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**SUBLUXATION AND RETRACING
A NEW APPROACH**

ABSTRACT. The Author – one of the most prominent and widely read Doctors of Chiropractic in the world today – underlines in the first part of his article how the study of the position in which the subluxation shows its effects is of fundamental importance in order to plan a correct therapy. The second part of the article deals with the phenomenon of retracing in various types of medical approach and emphasizes its significance in order to verify the effectiveness of the therapeutic treatment.

1. The Posture of Subluxation

The subluxation often reveals itself when a person is in a posture of physical (or emotional) injury, pain and/or dysfunction. The subluxation is most amenable to location and correction in that posture.

Years ago, Dr. Lowell Ward of Long Beach, California had a patient who felt fine standing, but had head, back and sciatic pain while seated. Standing X-rays showed a balanced, unsubluxated spine. He wondered, “What would I find if I X-rayed her in the seated posture?”

Her seated films revealed an unbalanced, distorted spine. No wonder she hurt when she was sitting. Dr. Ward asked the question “Am I missing other subluxations by limiting my analysis to one posture?”

Dr. Ward’s subsequent research consistently revealed that subluxations would come and go as posture changed. He found, for example, that a person

injured while seated (as in a car accident) would show subluxations and distortions only in the seated position and little if any subluxation damage standing. Similarly, a person injured while playing sports or falling down stairs would reveal damage in the standing posture and a relatively healthy seated spine.

Most interesting was that the X-ray could reveal the dynamics of the accident. For example, an accident victim thrown forward and to the left would reveal a spine with the head off-center left and forward (relative to the sacrum)¹.

One of the advantages of Koren Specific Technique (KST)² is that it permits the practitioner to check (or analyze) a patient in any posture. KST practitioners are not dependent on an adjusting table or any fixed position.

Make it hurt – Positional adjusting.

Patient: “Doctor, it hurts when I do that.”

Doctor: “Don’t do that.”

¹ What kind of X-rays did Dr. Ward take? Dr. Lowell Ward, developer of Spinal Column Stressology, was a strong influence in developing Koren Specific Technique. Influenced by Dr. I.N. Toftness, Dr. Ward studied spinal alignment and posture using four 14”x36” (full spine) radiographs. The 4 radiographs are:

1. Standing (weight bearing) anterior to posterior (A to P)
2. Standing (weight bearing) lateral
3. Sitting (or sedentary) anterior to posterior (A to P)
4. Sitting (or sedentary) lateral.

Dr. Ward compared the relationship between the head and the sacrum, looking for global cranial anteriority, posteriority, and laterality.

² The Koren Specific Technique is a breakthrough in patient care. For information on KST, go to www.korenspecifictchnique.com

The above Henny Youngman joke notwithstanding, we always ask the patient to “do that,” that is assume a posture of pain/dysfunction/subluxation.

“Make it hurt,” we tell them. “Bring out the subluxation.”

We then check and correct (adjust) the patient in the posture of subluxation. The result is a more completely adjusted patient with a healthier spine, structural system and nervous system.

The possibilities are endless.

How does this work in the office? Simple. A person who only hurts or has trouble when turning a certain way is told to “freeze” and is then checked in that position and corrected (adjusted).

For example, a person who hurts when they hold a golf club in a certain position is checked for subluxations and adjusted while in that position (preferably holding a golf club). A guitarist who only hurts when he’s holding his guitar could be checked and adjusted in the position of holding his guitar or actually holding it.

A secretary who only hurts when holding the mouse at a certain angle should be checked and adjusted while in the position of holding the mouse at a certain angle. A person who was subluxated when they hit their head in a cramped, stooped position (perhaps becoming deaf!) would best reveal their

subluxation when going into a cramped, stooped position, in other words, the posture of injury.

So, the possibilities are endless.

Emotional subluxations.

It's perhaps no accident that the word posture can refer to an emotional as well as a physical stance. Just as a patient may place him/herself in a certain physical posture and then be checked for subluxations so a person may put himself or herself in a certain emotional posture and do the same.

“Think about the car accident, see the road, smell the car, be in the accident, ok, now hold that thought or picture.” Patients can be checked and corrected while reliving the accident, thinking about a lost loved one, a difficult relationship, a life crisis – the possibilities are endless. It appears that the adjustment in that emotional state unlocks or interrupts a mind/body reflex.

How does this care help patients?

Old, chronic subluxations that were buried away and not amendable to correction before are finally able to be located and corrected (or released). We can locate the cause of the patient's subluxations faster, adjustments hold longer and patients are much happier with the results.

We personalize patient care.

We tailor each visit to the patient's specific needs and life experience, they are not treated the same way each visit.

How do you adjust people in the posture of subluxation?

In order to adjust a person who is standing or sitting with their arm, head, neck, shoulders or other body part in a twisted position we use an adjusting instrument.

Koren Specific Technique (KST).

Koren Specific Technique is a quick, easy, gentle technique used to locate and correct subluxations anywhere in the body when the patient assumes any (physical or emotional) state or posture. With KST the practitioner is able to check and correct (adjust) the entire structural system, including the cranial bones.

