Clinical Report 1 (Europe)

Shonishin in Europe (2)

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3. Treatment of asymmetric babies with Shōnishin (a study)

Background

There has been no study outside Japan up to now, which proofs the effectiveness of Shōnishin. The present study about the treatment options of asymmetric babies with Shōnishin should contribute to the effectiveness of Shōnishin as a treatment method taking scientific criteria into account.

Till the year 2002 the author used to treat asymmetries in the early childhood using manualtherapeutic methods (infantile chiro therapy, craniosacral treatment, osteopathic techniques). A dysfunction in the area of the cervical spine (C0/C1 and/or C1/C2) caused by obstetric traumas (mostly in the sense of a blockage) can usually be considered as the reason for the asymmetry. Typically, these babies attract attention because of their head tilt, a scoliotic posture of the torso as well as because of disorders concerning vegetative functions due to the proximity of the vegetative nervous system (Ganglion cervicalis superius) to the cervical spine. Left untreated, these children may suffer from retarded development, damaged postures or concentration disorders later on.

The author made the experience that a reoccurrence of the blockage after two to four weeks could be noticed with about 20-25% of all successfully treated babies when using purely manual treatment only. Since 2003 he has integrated Shōnishin in his treatment concept in addition to the manual treatment. In this time he

has noticed a dramatic decrease of the recurrence rate from 20-25% to below 3%. Since then he could observe the cervical blockages dissolving again and again due to the exclusive application of Shōnishin only (which means without manual intervention).

So the question arises, if the dissolution of the blockages with Shōnishin were only individual cases or if they are reproducible. In case they are, it would be interesting to determine the likehood of a successful dissolution of the blockage in the area of the atlantoaxial joint and therewith a reduction of the related mostly vegetatively caused co-occurring symptoms when using the Shōnishin method only.

Apart of the proof of efficacy of Shōnishin as a treatment method, it was another aim of this study to establish Shōnishin as an effective treatment method which is pleasant for the child and cost-saving for the parents.

Methodology

Shōnishin was applied as exclusive treatment method in a prospective clinical research using a standardized process with babies between the ages of six weeks to twelve weeks suffering from a blockage C0/C1 and C1/C2.

Diagnostic Basics

- Examination form before/after treatment
- Entry questionnaire for the parents (anamnestic collection of data about pregnancy and birth, symptom description of their baby before the treatment)
- Questionnaire after completion of treatment for the parents (symptom description of their baby after the treatment, estimation about success and acceptance of the treatment

- Photo-/Video-documentation

Primary target parameters were changes in the movement functions in the area of the atlantoaxial joints (in angle degrees). Secondary parameters involved changes in the sensomotor- and vegetative system as well as the acceptance of the treatment method by the parents.

Treatment

The treatment took place following a standardized procedure. Each baby received three treatments in one-week intervals. The duration of the treatment itself was between three and five minutes. A manual-diagnostic whole-body status with particular focus on the cervical spine was taken at the beginning of the treatment series and one week after the last treatment.

Basic treatment (stroke-technique along the extremities and the trunk) (Fig.1)	to regulate the $\it Ki$
Vibration technique on Lu 9, LI 4 St 36, Sp 3	to emphasize the "centre"
■ SI 3	because of its close relationship to the cervical spine
■ Li 3 (Fig.2)	to reduce the generally increased muscle tone
• GV 14	for relaxation of the shoulder girdle
■ SI 9	because of its close relationship to the shoulder blade (scapula)
■ Bl 28	because of its close relationship to the sacroiliac joint
■ Bl 60	because of its erection supporting effect (allows a better head control in prone position)
Tapping technique periumbilical	to emphasize the "centre" (Stimulation of the spleen-zone around the navel)
Tapping technique along the Bladder Meridian on the level of the shoulder blades (scapulae) or in the lumbar area (Fig.3)	to provoke a certain neonatal reflex (the so- called Galant Reaction) to activate the Gb- Meridian



Fig. 1



Fig. 2



Fig. 3

Results

The proof of efficacy could be provided with following treatment results:

- 1. There was a dissolution of the blockages in the upper cervical area with 57, 5 % of all babies treated with Shōnishin only.
- 2. A breakup of the asymmetry could be proved in approximately 43% of the cases of all treated asymmetric babies.
- 3. An improvement of secondary symptoms could be seen in many cases. This concerned in particular crying patterns, sleep patterns and the acceptance of the prone position.

The study shows that Shōnishin is a gentle treatment method, which is free from side effects and pleasant for the baby. The effectiveness of Shōnishin can be documented by the treatment of babies suffering from blockages in the upper cervical area.

