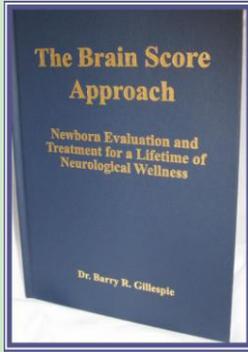
FOR PARENTS: HAPPIER, HEALTHIER, SMARTER, AND STRONGER IS THE BUZZ PHRASE.

BY: DR. BARRY GILLESPIE

How do you take six years of great newborn research that few people on the planet understand and create a form that everyone can easily buy into to transform the world? I have formulated a possible model to answer this question from both the consuming parents' point of view and the provider birth professionals' point of view. If something else is possible for CFT at birth, I am open to your ideas.

My favorite video is Simon Senek's inspirational talk on ted.com. He said that people don't buy what you do, they buy why you do it. I believe that parents are not going to buy into craniosacral or fascial work, at least not in the beginning, and that is OK. They do not understand it, and they do not really have to know it. But they are going to buy into what it does for their newborn.

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The Brain Score Approach

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Cost:

1-4 books = \$25/book
shipped in the United States

5 + books = \$19/book
shipped in the United States

"In this world babies reach their optimal cognitive potential to think, reason, learn, focus, and concentrate at birth. "

I did some brainstorming with a few CFT people (thank you, Chandra "Stronger" Sherman). We came up with happier, healthier, smarter, and stronger. We did it in that order for the alliteration effect with the "h" and the "s". Very simply, I believe that parents are going to want this work because it gives them the best opportunity to have a happier, healthier, smarter, and stronger baby. It is that simple. From what I remember from great literature and philosophy, we are dealing with a universal truth. I may be wrong, but I am trusting that virtually every parent on the planet wants this for his or her child. People don't buy what you do, they buy why you do it.

If we need to describe our work to anyone where even a child would understand it, we would say: *We help relax tight babies.* That is exactly what we do. If they want to know more on how we do it, we would say *by helping them stretch or unwind.* I believe that everyone gets and feels comfortable with these non-threatening concepts. There is no mention of craniosacral, fascia, cerebrospinal fluid, brain cycles, or sacral cycles....very medical and possibly scary to a parent. People don't buy what you do, they buy why you do it.

This is how Krissy, Mike, and I got to the four aspects as a result of our research:

Continue Reading

FOR BIRTH PROFESSIONALS
BY DR. BARRY GILLESPIE

Simon Senek also says that you want to attract people who believe what you believe. We believe that CFT at birth will create a more peaceful planet. Our website is setup to attract people who believe this concept. He discusses the Law of Diffusion of Innovation where all new ideas go thru a specific process. If you would like more information, please Google the Law and click on the Wikipedia definition.

The first 2.5% of the population are the innovators. These are the risk takers who see an idea and jump on it. They are the people who stand in line for six hours to buy an iPhone when you can buy it off the shelf the following week. They need to be first. This is how they want the world to see them. We are looking for these people - the first to do CFT at birth in Oregon, in New York City, in London, in China, in India, or wherever.

The next 13.5% of the population are the early adapters. They have seen that the innovators have taken the risk, are really on to something, and go for it too. They are the policy makers. We are looking for these people too. If they are sold, these two groups at 16% of the population will tip the early and late majority groups, the main 68% of the population. If we want mass-market acceptance of CFT at birth, we *must* hit that 16% tipping point. The laggards, the last 16% of the population, get it at the end or never get it at all. These are the people who may still use typewriters and dial phones.

We saw how this Law worked with the Amish Moms. The first few were the innovators and saw that it worked. They quickly told the early adapters, who also saw that it worked. After some time we

hit the tipping point where babies were coming from everywhere, and the community had bought into it. I see the Amish experience as a microcosm of a similar global phenomenon. It starts in a few areas, spreads, builds, tips, and everyone on the planet accepts it and does it. It is a beautiful thing.

The Law also states that people go through a specific process in learning a new idea. The first phase is awareness, which may or may not lead to the second phase of interest. The third phase is learning. The question is how do people make the jump from interest to paying and taking time to learn the work? The fourth phase is to implement the work and then finally, as the fifth phase, to confirm that it works, which feeds new people into the process.

Our goal is to attract practitioners who believe what we believe. CFT at birth needs to excite your spirit and feed your energy. We want to attract people who "get it" and want to make a difference for thousands of newborns. We want to attract the movers and shakers, the innovators who take the cause and make it their own. If this resonates in your soul, we would love to teach you how to do CFT at birth. We hope to see you in LA in May.

FOCUS GROUP

We are looking for maternity hospital nurses to participate in a focus group interview. If you know of someone, please help the cause by notifying and educating them. Their expertise is necessary to tell us what their needs are in learning Craniosacral Fascial Therapy at birth. We want to give them the best possible seminar. This concept will be very new to them, and we want to put out the correct message. You and they will be participating in a very important step to helping the world's newborns.

This focus group will take place in the Philadelphia area. For people outside the area, it will be done, one on one, by phone. Please call Barry for participation info at **610-265-2522**. Thank you.

VIDEO CHANNEL



CFTherapy - The Gillespie Approach



CFT on a 21 Month Old Baby



Jana's Journey from Birth to Recovery - Pending Copyright

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To learn more about The Gillespie Approach for babies, children and adults, contact Dr. Gillespie's office:

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