The Perrin Technique for the osteopathic diagnosis and treatment of Chronic Fatigue Syndrome/ME & Fibromyalgia Switzerland November 12th & November 13th 2016



From: Dr Raymond Perrin DO, PhD. Registered Osteopath and Specialist in Chronic Fatigue Syndrome/ME. Hon. Senior lecturer - The School of Public Health and Clinical Sciences at the University of Central Lancashire, Preston, UK. Vice Patron - The British School of Osteopathy

Winner of the 2015 Research and Practice Award from The Institute of Osteopathy.

I am delighted to inform you that after a quarter of a century researching, treating patients and lecturing across the World on the osteopathic approach to the diagnosis and treatment of CFS/ME, I have organised a 2 day workshop in Switzerland, in conjunction with Daniela U. Merlo-Senn, OsteoMed-Center and the Swiss osteopathic association (SBO-TOM), for practitioners with experience of basic cranial methods and an interest in CFS/ME or Fibromyalgia.

Venue (for max. 10 Osteopaths):

Venue (if more than 10 Osteopaths):

Daniela U. Merlo-Senn Osteopathy and Craniosacral-Therapy SBO-TOM Osteopathic Association

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Price:

It is a net price cost-course for members of the osteopathic Association SBO-TOM. Depending on the number of the participants and the venue, we have not yet a fix price. Non-members pay an additional charge.

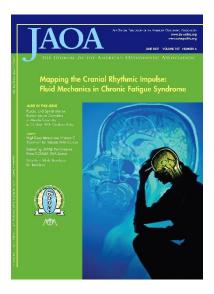
This workshop has been approved for CPD in the UK and has just been taught to the clinic at the European School of Osteopathy which is the first college in the world to receive a Perrin Technique license. It has also been accredited by the AOA for CME as it fulfils the more rigorous seven core CME competencies required to teach in the US.

1. Osteopathic Philosophy/Osteopathic Manipulative Medicine – The Perrin Technique is entirely based on the application and the teaching of knowledge of accepted standards in

osteopathic manipulative treatment appropriate to the treatment of CFS/ME, CFIDS and fibromyalgia. Future planned refresher workshops and newsletters will ensure that the practitioners remain updated with the latest developments in the field of CFS/ME.

- 2. Medical Knowledge The workshop will amply demonstrate and apply knowledge of accepted standards of clinical medicine with the other current treatments being examined and discussed.
- 3. Patient Care There will be hands on practical teaching of the physical examination and treatment of CFS/ME and fibromyalgia. By the end of the workshop, delegates will have been taught and be required to demonstrate the ability to effectively treat patients and provide medical care that incorporates the osteopathic philosophy, patient empathy, awareness of behavioral issues, the incorporation of preventive medicine and health promotion.
- 4. Interpersonal and Communication Skills This is so important in the field of CFS/ME and fibromyalgia. The workshop will show how by explanation of what we now know to be occurring with this disease interpersonal and communication skills enable a physician to establish and maintain a much better professional relationships with patients, families, and other members of health care teams.
- 5. Professionalism The workshop will go through the case studies of a variety of the hundreds of CFS/ME and fibromyalgia patients treated by Dr Perrin and will emphasize the practitioner be cognizant of physical and mental health in order to effectively care for patients.
- 6. Practice-Based Learning and Improvement The entire 2 day workshop will be dedicated to demonstrate the ability to critically evaluate methods of clinical practice, integrate evidence based medicine into patient care. The previous and present research trials undertaken by Dr Perrin with leading scientists from some of the top universities in the UK will be discussed.
- 7. Systems-Based Practice this s covered in day 2 of the workshop which will be practically based showing the delegates how to provide effective and qualitative patient care practice cost effective medicine to improve the quality of life in patients with CFS/ME and Fibromyalgia.

Many osteopaths are familiar with my theory, which was highlighted with a front page and feature article in the JAOA 2007. 107(06), 218-224.



And also in "Osteopathische Medizin":

Perrin RN. Neurolymphatic pathways in chronic fatigue syndrome/myalgic encephalomyelitis: New Evidence supporting The Perrin Technique. 2013: Osteopathische Medizin, (German).