The advantages with regard to conventional treatment methods are that

- there is no need for a manipulation or mobilization of the cervical spine
- the feasibleness of the treatment is simple
- the treatment can even be done with crying or restless babies

Further advantages of Shonishin are:

- Short duration of treatment (1-3 sessions)
- Short treatment time (3-5 minutes)
- Little effort (short treatment time, easy handling)
- Very good compliance with the parents

The present study allows us to conclude that Shōnishin is an effective treatment method. The standardized proceeding in the treatment of asymmetric babies has proven its worth and is at least equal to other therapy methods.

4. Future prospects

Fields of application with Shonishin

For acupuncturists, especially for those, whose treatment focus is in the area of children, a new field of action comes in appearance with Shōnishin, respectively an existing one can be widened. Furthermore, Shōnishin is an interesting supplement - or even an alternative for any therapist with acupuncture knowledge using manual methods.

For that reason experiences of different nature are made in women's shelters, mother—child facilities and nurseries with Shōnishin. In this case women and children, who are in difficult social or monetary situations, abandoned, without any perspective and obviously no way out, are supported. These include e.g. traumatised women and children (for instance after being raped), who are only able to permit touching, as due to the "interposed" Shōnishin instrument no dermal contact with the skin happens.

The experiences of being able to influence posttraumatic disorders positively by Shōnishin set an impetus for another study which is to be made at the Medical University of Vienna, Department of pediatric intensive neonatology, neuropediatrics. Project title: Non-invasive Japanese Pediatric acupuncture (Shōnishin) for supporting neonatal abstinence syndrome (NAS). The motivation for this study is to apply a noninvasive, cost effective method without known side effects to reduce withdrawal symptoms and as a consequence to reduce the need of pharmacological therapies in neonates with NAS. We believe that the treatment approach is completely novel in the field of neonatology. This study intends to provide reliable data with a responsible assessment of $_{
m the}$ effectiveness of Japanese pediatric acupuncture

for the use in neonates with NAS. As soon as the study is authorised by the Ethics Committee, it can be implemented in the mentioned clinic.

Another field of application for Shōnishin will be in the treatment of very old people. In particular parameters like skin condition and mental condition seem to show retrogression into childhood:

Skin - Just like children's skin, old people's skin is very vulnerable because of its parchment-like structure (Fig.4). Concerning the stroking techniques this means that old people are not treated with the stroking technique for adults, but in a more tender way, just like the age group from eight to twelve or even younger.

Mental condition — The older people get, the less they seem to be living in the present. Memories or situations in the childhood dawn to awareness increasingly more and more again and do often influence the person's mood. Often, "childish" patterns of behavior become apparent, for example being fed, being brought to toilet, being cleaned, loss of bladder control and unadjusted behavior.

First experiences with Shōnishin in homes for the aged show promising treatment approaches. Even here it becomes obvious, that treatment with a Shōnishin -instrument is advantageous: Seniors often suffer from a shortage of touching. With Shōnishin the contact doesn't take place directly, but indirectly with an instrument. For that reason seniors have no fear of contact and are willing to allow the treatment.

Another advantage of treating elderly people with Shōnishin is that many of them have to take blood-thinning medicines. Due to the non-invasive and gentle treatment technique with Shōnishin, there is no contraindication.



Fig. 4

Conclusion

- Shōnishin is about to play an important role in the treatment of children. An increasing number of doctors and non-doctors (alternative practitioner, physiotherapists, midwives, Shiatsu-practitioners) discover this exceptionally gentle and effective type of treatment. Shōnishin finds its application in doctor's or acupuncturist's surgeries, midwife work and increasingly in clinics.
- In the framework of congresses (TCM, pediatrics) there is an increasing demand for Shōnishin -lectures, respectively Shōnishin events.
- Shōnishin offers a valuable support for the treatment of traumatized children and mothers.
- Amongst others, it is thanks to Shōnishin, that there is an increasing interest in traditional Japanese medicine, especially in Japanese acupuncture.

Reference

Wernicke T.

Shōnishin – japanische Kinderakupunktur. München: Elsevier; 2009

Kalbantner-Wernicke K, Wernicke T.

Baby-Shiatsu – eine energetische Ergänzung zur osteopathischen Behandlung. Osteop Med 2010; 11,2:10-13

Tanioka M.

Taishiryū-Shōnishin: Verlag Rikuzensha; 2005

Wernicke T.

Shōnishin — die japanische Kinderakupunktur. Standortbestimmung einer bei uns noch weitgehend unbekannten Therapiemethode. Dt Ztschr f Akup 2006; 49,2:18-24

Wernicke T.

Baby-Shiatsu und Shōnishin. Grundlagen und Voraussetzungen für die Behandlung von Babys und Kindern. Shiatsu-Journal Herbst 2006;46:16-18

Wernicke T, Kalbantner-Wernicke K.

Kinderakupunktur mit der entwicklungsphysiologisch orientierten Shōnishin-Methode. Dt Ztschr f Akup 2009;52,3:19-22

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