

The Expanding Osteopathic Concept to the Cranial Field
Option I, version 1
January 31, 1997

Name: _____

Total points: 151

(number of possible points in parentheses)

1. Andrew Taylor Still discovered Osteopathy.

(3)

William Sutherland discovered the cranial concept in the year 1898 at the Kirksville College.

2. The interdependence of structure and function is a fundamental osteopathic concept.

(3)

a) What is the primary function? motion
b) Give a clinical example from the cranial field of this concept, naming the anatomical dysfunction and the clinical manifestation.

- Free motion of occiput in baby
- Condylar compression
Can occur vomiting by compression of the Jugular foramen upon CN X

3. The component parts of the primary respiratory mechanism are:

(5)

± inherent motility of CNS
± fluctuation of the CSF
± reciprocal tension of membranes
± articular mobility of the cranial bones
± articular mobility of the sacrum between illia

Describe the axis of rotation of the right temporal bone. ✓

THE AXIS OF ROTATION FOLLOWS THE ~~LINE~~ PETRIS PORTION OF THE TEMPORAL BONE

b) What is the diagnostic landmark for monitoring its motion?

THE MASTOID PROCESS

c) How does that landmark move in external rotation of the temporal bone.

WITH THE THUMBS ON THE MASTOID PROCESS, IN EXTERNAL ROTATION, THE THUMBS WILL COME CLOSER TO EACH OTHER BECOME

5. Describe
- axes of motion.
 - direction of motion of both greater wings of the sphenoid.
 - direction of motion of lateral angles of the occiput
- in each of the following.

(5) i Left torsion.

THE AXIS OF ROTATION IS ANTERO-POSTERIORLY (FROM THE NASION TO THE PISTIONS). WITH INDEX THE LEFT ^{greater} WING OF THE SPHENOID WILL MOVE ~~POSTER~~ SUPERIORLY WHILE THE RIGHT WILL MOVE ANTERIOR INFERIORLY. THE LEFT ^{lateral} OCCIPUT WILL MOVE ANTERIOR-~~INFERIORLY~~ INFERIORLY WHILE THE RIGHT ^{lateral angle of ang} OCCIPUT WILL MOVE POSTERIOR - SUPERIORLY

(4) ii Inferior vertical strain.

THE AXIS OF ROTATION IS ALONG THE SBS. BOTH

THE RIGHT AND LEFT GREATER WING OF THE SPHENOID WILL MOVE SUPERIORLY AND BOTH THE LATERAL ANGLES OF THE OCCIPUT WILL MOVE INFERIORLY

(4) iii Right lateral strain.

THE ² AXIS OF ROTATION IS A VERTICAL AXIS THROUGH THE BODY OF THE SPHENOID AND THE FORAMEN MAGNUM. BOTH THE GREATER WINGS OF THE SPHENOID WILL MOVE TO THE LEFT AND BOTH THE LATERAL ANGLES OF THE OCCIPUT WILL MOVE TO THE RIGHT.

6. That healing is accomplished by the inherent therapeutic potency is another basic concept in the science of osteopathy.

a) Name a technique used on the primary respiratory mechanism which enhances that therapeutic potency.

VENTRICULAR COMPRESSION OF THE 4TH VENTRICLE (C4)

b) Where would you perform this technique?

THIS TECHNIQUE CAN BE APPLIED PRACTICALLY ANYWHERE, ON THE OCCIPUT, PARIETALS, TEMPORALS, AND SACRUM.

c) How would you apply it at the occiput.

Include details of hand position, procedure and evidence of completion.

ON THE OCCIPUT, WITH THE FINGERS ON TOP OF EACH OTHER ~~AND~~ AND THE THENAR EMINANCES FACING EACH OTHER, THE THENAR EMINANCES WILL CONTACT THE OCCIPUT JUST MEDIAL TO THE OCCIPITAL MASTOID SUTURE. FEELING FOR FLEXION AND EXTENSION, WE WILL ENCOURAGE EXTENSION AND DISCOURAGE OR TRY TO PREVENT THE OCCIPUT FROM GOING INTO FLEXION. YOU WILL EVENTUALLY REACH A STILL POINT. A STILL POINT IS A POINT WHERE THERE IS A MAXIMUM INTENSITY WILL MINIMAL AMOUNT OF MOVEMENT. THE EVIDENCE OF COMPLETION IS WHEN THERE IS A SOFTENING IN THE BONE AND A GENTLE ROCKING OCCURS, LIKE A BOAT IN GENTLE WATERS, THEN GENTLY LAY THE HEAD DOWN AND THE TECHNIQUE IS FINISHED.

Diaphragmatic Respiration

7. What cranial lesions are usually found in the following conditions.

a) Difficulty in learning to suck in the newborn.

✓ HYPGLOSSAL NERVE, HYPGLOSSAL CANAL

b) Classical migraine headache.

✓ FORAMEN SPINOSUM, MIDDLE MENINGEAL ARTERY *SPINOUS QUAMOUS COMPRESSION*

c) Right otitis media.

EXTERNALLY ROTATED ^{RIGHT} TEMPORAL BONE *Probably internal*
internally *Note fixation*

d) Tense nervous sleepless baby.

FORAMEN LACERUM Magnum

e) Left maxillary sinusitis.

✓ INTERNALLY ROTATED LEFT MAXILLA

(10) 8 a) What is meant by the Primary Respiratory Mechanism.

PRIMARY RESPIRATORY MECHANISM THAT CONTROLS THE BASIC UNIT OF PHYSIOLOGIC FUNCTION IN OUR BODY. IT HAS A CRI OR RATE OF ~~18-12~~ ¹⁴ PER MINUTE.

b) How does it relate to the secondary respiratory mechanism or thoracic respiration?

THE PRIMARY RESPIRATORY MECHANISM IS SLIGHTLY SLOWER THAN THE SECONDARY RESPIRATORY MECHANISM. INITIALLY, WITH DEEP INHALATION OR EXHALATION OF THE SECONDARY RESPIRATORY MECHANISM, THE PRIMARY RESPIRATORY MECHANISM MAY CHANGE TO MATCH THE DEEP INHALATION AND EXHALATION OF THE THORACIC RESPIRATION.

c) What are the component parts of the Primary Respiratory Mechanism.

- THE INHERENT MOTILITY OF THE CENTRAL NERVOUS SYSTEM ✓
- THE FLUCTUATION OF THE CEREBRAL SPINAL FLUID ✓
- THE RECIPROCAL TENSION OF THE DURAL MEMBRANES ✓
- THE ARTICULAR MOBILITY OF THE CRANIAL BONES ✓
- THE ARTICULAR MOBILITY OF THE SACRUM IN THE ILIUM ✓

No Grade! Any comments about the course?