Chronic fatigue syndrome/myalgic Encephalomyelitis (CFS/ME) is a clinically defined condition characterized by severe disabling fatigue and a combination of symptoms including disturbance in concentration and loss of short-term memory, disturbed sleep, and musculoskeletal pain.

Since there is no accepted means of diagnosis by pathological tests such as blood or urine analysis, the standard diagnostic protocol of CFS/ME used at present within the NHS is one of exclusion. In other words the patient will only be diagnosed as suffering from CFS/ME when all other possible diagnostic tests have proved negative. This is not an adequate way of diagnosing any disease and causes much distress among patients who often have many exhaustive tests that still do not give any answer.

New scanning technology has been used by a team at Rochester University, New York to provide the first visible evidence of the existence of a drainage system for proteins and other large molecular structures from the central nervous system which involves cerebrospinal drainage through perivascular spaces into the lymphatic system. Further research by the team in Rochester have shown that the control mechanism in the brain regulating this drainage system is the hypothalamic-locus coeruleus axis which was hypothesized by Dr Perrin in his doctoral thesis of 2005.

Recently in June 2015 researchers in both Virginia and Helsinki have both shown proof of this neuro-lymphatic pathway to lymph vessels lining the brain.

New evidence from biopsy has revealed a major source of pain in this disorder is due to an increase in sympathetic nervous activity as well as sensory innervation. An earlier clinical trial on CFS/ME by the author concluded that a major cause of the muscle fatigue is lack of lymphatic drainage of the muscle due to sympathetic dysfunction. This would lead to a excess of lactic acid among other metabolites in the muscles of CFS/ME patients, which has been confirmed in 2013 by researchers in Newcastle, UK

These latest findings support the long held view of osteopath and neuroscientist Dr Ray Perrin that CFS/ME is a disorder of the neuro-lymphatic drainage system leading to neurotoxic build up within the central nervous system and the ensuing cascade of many symptoms of autonomic dysfunction seen in CFS/ME and fibromyalgia. Reversal of lymphatic flow leads to a build up of toxic debris and varicose lymphatics. These findings were associated with a history of trauma, congenital and/or developmental problems affecting the cranium and spine in CFS/ME patients.

Viewing CFS/ME as a neuro-lymphatic disorder leads to diagnostic findings with specific physical signs which potentially aid in the early diagnosis of the disease. This is the subject

of a major new blinded control trial in the UK by The University of Central Lancashire in conjunction with the Wrightington, Wigan and Leigh NHS Trust which has begun in July 2015 at Wrightington Hospital, Wigan based on a chance discovery in 1989 by osteopath and neuroscientist Dr Raymond Perrin who revealed a possible association between certain biophysical dysfunctions and the incidence of CFS/ME. The concept of CFS/ME being primarily a physical disorder is foreign to most of the medical profession. However, many of them recognise that CFS/ME has physical symptoms.

Dr Perrin, the chief investigator for the research project has observed repeated patterns of physical signs among sufferers that can not be dismissed as pure coincidence. The project "Examining the accuracy of a physical diagnostic technique for Chronic Fatigue Syndrome/Myalgic Encephalomyelitis" has received ethical approval from the NHS and is being conducted by a team at the Allied Health Professions Research Unit at The University of Central Lancashire, Preston in association with 3 NHS Trusts.

Dr Perrin presented evidence to support his work in San Francisco in March 2014 at the biennial conference of The International Association for Chronic Fatigue Syndrome /Myalgic Encephalomyelitis (IACFS/ME), attracting interest from many of the 400 professionals from around the world. The scientific community are tantalizingly close to gaining an understanding of CFS/ME.

If an evidence based bio-physical diagnostic procedure was introduced at the earliest onset of some of the symptoms associated with CFS/ME then it could lead to a much speedier diagnosis. The NHS would also be in a position to commence any management of the illness far earlier than the present protocol which in some regions takes at least six months before referral to a specialist unit and at least a further month of blood tests.

Thus if an aid to diagnosis was developed with identifiable positive physical signs rather than the negative exclusion, it would be much more preferable clinically. It would also reduce the huge financial burden placed on the health service by reducing the need of some of the pathological tests carried out at present.

For Further Information on the research and Perrin Technique: www.theperrinclinic.com