

BOWEN ASSOCIATION UK



Bowen News

Autumn 2013 – Issue 61



EVERY BODY IS BETTER WITH BOWEN

Editor's Column

Well, what a summer! Not just weather-wise but sports-wise and Bowen-wise as well. The Lions, the tennis, the Ashes, the Tour de France, and the AGM – the UK went mad!

And personally, it followed a similar path – my son topped his year at University; my daughter got better than expected grades at AS-Level; my wife's business is doing well; and I've finally got my act together and finished off the little book I've been writing for the past year called "The Musings of a Therapist". It's quite exciting seeing the artwork and final formatting!

On the downside – my mother-in-law is only present in body and not in mind anymore; and my Dad was diagnosed as a Coeliac this summer. I've just spent a weekend in Guernsey making sure he's following the gluten-free rules and behaving himself. ☺

Interestingly, all the literature indicates that both "diseases" could have been avoided, or at least their onset delayed through better nutrition from their mid-30s onwards.

And the AGM...well what an interesting one it was this year – full of surprises, and excellent presentations and debates. The front cover provides a taste of what it was like to be there. You can find out more in the review inside.

The major change, if you don't know already, is that Angela stood down from the Chair and Veena is now our new Chair. You can read her first note to us all overleaf.

This Edition...

With Bowen Hands no longer available to us all, I've tried to include more in this edition and we've stretched to a whole 20 pages!

Camelia Pop is going to provide a quarterly report on the progress of her Cerebral Palsy case study, which she has just started.

Stephen Ludbrook provides some thought-provoking letters.

Kim Pearson provides yet another success story.

And there's a comprehensive write-up of the AGM, which was well attended and was truly an interesting day. And it's not just me saying that as you'll see from the photos that I've sprinkled throughout the newsletter. Some of them deserve captions, others were just not printable but if you talk nicely to Rob...

Newsletter Prize

The "contribution to the newsletter" prize for this edition will have a choice of:

1. Name Badge, or
2. Marketing Leaflets

Each worth about £10. If you haven't seen the name badge yet, here's an example.



Of course, you'll have your own name on the badge ☺

A thank you from me...

...to Tracy Bradley in Warrington. On holiday in Turkey, she helped a lady who had just hurt her back. A little Bowen helped her to get on the plane home.

She then found me through Tracy's and the Association's websites. And has become a complete convert to Bowen and introduced her son to me last week as well.

Just goes to show that what we do affects everyone in the Association in some fashion!

And finally...

A disappointing note ☹ There were no entries for the marketing competition that I announced last edition.

So I'll give it one more quarter because I'm sure some of your responses got lost in the email problem we had with our site, didn't they?!

Of course, you can redeem yourselves by making the next edition even more interesting with your stories. ☺

Dave Riches

Tel:
07748118071

Email:

dave.riches@bowen-technique.co.uk



p.s. what do you think of our new logo?

Chair Letter

Hello Everyone,

I am very proud to have been elected as the new Chairperson for Bowen Association UK. I was re-reading some of the old Bowen News and in Issue no 35 Spring 2007 Angela had signed off by saying that "This may be my last report as at the AGM a new Chair may be chosen" and it has taken her another six years at the helm to find someone to take on this role!

I have very big shoes to fill in replacing Angela, who has done this job with exceptional patience, integrity and devotion over so many years. Her knowledge of the Association, Members and Trainers is vital to the continued growth of the Association and I am very pleased that she is staying on to be part of the committee along with the other valuable committee members.

We are constantly striving to get Bowen accepted by professional bodies, insurance companies and the general public. Any ideas or thoughts that any member has will be welcome in our endeavours.

Veena Lidbetter

Chair of BA UK



A letter from Angela Cannon

Dear Colleagues,

As you know, it gives me great pleasure that the 2013 AGM and Seminars wasn't just a great event, it was also the beginning of an exciting new chapter. I was delighted to stand down as Chair and hand over the role to my colleague Veena Lidbetter. ☺

Since Veena joined the Executive Committee she has shown enthusiasm and dedication to the continued success of your Bowen Association. She has the vision, commitment and corporate experience to take the Association forward.

