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# Bowen Therapy & midwifery

#### Claire Harrison

he Bowen Technique is a gentle, deeply relaxing, non-invasive physical therapy that allows the body to attain its natural balance and heal. Effective as a structural treatment for specific pain, Bowen Therapy addresses the body as a whole, extending beyond the presenting symptom to the healing of underlying physical, chemical, emotional and mental causes of chronic illnesses.

The therapy is a series of orchestrated gentle movements at specific points throughout the body. These movements consist of subtle rolling moves over muscle, nerve, tendon and connective tissue. The therapist leaves the room between each pattern in the series so as to allow the patient the maximum space for deep relaxation and integration of the information received. The impact of the specific soft tissue moves has an effect on the body's autonomic, or self-governing nervous system, which enables it to achieve homeostasis at a cellular level and regain its own natural balance.

### **Background**

Bowen Therapy (or Technique) was discovered by Tom Bowen (1916-1982) from Geelong, Australia. Little is known about Mr Bowen's early life and how he came by his remarkable technique is not certain, however he worked on animals – greyhounds and racehorses – before he became busy as a therapist working primarily on people.

In 1974, the government of the state of Victoria commissioned a report into alternative therapies in the state and Tom Bowen voluntarily gave evidence to the panel. The report published by Commissioner Webb showed that Mr Bowen claimed he was performing an estimated 13,000 treatments a year of which the majority (88%) were described as first or second treatments. Bowen Therapy is still very popular in Australia, with anecdotal evidence of Bowen available on postnatal wards as a matter of course (Rousselot, no date).

Bowen Therapy has been in the UK for nearly 20 years and is quite well known in Europe (especially Germany) and in America.

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Bowen Therapy works on a number of levels - musculo-skeletal, chemical (or metabolic) and emotional



There are different versions of the original work that have been developed, all of which have their place.

According to the sixth report of the House of Lords Science and Technology Committee (House of Lords Science and Technology Committee 2000) Bowen Therapy is classed as a Group 2 Complementary Therapy, as practitioners do not diagnose and are willing to embrace and work with conventional medicine (House of Lords Science and Technology Committee 2000). Whilst not listed specifically, 'bodywork' is the nearest descriptor of the technique.

Bowen Therapy has been recognised by the National Health Service via the Complementary and Natural Healthcare Council (CNHC) and is one of 11 disciplines currently eligible to register (CNHC 2011). The CNHC's main purpose is to protect the public by means of regulating practitioners on a voluntary register for complementary and natural health care practitioners. The practitioners' interests are protected by membership of one of the two professional bodies for Bowen therapists in the UK. The largest is the Bowen Therapy Professional Association (BTPA), but there is also the Bowen Association (UK) with similar membership requirements. Both associations check that full members who are practising have the relevant qualifications, insurance and undertake suitable continuing professional development.

# How does Bowen Therapy work?

Bowen Therapy works on a number of levels – musculo-skeletal, chemical (or metabolic) and emotional. With primarily fingers and thumbs, the Bowen practitioner makes small, rolling movements (the Bowen 'Move') over muscles, tendons, ligaments and soft tissue at precise points on the body, using only the amount of pressure appropriate for that individual. No hard-tissue manipulation or force is needed or used.

It has been hypothesised that the Bowen move induces a piezoelectric\* effect within the fascia. Oschman (2000) and Athenstaedt (1974) suggested this effect increased the rate of production of collagen fibres within the fascia, so promoting healing. However more recent work by Schleip (2003) indicates that moves undertaken over sites in the body where there are numerous mechanoreceptors have a therapeutic effect on the fascia. Whatever mechanism the body is using to respond to the move, the therapy aims to help the body naturally gravitate to a position of homeostasis and balance. Rather than 'making' the body change, Bowen 'asks' the body to recognise and make the changes it requires to achieve that balance on whatever level it requires. This has been demonstrated through the feedback of BTPA clients where they show, time after time, that several problems will resolve after Bowen Therapy, not just perhaps the one that was their main concern.

Unfortunately there has been little empirical evidence to support these testimonials. There have been some small studies undertaken in Australia (BAUK 2011) and some larger informal studies done in the UK (BTPA 2011). As with many complementary therapies, there is little appetite within medical circles to provide funding for these studies even though results may look promising.