KST patients hold their adjustments longer; healing goes deeper (retracing is often observed). KST's light force is comfortable for patients; children and the elderly especially like KST's gentle approach. It is easy on practitioners who do not have to stress their arms, shoulders, hands and backs to give adjustments. An additional (and very important) bonus for KST practitioners is the ability to specifically analyze and adjust oneself.

2. Retracing

Koren Specific Technique (KST) patients often experience the phenomenon of retracing. What is retracing? It is a healing process as old physical and/or emotional energies, diseases, pain, or other symptoms “come to the surface” after your subluxations are corrected.

Some examples of retracing.

After a KST correction feelings of lightness and happiness surface and the patient begins laugh. Or, the reverse occurs and the person begins to cry, even though they might not feel sad.

Health is returning but suddenly the original symptoms return and then clear up as quickly as they appeared.

Some patients externalize or release old toxins or poisons after a KST correction. This may include a rash or other skin condition, diarrhea, a fever, cough, mucus or some other “cleansing” reaction. These conditions are usually quite short-lived.

Retracing may not occur immediately after a KST correction but may occur later that evening (or a few nights later) as patients report more, different or vivid dreams. Some patients say they don't remember having any dreams because their sleep was uncharacteristically deep.

Don't worry, it's good for you.

No matter what happens, remain a little detached and enjoy the show. Your body and mind are healing and whatever happens is good for you.

Retracing experiences can be both physically and emotionally quite intense. In such instances it's often difficult to see the experience as part of the healing process. Patients going through a particularly intense retracing pattern may feel as if they've had a serious relapse or are perhaps even getting worse.

Please let us know what retracing you may be experiencing, because, although retracing usually passes relatively quickly, patients have been known to terminate their care as a result of it. Such patients are cheating themselves of complete recovery.

Retracing in other Healing Arts.

The phenomenon of retracing has long been recognized by the chiropractic profession³ and other healing arts. Practitioners of various forms of body-work including Rolfing, shiatsu and massage therapy, have long noticed their clients experiencing “flashbacks” as they release energy long trapped in their bodies.

CranioSacral™ therapy, developed by John Upledger, a doctor of osteopathy, uses the terms “unwinding” and “somato-emotional release” to

³ Stephensen RW. *Chiropractic Textbook*. Davenport, IA: Palmer School of Chiropractic. 1927; 98-99.

describe this phenomenon. As Dr. Upledger writes: «Body tissues (especially connective tissues) possess a memory. When an injuring force occurs, the tissue which receives the force is changed. Perhaps it retains the energy of impact...The human body then either dissipates that energy and returns to normal; or the body somehow localizes the impact energy and walls it off, much as it walls off the tubercle bacillus during the inactive state of the disease. After the energy of the injury has been effectively isolated, the body adapts to this area. Energy (electrical, magnetic, prana, Qi or your own personal preference) is then forced to move around this area rather than through it... When the original injury is discovered, the repressed emotional components of the somatic injury frequently and concurrently release.»⁴

Homeopathy.

Constantine Hering, a homeopathic researcher codified the laws of retracing and is it known as Hering's Law or "The Law of Cure" which states that as retracing occurs symptoms will move

- (a) From interior to exterior;
- (b) From the most vital to the least vital organs; and
- (c) In reverse order from that in which the symptoms appeared.⁵

⁴ Upledger J, Vredevoogd JD. *Craniosacral Therapy*. Seattle, WA: Eastland Press. 1983: 251.

⁵ Coulter HL. *Homoeopathic Science & Modern Medicine*. Berkeley, CA: North Atlantic Books. 1980: 24.

According to Dr. Hering, true healing only occurs if there is retracing: “Only such patients remain well and are really cured who have been rid of their symptoms in the reverse order of their development.”

Psychotherapy.

Psychotherapists have also noticed “retracing” calling it progressive abreactive regression or PAR.⁶ It is considered a phase one goes through as part of the movement towards healing and wholeness. As the individual “moves out to new behaviors and accomplishments... [he/she] turns inward to experience fears and dysfunctional programs that need to be worked out.”⁷(5) PAR appears normally in human affairs as a part of growth at all levels. An example of a person experiencing PAR is one who gets a long-deserved promotion and begins to be troubled by feelings of incompetence. Or an artist who is suddenly recognized and instead of finding exhilaration, becomes depressed.

Retracing and Medicine?

Retracing seems to occur with healing systems that permit the body to express and rebalance itself. Retracing is uncommon in standard medical practice because medicine tends to suppress disease and mask symptoms. This

⁶ Stein A. Comprehensive family therapy. In R. Herink (Ed.), *The Psychotherapy Handbook*. New York: New American Library. 1980: 204-207.

⁷ Kirschner DA, Kirschner S. *Comprehensive Family Therapy*. New York: Brunner/Mazel. 1986: 18-19.

may be dangerous. For example, antibiotics, steroids, anti-inflammatories (NSAIDS) such as acetaminophen and most other drugs are all considered to suppress symptoms and drive disease deeper into the body.

It's part of your healing journey.

Retracing is part of your healing journey. It may open the door to a deeper understanding of your unique issues. Retracing can help you open your heart and mind to some of life's deeper healing mysteries.