I haven't been pensioned off yet though! I will still be active on the Executive Committee, supporting Veena and the Executive Members whenever they need. I will also continue to share the administration role with Sheila Whyles who, as you all know, gives a huge amount to the Association. Rest assured, you will still find me on the other end of the phone at Head Office and I will still look forward to hearing from you.

Thank you, everyone, for the continued support you gave me during my time as Chair. Over the years, I have made many wonderful Bowen friends, and enjoyed the opportunities that has brought.

My good wishes to Veena for the future success of the Bowen Association UK and its members.

Angela Cannon

Vice Chair



Bowen Association

Committee report

Membership Decline

It's been a busy year but, as those of you at the AGM will know, there has been a reduction in the number of students who, having passed their module 7, have not joined our Association. This, coupled with the natural progression of members retiring, has affected our income considerably.

We need to attract more members into the organization. The more members we have the more benefit there is to everyone, not least being able to keep our membership fee low! More income will increase our ability to spend money on shows, PR and advertising.

We already correspond with students during their training courses to encourage them to join and need more ideas on how to attract others to our Association.

It would be great, for example, if you could encourage practitioners you meet, who are not already members of BAUK, to come and join us or encourage people to become practitioners. The more people we have as practitioners, the more Bowen becomes known, the more clients we attract. We are looking at incentives to encourage you!

Membership Renewals

It's September renewal time again and thank you all for your prompt responses to the renewal letter. We don't send the paperwork out too early - we know from experience that it sometimes gets overlooked that way or put in a drawer to 'deal with nearer the time' and then discovered too late! It's our policy, to mail-out 2 to 3 weeks ahead of the due date.

However, even with this policy in place, renewal of membership still causes a lot of problems each year. Therefore, we would like to suggest that members set up a standing order so that payment occurs automatically every year. We will gladly provide you with the information you need

to put this in place. That way you will never miss another renewal.

Happily our membership fees remain unchanged yet again, with NO increase this year. The Bowen Association UK is proud to be regarded as not only the gold standard in the industry but also the association that gives you the most for your membership.

New Members

Just to let you all know that everyone who has a Bowen qualification, not just a Bowtech one, is very welcome to join the Bowen Association UK and enjoy the benefits of being a member of our Bowen family.

So if you have friends who recognise the value of a professional Association membership please refer them on to us. Either call or email HQ at Boston to begin the application. The more members we have the more we can do for you all.

New CPDs / Courses

At the AGM, our members voted for full hours to be awarded to the 50/50 courses which we have currently on offer. What does this mean in practice?

If you attend a course run by a non-Bowtech trainer you will now receive the full 8 hours per day for your attendance as opposed to only half that as in the past. Naturally, the course must be pre-approved by the Bowen Association UK in order to qualify for the CPD hours. These hours count towards your annual CPDs in exactly the same way as the Bowtech course hours.

As a reminder, you have to complete 32 CPD hours over a period of two years, or 16 hours per year. At least 50% of your CPD hours must come from courses provided by the recognized Bowtech trainers.

For example, Alastair McLoughlin's "Art of Bowen" course will now be awarded 8 hours per day and new course provider Alastair Rattray will also attract 8 hours per day.

Remember, if you have any suggestions for courses that you feel are suitable for the Association to include on its list of non-Bowtech CPD approved courses, please let us know and we will assess them.

First Aid Renewal

If your first aid renewal is due soon you can now do this via our brand new online renewal course – First Aid Plus. Members who have already taken the course say it is fantastic – that, plus the fact that you can spread it out over times to suit you, makes it an easy way to get your skills updated.

And we've negotiated the amazing price of only £14.95 for Bowen Members!

Contact the office or pick up details from the Members Area of the website, it's under 'Forms and Info' at the bottom of the list in that section.

P.S. You get 6 hours CPD for it too!

Bowen Hands

It was disappointing to lose the free copies of Bowen Hands, but we appreciate Ossie's past generosity and understand that his costs have increased. We have asked him to provide us with a pdf copy to allow us to offer an 'online version' on our website and hope that will happen in the future.