The treatment takes around 45 minutes to perform and many clients find that the treatment is very relaxing. It is hands-on and undertaken through light clothing which many clients find more acceptable. It can be administered on a massage table with the client prone and supine or sitting. However where the Bowen Technique is to be used for sports people; this can be delivered very quickly at a match, game or in the dressing room in a matter

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Box 1

# Symphysis Pubis Dysfunction (SPD)/Pelvic pain Dr. Anitha J

'I am a hospital doctor and a mother of two children. I had an uneventful first pregnancy with a normal vaginal delivery. During my second pregnancy, I had pain in my sacrum from 10 weeks of pregnancy. At that time, I was diagnosed with Symphysis Pubis Dysfunction (SPD). I was unable to walk, drive my car or do any normal work. I had to give up work at that time. Following this, I became totally house-bound I was finding it very difficult to perform the normal activities of daily living. Looking after my daughter just added to my burden. I was unable to bend, sit, stand or lie down for a long time. Shuffling in bed from one position to another took 3-5 minutes. Getting out of bed took longer. It was so frustrating and so time-consuming.

By this time I was crawling and I was given a pair of crutches for support. It helped, but the pain and the disability were still there. It was unbearable and present throughout the day and night. Strong painkillers were not an option. Paracetamol did not work.

I looked through various articles on SPD, but I did not find any convincing answer for this problem, until one of the research midwives suggested trying the Bowen Technique. Even though I was not a great believer in complementary therapies, I was ready to try anything safe, to try to get some relief.

I started having Bowen at 35 weeks of pregnancy. To my surprise, it worked like a miracle. I started walking without support immediately after the first session and the pain score reduced by half in the next couple of days. Even though I needed very frequent sessions (every 5-7 days), it gave me the muchneeded relief.

The technique consisted of very small, gentle moves in the affected areas of the body. I was ready to try this because it was noninvasive, did not have any side effects, like drugs do, and I was reasonably sure that it would not affect my baby.

Labour: My membranes ruptured a day before and again I had Bowen to accelerate the progress of labour. It worked again. The whole labour lasted for two and a half hours in total.

After delivery, I had some more Bowen therapy.

I would recommend the Bowen Technique to anyone in a similar situation. I consider myself fortunate to have learned about this, even though I started the therapy sessions very much later in my pregnancy. I would not wish any pregnant woman to suffer from so much pain and disability. I sincerely hope that this will help health care providers to recognise the condition more quickly and avoid the suffering due to SPD.'

Therapist Chris Burd

# "Bowen Therapy has been found to be useful at every step from conception to the postnatal care of mother and baby"

of minutes. It is a therapy best experienced for yourself, and clients can be guite sceptical at first as the therapist doesn't seem to be doing very much!

For problems that have recently presented, a therapist would usually recommend three treatment 5-10 days apart. This enables the body to make the changes as needed over a three week period. Clients who have had a resolution of their problem within this period often find 'top-up' treatments at a later date are beneficial for ongoing maintenance and as a preventative.

For those clients with more chronic problems, perhaps they have been suffering for a number of years or where there is severe nerve damage, then more treatments are required. Diseases such as Parkinson's or MS can respond to Bowen Therapy so, whilst the condition does not disappear, with regular treatment the symptoms have been known to be controlled.

# **Bowen and midwifery**

Bowen Therapy has been found to be useful at every step from conception to the postnatal care of mother and baby. This is demonstrated by the feedback from women who have used this therapy, which is included in this article in order to give more insight into how the recipients feel and what benefit they appeared to have gained from its use.

We know that during pregnancy the mother and baby's bodies are changing rapidly so in this case, rather than treatments 5-10 days apart, sometimes the moves will be done daily. The therapist can show partners or carers how to undertake some basic Bowen moves so that they can be used to provide relief from issues such as back ache.

As pregnancy progresses, the treatment can be delivered with the mother lying on her side, in a chair or even standing up, whichever is the most comfortable. Various ailments of pregnancy can be alleviated, for example, the therapy is described as being very helpful for women suffering from Symphysis Pubis Dysfunction (Box 1). Other women have found it has helped them in the reduction of anxiety relating to childbirth, the progress of labour as well as other problems for the baby in the early postnatal period (Box 2).



#### Box 2

# Conception (after miscarriage) breech position, labour, delivery, infant colic

#### Jennifer H, Midwife

'I am a registered midwife, practising midwifery for eight and a half years. I have worked in a big inner city hospital in Leeds and currently work at Ormskirk DGH. I began seeing Caroline for Bowen years before I tried for a baby; she treated me for a number of issues: migraines, irregular periods, constipation to name a few.

In June 2009 I miscarried at nine weeks; in October 2009 I miscarried at five weeks.

I was anxious, hormonally unbalanced, and saw Caroline for treatments on an almost weekly basis to help with both my emotional and physical well-being. Caroline performed various procedures on me and it was on one visit that something "clicked" and I began sobbing on the table, something I'd never experienced before.

Whatever the release was, I got pregnant the next week and throughout my pregnancy I continued to see Caroline for treatments to maintain my health and well-being and keep my anxiety at a manageable level.

