Hayfever & Seasonal Rhinitis

Seasonal allergic rhinitis – by Janie Godfrey

I thought this May-June issue would be a good time to revisit seasonal allergic rhinitis – our old spring- and summertime foe known as hay fever to all the sneezing, nose-blowing, eyeitching citizens who struggle with this yearly visitation. Bowen treatment can make a huge difference to the onset, duration and intensity of the body’s response to the allergens and histamines that trigger this condition.

Hay fever, asthma, food allergy and eczema are related allergic conditions and the tendency to develop them seems to run in families. The body produces an antibody called immunoglobulin E (IgE) when it comes into contact with an allergen. When there is a lot of pollen in the air, IgE is produced in reaction to it. Antibodies are usually only released to fight infection, but in this instance the body believes the pollen or spore is harmful. This leads to certain cells in the body, especially those of the respiratory system, releasing chemicals. One of these is histamine, which triggers the, often severe, allergic symptoms of hay fever. It contributes to an inflammatory response and it causes constriction of smooth muscle (one of the major causes of asthma). Hence, anti-histamines such as Piriton are taken by many people to try to control this.

Most Bowen therapists have a number of regular hay fever clients who book appointments as their time of usual onset approaches. Some, who start early with the tree pollens, will need to be seen as early as late January or early February. The latest arrivals will be booking in June for July/August trigger times. Often, people discover the anti-hay fever properties of Bowen treatment by accident: they come for treatment for a bad back or tennis elbow, for instance, and then discover that their bodies are not reacting as usual to the pollens that usually torment them. A typical example being a lady that came for her knee injury (after her large dog crashed into it from the side!), and she was amazed to find three or four weeks later that her responses to the pollens flying about were almost nothing compared to her life-long experiences with hay fever. Instead of itchy, red eyes and a nose streaming like a tap, she found she only had the occasional drip from her nose and her eyes were clear! Miracle, she said! Bowen, I said! Thereafter, she yearly booked in a set of three appointments in the month or so before she would expect the hay fever and she sailed through ‘the season’ without any significant reactions at all. Then I didn’t see her for about three years and when she booked an appointment after that gap, she reported that she hadn’t had any hay fever problems over those years. It was only in the past week or so that she began to feel some symptoms so she figured she needed a top-up.

Another type of response to Bowen is that of Simon, a 35 year old who volunteered for the yearlong study into the effect of Bowen on adult asthma. In addition to his asthma, Simon had always suffered from considerable hay fever each summer. He began his asthma treatments, according to the study’s protocols, in January. By early summer, his asthma attacks had decreased enormously and his hay fever, which he usually had full on for two months, that summer lasted a week. And this happy state has continued for some 5 years now.

In Bowen Technique treatment, the hay fever and sinus procedures are combined with the jaw (TMJ) procedure. A key part of that treatment involves the draining of the lymphatic system hidden behind the sternocleidomastoid muscles on either side of the neck. It seems that this area being blocked over a long period of time, or in response to a hay fever trigger, is the key to why it is so difficult to successfully clear the sinus area. When Bowen is given, this part of the treatment often produces an immediate positive response to the sinus blockage. Once started, it does not then seem to re-block. However, with the chronic cases, clearing this area can take a number of treatments, which must continue once per week or so until the blockage is clear. This can take more or less 3 – 6 weeks and occasionally more. Once cleared, it seems to stay clear.

There are also some gentle, ‘opening’ sort of moves that can be made over the sagittal sinus along the sagittal plane of the skull from the front hairline to as far back as you can go when a client is supine. There can be almost instant clearing of the sinuses after these moves. Cranio sacral therapists who have also trained in Bowen frequently comment on the effectiveness of this move also for the circulation of cerebrospinal fluid.

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Janie Godfrey is a Bowen Technique practitioner in Frome and has been in practice since 1999.

For further information or a full course prospectus:
European College of Bowen Studies, Head Office,
6 The Bridge, Frome, Somerset, BA11 1AR

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