The good news is that our own Bowen Association Magazine 'Bowen News' continues to be a really good read. Take advantage of it and share your experiences, studies and stories whether successful or not! It's all really interesting and helps us all expand our Bowen knowledge and promotes links between us all.

CNHC

The recent newsletter from the CNHC states there will be an increase in their fees for new registrants to £60 plus £10 per discipline up to a maximum of 4 from September 2013. Annual re-registration will be £60 plus £5 for each additional discipline. A visit to the CNHC website provides further information.

Major Web site problems

As you know, in August our website and email account was attacked by Malware and we wrote to you all with instructions on how to clean your computer/tablet/phone and claim your new passwords to login to both

your email and the Members Area of the website www.bowen-technique.co.uk.

We needed you to do this because the Malware came in via a member's computer – but we were unable to trace the original source. The cleaning of everyone's IT equipment was a necessary security precaution for both you and us. We are delighted to report that everything is back to normal – and if you are one of the very few who has not yet been in touch with us to tell us you have cleaned your computer/tablet/phone, and claim your new passwords, please email office@bowen-technique.co.uk and let us know.

Many thanks to all of you for responding so quickly to the problem – it meant we were able to put everything right very swiftly.

Public Relations

Our focus this year is to help you make your local shows work for you. If you plan to attend one please do get in touch and we can discuss how we can support you – from loaning banners free of charge, to writing your press releases before and after the event, to sourcing other members in your area who may want to join in, and so on.

In terms of business for your practice and you personally, local shows are better than the nationals every time. People not only get to discover The Bowen Technique, they get to meet you too.

Call us for a chat on 01205 319100 – there's an answerphone 24/7 and we'll always get back to you – or you can email office@bowen-technique.co.uk with your number and we'll call you.

Have a great autumn everyone!

Best wishes from your

Bowen Association Executive



Success Story

“My name is Sharon Archer. I am 42 years old and work in a preschool part time. In December 2008 I injured my back at work. I received treatment from an osteopath and had acupuncture but my condition slowly deteriorated until my left leg became very weak and couldn't support my weight. I went to the doctors and was sent to A&E where after tests I was referred to the chronic pain clinic. The consultant said that I had probably slipped a disc and that it had gone back in place but had damaged the muscles and nerves in my lower back. I was taking 21 pain relief tablets a day and often had to use a walking stick to support my leg. I was unable to work or drive and couldn't walk very far and I was in constant pain.

After eighteen months I received denervation treatment which meant my nerves around my injury were burnt away, which hopefully would stop the pain I was in. After the procedure the pain wasn't as bad and it took me five months to come off most of my tablets. I still had to take ibuprofen, paracetamol and on bad days co-codamol.

Over the last few years I have tried to build up my muscle strength and my core muscles to protect my lower spine but kept injuring myself so had to stop all forms of exercise. I have had quite a few relapses where I get nerve pain in my lower back, which is debilitating and means I have to take time off of work.

I used to suffer from nerve pain when I got cold and when my son had football matches most Saturdays after a match I had to take pain relief, lie down and sleep for the afternoon and the rest the next day. I suffered from itchy legs below my knees and I got pain in my wrists, which woke me up at night and my wrists were very weak. I slept most mornings to be able to go to work in the afternoons and was unable to drive very far without being in pain afterwards.

I was tired all the time and was unable to do more than one thing in a day (e.g. going shopping for an hour then going out for the evening) otherwise I had to rest for a few

days to recover. I have tried physiotherapy but have been told that although they can help with my muscles they cannot do anything regarding my nerve pain.

I went to my son's football training and a friend said to me how was my back and I said although a lot better than before the denervation treatment I had hit a brick wall and was resigning myself to the fact that this was the best that it was going to be and that I might have to give up work. She said had I tried Bowen technique and that she knew of someone in Willingham who a friend had used and how good it was. I looked it up on the internet.

