

## Visceral Manipulation

Visceral Manipulation can be used to treat the viscerosomatic reflexes seen in different diseases and dysfunctions. Some common indications for visceral treatments include neck pain which can be induced from infections or poor lymphatic drainage out the head. Sometimes, it may even result in headaches and severe muscle tension, such as jaw clenching. Furthermore, back pain may be induced from the viscerosomatic reactions of diseases in the heart, lungs, gallbladder, and GI tract, resulting in tissue TART changes over the corresponding vertebral segments. Lastly, pelvic pain can result from similar viscerosomatic effects of the uterus, ovaries, prostate, lower GI tract, and bladder to their corresponding vertebral segments as well. Here, patients may develop innominate dysfunction, and sacral torsions if left untreated. Thus, this Picmonic will review some of the different visceral treatments that physicians can use to treat the various dysfunctions.



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### Treatments

#### Treatment of the Thoracic Inlet

##### Lymph-lime Drain

Both the right and left lymphatic ducts cross Sibson's fascia, or the connective tissue made up of the scalenes and longus coli muscles. This crossing of the ducts can result in an area of restriction to lymphatic flow. When treating lymphatics, the order of treatment should be to treat restrictions first and then treatments that alter flow. Think of it as "opening the drain." Many techniques, including Myofascial Release or Muscle Energy with side-bending and rotation of the head and neck, can be used to treat the thoracic inlet and free it from underlying restrictions.

#### Doming the Diaphragms

##### Dome Diaphragm-trampoline

After opening the thoracic inlet, a physician should target the different diaphragms of the body to improve lymphatic return. A major diaphragm targeted is the thoracoabdominal diaphragm which can be utilized to improve respiration and lymphatic return towards the thoracic duct.

#### Myofascial Release

##### Mayo-fascial-fashion Release

Myofascial release is both a direct and indirect method of treatment and is passive in nature. You can use light pressure for superficial fascia, but this method can also be used with deeper palpation to focus on the fascia surrounding organs - particularly useful for treatments regarding the spleen, liver, gallbladder, and intestines.

#### Chapman's Points

##### Chaps-man

Chapman Points are believed to be a visceral-somatic reflex from the organs of the body. They are 2-3 mm small, smooth, firm nodules that can be palpated, similar to tiny pearls of tapioca in bubble tea. A majority of the points are paired anteriorly and posteriorly on the body and can be located below the skin and subcutaneous tissue. They also elicit a pinpoint, non-radiating pain in a fixed anatomical location. Chapman's points are indicative of a viscerosomatic reaction and can be treated passively by the provider to improve visceral function and manipulate the organ of concern.

#### Rib Raising

##### Rib Raised

Rib raising is known to be particularly useful for costochondral pain, respiratory conditions, and heart conditions. Rib raising is a passive treatment that can be completed for a bed-bound patient by targeting the overlying myofascial tissue. The physician's hands are placed under the thorax while the patient is lying supine, and even pressures are placed at the site of rib attachments to their corresponding vertebrae. Thus, physicians can utilize

parasympathetic and sympathetic manipulation to help improve muscle tension, lung aeration, and heart rate.

## **Ganglion Release**

### **Gang-lion Release**

Ganglion Release is in many ways similar to the myofascial treatments used in Chapman's points. These releases largely focus on intestinal processes and can be used to improve the symptoms of abdominal pain, bloating, nausea, and vomiting frequently seen in various GI/GU dysfunctions. The targeted ganglions include the celiac ganglion, superior mesenteric ganglion, and inferior mesenteric ganglion, depending on the location of the GI/GU dysfunction. Here, physicians will apply pressure over the respective ganglia until a palpable release is noted from the overlying fascia.

## **Sacral Rocking**

### **Sack-rum Rock**

Sacral Rocking is a treatment frequently used to normalize the parasympathetic response affecting the left colon and pelvic structures in order to influence colonic motility. In addition, it can be used to improve sacroiliac joint mobility due to sacroiliac dysfunction, pelvic congestion syndrome, or visceral reflexes such as those seen in dysmenorrhea. With the patient prone, physicians apply a rocking motion over the sacrum synchronous with their respiration. As the patient exhales, they augment sacral counternutation. As the patient inhales, they sacral augment nutation. As a result, the parasympathetic tone will decrease and resolve symptoms of constipation. Conversely, steady pressure on the base of the sacrum can assist in the alleviation of diarrhea or menstrual cramping.

## **Pedal and Splenic Pump**

### **Foot and Spleen-with-spoon Pump**

Pedal and Splenic pumps are used to improve lymphatic drainage and circulation throughout the body. These pumps can be particularly helpful in people who suffer from edema of the lower extremities, frequent illness, or decreased mobility. An important contraindication to lymphatic pumps includes heart failure as well as recent mononucleosis, specifically if using the splenic pump treatment.

## **Direct or Indirect**

### **Direct-route or Indirect-route**

There are many different forms of visceral manipulation, including direct manipulation toward the dysfunction and indirect manipulation away from the dysfunction. Releasing the fascial distortions surrounding the affected organs can improve not only visceral function but also the somatic symptoms that may accompany them.

## **Contraindications**

### **Infection**

#### **Infectious-bacteria**

Infection is a major contraindication to visceral manipulation due to the various structures affected by visceral manipulation, such as lymphatics, circulatory, and even respiratory. One important exception to this is pneumonia.

### **Recent Trauma**

#### **Trauma-spike**

If acute trauma is present, visceral manipulation may be relatively contraindicated. Whenever trauma is present, it should first be evaluated and addressed before any type of manipulation is attempted.

### **Malignancy**

#### **Malignant-man**

If malignancy is present, visceral manipulation may be contraindicated due to the risk of hematological or contiguous spread. Malignancies commonly described as contraindications include breast, ovarian, prostate, colorectal, lung, or colon/gastric cancers. In addition, metastases to the liver are a contraindication for visceral manipulation.