At 34 weeks my baby was breech, not keen on turning and quite happy where he was. I saw Caroline for Bowen weekly and had the turning movements performed and he turned to cephalic. Seth was then not only cephalic for the remainder of the pregnancy but he was also ROA, lined up and ready to go.

On the day Seth was born I started with irregular period pains at 2.00am, they did not amount to much and soon stopped. At 12.00 noon I started with mild contractions 1 in 3, they never stopped and at 2pm Caroline came round and performed movements to encourage the labour to become established.

By 6.30pm the contractions had stepped up a few notches and were 1 in 2 lasting 90 seconds; I progressed to a water birth at home at 11.20pm of a baby boy, 8lb 8oz, alert, healthy and very chilled.

I was a 41 week primip, he delivered direct OA and my labour was just under five hours long, I did not have syntometrine for 3rd stage as placenta delivered independently.

I credit Caroline and her Bowen procedures for a quick textbook labour and healthy pregnancy for a number of reasons:

- I had a normal blood pressure throughout my pregnancy as I was calm and relaxed
- my baby turned from breech to cephalic and stayed that way following the movements Caroline performed
- Seth was in the perfect position to deliver; I had no backache at all during my labour, just pain in the tops of my legs.
- I had a quick labour experience that progressed well and safely
- Seth was alert and chilled out, he is now a very placid happy baby.

After Seth arrived he breastfed well. He developed colicky symptoms at four weeks old and Seth was treated with Bowen which helped this to settle and for him to sleep better.

Caroline helped me so much in getting pregnant, having a good pregnancy, labour and delivery and since Seth has arrived. I cannot recommend Bowen enough as I credit it for getting Seth lined up in the perfect delivery, as well as assisting with Seth's colicky symptoms.'

Therapist: Caroline Gillam

## Conclusion

As a Bowen therapist, I see regularly the positive outcomes for my clients of all sorts (both human and equine) although the therapy should not be considered a panacea. There are few contraindications and as it does not involve any high velocity or invasive movements it is generally safe to receive. In pregnancy, where the use of drug related interventions are extremely limited, it would be worth considering as an option especially for those women who are very worried about pain during pregnancy and childbirth and are open to the idea of complementary therapies.

If you are interested in using Bowen Therapy for any of your clients I would recommend making contact with a local therapist and trying the treatment for yourself. You will then be able to speak from first hand knowledge, see the effects it can have and

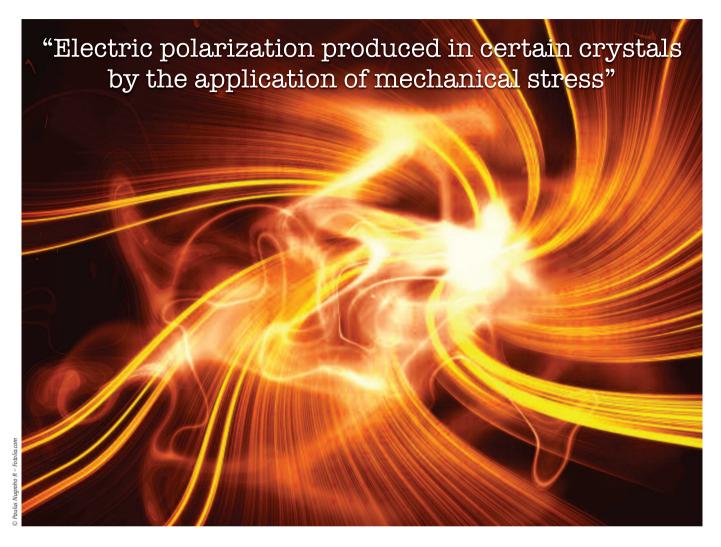
so inform your clients what to expect about how the treatment is administered.

GPs were advised by the NHS in October 2010 that they should only recommend therapists that are CNHC registered (DH 2010), so this is something that midwives should be aware of. Many therapists run specialist children's clinics (BTPA 2011) and have a great deal of knowledge of working with mothers and babies. With the right communication channels and discussion with the client, Bowen Therapy could become a useful string to the midwives' bow.

\*Electric polarization produced in certain crystals by the application of mechanical stress. DERIVATIVES piezoelectric adj. piezoelectrically adv. ORIGIN C19: from Gk piezein 'press, squeeze' + ELECTRICITY'

(Concise Oxford English Dictionary, 2008, p.1085).





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Claire has been practising Bowen on people and horses for over 5 years. She is the Communications Officer for the Bowen Therapy Professional Association (BTPA) which is a non-profit making member organisation. BTPA provides standards of professional excellence and a code of practice for the protection and benefit of the public and members.