It has now been 8 months and I started with Bowen once a week and am now only having it every two months. The results have been amazing!!! I can now go to my son's football match and then go shopping afterwards without having to rest. I take hardly any pain relief tablets. My legs are only itchy when I get really tired and my wrists don't hurt anymore. I can't believe the change and wish I had tried Bowen years ago!!!

I have also started Pilates, which in-turn is helping with my balance and strengthening my left leg. I still get tired but overall cannot believe how much better I feel. In August I was able to go on holiday to California for an 18-day holiday which involved lots of walking, long car journeys and lots of long days out. I had a wonderful time and through the whole holiday only had one afternoon where I had to rest and I was then fine the next day. This would never have been possible before I had the Bowen Technique!”



Kim Pearson, Cambs

When Sharon came to see me, she explained she had suffered with lower back pain since her early twenties. She hurt her back quite badly about 4½ years ago helping a child in the nursery where she works. She carried on working and the pain got worse. 2 days later she felt a pop in her spine, 2 days after that her left leg went weak, she couldn't hold her weight, this was

when she went to A&E the rest Sharon has described in her letter.

Over a series of 10 sessions, which began weekly and then gradually became further apart, I addressed Pelvis, coccyx, shoulder, elbow and wrist, carpal tunnel, infraspinatus release, rhomboids, kidney, hamstrings, knee, burning heel, sciatic procedure.

After each session there were gradual changes where Sharon would report something had improved

After 10 sessions she was off her pain killers completely, her legs were no longer itchy and all her pain was so much better. She also no longer needs to have a sleep in the afternoons. After that she has been to see me every couple of months for maintenance. Although she occasionally has relapses it never gets as bad as before she came to see me. It can normally be treated and nipped in the bud before it develops into severe pain.

Bowen is such an amazing therapy. This lady aged 43 thought she would have to endure this severe pain for the rest of her life. It is so rewarding when Bowen can change someone's life like this.

Bowen in the Press

It would seem that Bowen is enjoying a surge of interest in the media this summer! Here are some of the ones that I've seen mentioned:

- Eurosport TV Channel - 11th Sep 2013. James Ellison was interviewed after his 3rd place in the first race of the British Superbike Championship season. He's a client of Andrew Wildsmith Pattison and you can see the interview on our Facebook group page – Bowen Association UK.
- What Doctors don't Tell You – August 2013. If you're a member of this you can see the article at www.wddty.com.
- Saga Magazine, September 2013, Page 93. Kylie Minogue, Bear Grylls, Dwight Yorke, Elle Macpherson – just some of the people who've enjoyed Bowen...apparently.

- Midlothian Advertiser, September 15th. "Midlothian therapist to aid Bosnian war victims".

Students' Corner

New Student area

We continually add material to our website so it's always worth a visit to see what's new. For example, we now have a specific area on the website for students to learn about the professional membership of the Bowen Association UK and other useful information such as how to use the Bowtech logos properly on marketing material.

Many people don't realise that the Bowtech symbol is a copyright owned by Ossie and Elaine. And to be allowed to use it, we have to follow certain guidelines on its placement on websites and marketing material, and make sure it's only used by members of the association.

This might seem strange but commercially it's all about brand recognition and these days companies protect their brands vigorously in order to remain competitive in the market place.

I hope you agree that the Bowtech logo is instantly recognizable. One of the purposes of the logo is to let the public know that anyone using it obviously belongs to BAUK, which in turn means that a high level of professionalism, integrity and skill can be expected of them.

Student Presentation

On the website, you'll soon find a presentation put together by Marco Ferro. Very recent graduates will have had this presented to them during their training course. However, as it is so new, it's quite likely that graduates over the last 2 years have not seen this at all.

So have a look, it has information relevant to you still and perhaps to more mature practitioners. Just click on the tab on the home page of the Bowen Association website.

Cerebral Palsy Study

Over the next few editions we're going to follow the progress of a study that Camelia Pop has set up to look at the efficacy of Bowen on Cerebral Palsy. In this edition, Camelia provides some background to the study and her initial results.



Camelia Pop, Manchester

This spring I found out about a 5-year-old boy from my area whose family was raising money for expensive surgery in the USA to help him stand up. I suddenly wanted to try

helping him more than with a few pounds.

