Sacro occipital technique (SOT) and cranial treatment for a patient presenting with dysautonomia possibly secondary to vagal nerve entrapment in the jugular foramina: A case report



Sacro Occipital Technique Organization – USA



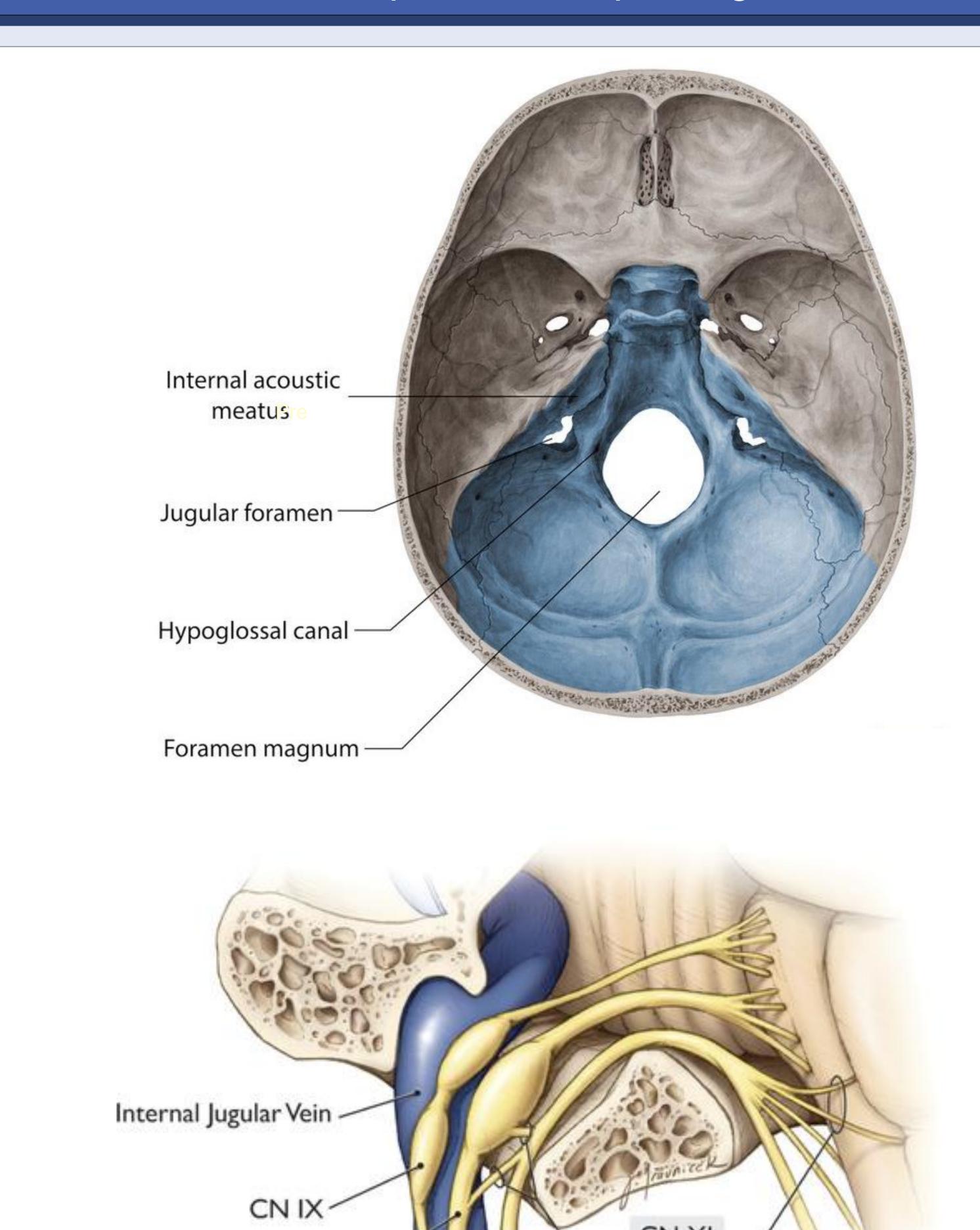
Objective

Chiropractic and Health Sciences

Dysautonomia has far reaching implications in a patient's health and wellbeing. This case discussed novel treatment for a patient presenting with dysautonomia unresponsive to various interventions.

Clinical Features

A 29-year-old female Caucasian presented (2-year duration unresponsive to medications) with nausea, chest "tightness, difficulty breathing, heart palpitations, significant anxiety, abdominal sensitivity to palpation, muscle tension in the cervical spine/TMJ regions, and increased symptom intensity (6-months). The patient was also co-treated with a dentist, cardiologist, and



Interventions

SOT/Cranial evaluation/treatment revealed significant craniomandibular and dental-occlusal disorders, right cervical/suboccipital myofascial palpatory pain/hypertonicity, and sacroiliac joint dysfunction. Treatment focused on balancing her pelvis, craniomandibular region, and cervical spine, with particularly cranial treatment vagal nerve (jugular foramina) decompression.

Results

Immediately following treatment her heart palpitations stopped, chest tightness/breathing improved, anxiety reduced, and palpatory pain/tension to the abdominal region decreased significantly. The patient is still under care for TMJ issues but her symptoms have not returned in the months following the initial office visit.

Conclusion

Further study into sympathetic/parasympathetic imbalance, associated with vagal nerve entrapment in the jugular foramina might be warranted. Greater research is needed to determine if chiropractic care might be helpful for other patients with

References

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