At that time I didn't know what *conditions or symptoms* cerebral palsy causes in a child. I didn't know about the seizures, or the Botox they have periodically in their ankles for instance. Before contacting the mother, I looked on UK websites for information about CP and Bowen in order to send to the mum. I found a few very good cases:

- <http://www.bowen-therapy.co/Bowen/kidsclinic/testimonial2.html>
- <http://www.thebowentechnique.com/case-histories.html#9>

And I found out more myself about how other children improved their quality of life.

The child came for his first session and a few days later he was able to cross his legs for the first time in his life and was more active and brighter at school, which was a surprise for both me and his mother!

He came for another session and then went on holiday. After that they were very busy fund raising (they need about £50,000) and didn't continue with Bowen. I see now pictures of the boy and he is very happy and active, no matter the hour of the day, just like a normal child.

But this case, even though they stopped the sessions, gave me confidence that I could really help those families to have a better lift. So I decided to run a project to look at how the Bowen Technique might help their mobility and quality of life.

Publicity

The hard part was to publicise this project as newspapers and other societies wouldn't. I decided to work with 10-12 children aged between 0-14 years and offer them up to 10 sessions. All sessions are free of charge.

If any of our members know someone who could guarantee that my press release gets printed in the Manchester area it would be very helpful.

My Group

I have 5 children so far, whose mothers found me on Netmums and Facebook. My group has quite a diverse set of conditions which include:

- A mild or severe version
- seizures or not
- be quadriplegic, hemiplegic
- good, poor or very poor eyesight, etc.

Measurements

I will look at their:

- ability to walk and sit
- general coordination
- behavior
- ability to perform everyday activities
- muscle tension and muscular cramps
- tiredness
- speech

These metrics are not relevant for every child because they are very different, but at the end we'll look at how much they have improved in the relevant one. One child might still not walk but has started to play, smiles more often, be more interested in things, or have reduced seizures. It will still mean that Bowen has helped then ☺

Introducing the Children

Child #1 – Boy, 6 years old, can't sit, can't walk, but can speak and he is a happy and clever boy. This is a boy who said to his mum: "Mum I wish I could run one day like other children".

After 2 sessions – no change in his physical condition but is very happy and speaks all day long without breaks. He is full of energy

and blows his whistle a lot! I think he speaks more clearly now.

His mum was a little bit disappointed that she didn't see a change in his arms or legs but I told her to be patient. I pointed out the improvement in his emotional side, which is important and the fact that now he speaks happily all day long. That meant his brain responded to Bowen and is a good thing. He has had his 3rd session and I'll report on that in the next edition.

Child #2 – Girl, 9 years old, mild cerebral palsy, can walk, hemiplegia, left arm and leg affected, pains in the right leg when she walks more than 500m, seizures. Never sleeps during the daytime.

After the first session she fell asleep in the car on their way home! After 2 sessions there is no change in her limbs. She had just 1 seizure in the week following the second session, but her father can't link this to Bowen because she's had periods before without seizures.

I asked about her emotional level and behaviour and the response was that yes, she had a good week, happy and well behaved but maybe it's just because of school holiday. So we have to wait more until we see something happening.

She has had her 3rd session.

Child #3 – Baby Boy, 14 months old, a twin, total body involvement, can't sit on his own, happy, responsive. Left side more affected.

After the 1st session: his left hip badly rotated inwards, left leg very stiff. However he seems to be using his left hand more with his fingers moving individually and open! She thinks that's because she stopped the hips stretching*. Personally I believe that's a response, see Bowen Hands March 2012, page 18, Andra with brachial plexus palsy. I sent to mum this article.

***Note:** Some children with CP are advised to do not just exercises (physiotherapy) but also strong stretching of the hips for instance that I believe can annihilate the Bowen moves.

2nd session: the baby was very happy to see me, that's good, babies feel instinctively if you help them or if you harm them. Left leg wasn't very stiff, left hip still rotated but

maybe not so badly. He fell asleep during the session. I told the mum to do the stretching if she really wants to do it, but that it will affect the Bowen outcome. I gave her the Bowen booklet by John Wilks to understand more about Bowen and build her confidence in Bowen.

3rd session:

- the hip is not inverted anymore, and mum doesn't do any stretches!
- Legs seems to be more flexible and now he uses his left arm and hand very often.
- Fingers moving individually and he grabs toys with this hand which he didn't do before Bowen!

Child #4 - Girl, 14 years old, severe cerebral palsy, can't sit, can't walk, can't talk, just vocalizes, very sleepy, poor eyesight, doesn't want to play, smiles occasionally, but she understands what people say to her, multiple infections.

After 1st session, she slept all day and night and woke up the next day at 3pm (~27 hours)! When she woke up started vocalising very loudly (this is nearly a miracle for the parents), smiling and very alert and taking interest in her toys and surroundings. She now stretches out her legs, arches her back and stretches out her arms when waking which the parents have not seen before. They are amazed.

After 2nd session, she wasn't as active as after her first, but still vocalised a lot. She has picked up an infection and is on antibiotics, so she will have to wait for her third session.

Child #5 – Girl, 2.5 years, twin, hemiplegia left side, hydrocephalus, can't walk, can't stand, speech delayed, poor focus.

Whilst writing up her details, I found out that she is having strong manipulation every Friday for 6 Fridays, but she will finish this programme in September. We will start the study after that. In any case, I performed BRM 1m1-4 and BRM 2 m1-4 so that she got a few days of benefit from the Bowen. On the second day the girl woke later than usual. Mum very happy!

[To be continued...]

Letters to the Editor

Stephen Ludbrook is a man on a mission in this edition. His pen is loaded with ink and he's not afraid to use it! The following three letters and questions are all from Steve. They are to the point, thought provoking, and challenging. *Ed.*

What makes Bowen Therapy Effective?



Stephen Ludbrook, Oxon

Writes:

I was always aware that there are a number of issues that affect the effectiveness of Bowen including the:

- hydration of the body
- client's openness to the treatment
- precision of the moves
- etc.

But recently I came across another, possibly as equally important, factor:

- The therapist's own self-belief!

Below is a link to a YouTube documentary on the science and psychology of placebos.

http://www.youtube.com/watch?feature=player_detailpage&v=QvbQnMvhQFw

Or search for: "Placebo: Cracking the Code", Nicholas Humphrey.

It is an hour long but well worth viewing. It covers placebos related to dummy pills, surgery and suggestion.

Some 39 minutes into the documentary, Dr Albert Mason discusses a remarkable case back in 1952 at Queen Victoria Hospital, East Grinstead, where he used hypnosis to treat a patient. At the time, he believed the 15-year-old boy was suffering from an extreme case of warts (most of his skin had thickened and cracked like an elephant's hide). Dr Mason had treated warts through hypnosis before and believed he could help the boy with this severe condition.

The results he obtained in just one week, after suggesting to the boy that "the warts on your right arm will fall off and new skin will grow", were stunning. Later that year the results were published in the British Medical Journal and subsequently covered by America's 'Time Magazine'.

It was only later that Dr Mason learnt that the condition was not warts but a rare genetic disease.

Following the publication of the results, the interest in the case from similar skin condition sufferers was overwhelming. Thousands of people contacted the hospital! He treated many people but could never repeat the success of his first case. Not one of the new clients responded in the slightest way. Why not?

Dr Mason, states that possibly it's about self-belief. Initially he believed he was dealing with warts and he knew he could cure them. But, knowing that the subsequent patients were not suffering from warts, his sense of conviction of success was greatly reduced.

Could a Bowen therapist's belief in their own ability also be a strong catalyst to success?

[Members, your thoughts on this are most welcome, *Ed.*]

Why aren't we exhibiting at conferences?

The Committee responds...

"We are not attending because to have a stand independent of the Training Team (BTUK) is simply cost prohibitive - and the BTUK is not participating this year. We are however, working in association with Cam Expo and are included in their publicity material, website and follow-up contact system when anyone asks about Bowen or lists it as an interest when registering for the show.

But Michael Patrick (new BTUK Trainer) will perform a Bowen Training Demonstration on one of the days.

We would have liked to be more involved and present at the actual show - it's simply money that prevents us. However, we do

believe that we must direct funds towards shows that inform the general public, and are more likely to generate business for our practitioners and raise awareness of the technique itself, rather than to shows that are primarily for the industry itself.

To do both would be lovely, just impossible at the moment. If there are any shows coming up that fit the bill that you would like to put forward for the Executive to consider, we'd be really interested to hear from you.

[Ed. there's an invite to you all if ever I heard one! Get your nominations in now.]

Dairy – Bad for more than just Asthma?

In the winter 2012 edition of the newsletter I provided a short book review of Geoff Bond's "Deadly Harvest". In his book, Bond recommended that we should eat like our African ancestors did only 60,000 years ago – a mere blink in the eye of Evolution. Back then there were no domestic animals, no agriculture/farming and many of the items we regularly consume as part of the modern western diet were not available then. Bond advocates that a return to the diet of that time would enable us to avoid many modern day diseases. He makes 12 recommendations for a healthier lifestyle and one of them is *The Avoidance of Dairy Products*.

I thought it would be interesting to review the reasons why he says to avoid dairy because our Bowtech training highlights that dairy products should be avoided where asthma symptoms are present. But perhaps they should be avoided for more than just that reason?

Diseases Attributed, to some degree, to Dairy Consumption.

Bond maintains that milk fat (butter and cream), whilst good for baby cows, is not good for humans. It raises blood pressure and cholesterol, and hardens the arteries thereby increasing the risk of heart disease and stroke. He also states that it is a factor in, at least, the following conditions: Abnormal high insulin levels, Allergies, Autism, Breast Cancer, Crohn's disease,

Lung Cancer, Osteoporosis, Parkinson's Disease, Premenstrual Tension, and Prostate Cancer! What's more, only about 25% of the world population consumes a lot of milk-based products and it is in this sector that these diseases are prominent – cause for concern or just a coincidence?

But what about yoghurt, organic milk or milk from other species such as goat, buffalo, sheep, camel or even humans – these are better and healthy, aren't they? Not so, apparently. Bond believes the drawback to cow dairy applies equally to all dairy products, from all creatures.

Milk digestion in humans

After the age of about 4 years, a human does not create the enzymes that properly digest dairy products. In particular, we do not secrete the enzyme rennin that separates milk into curds and whey. Consequently, in most adults, the milk sugar, lactose, arrives in the colon in an undigested state where it feeds bad bacteria.

The body perceives lactose as an antigen, and therefore allergic reactions are produced, such as damage to the colon lining, headaches and diarrhoea. More subtly, lactose is strongly suspected of playing a role in autism, chronic fatigue syndrome and attention deficit disorder.

But dairy is beneficial for osteoporosis?

It is too simplistic to say, "take more calcium and it will end up in your bones". Women who drink 2 or more glasses of milk per day have found to be 40% more likely to suffer a hip fracture. The populations of Africa and Asia, which generally consume far less dairy products than Western Europe, do not suffer from bone fractures to any appreciable degree. Eskimos have poor bone health despite eating a calcium rich diet. And why should the body use calcium to build bones? It is just as likely to lay down calcium where it is not desirable e.g. in the arteries and heart valves as plaque, or in the kidneys as stones.

Overdosing on calcium supplements has a number of additional drawbacks such as the depletion of other essential minerals like magnesium and zinc, and production of toxic levels of blood calcium that can lead to kidney failure.

So given this view of dairy perhaps you should consider whether dairy products are really in your own best interest? In any event, the book is definitely worthy of a read and an eye opener to one man's strong belief that for healthy living we should pay far more attention to the lifestyle/diet of our 60,000 year old hunter-gathering ancestors.

Ed. Well, thought provoking indeed, do you agree or disagree? Is it as simple as giving up dairy or is there more at work here? What's your opinion? As one who loves his organic Guernsey milk, I know what my view is, but then I have been known to be wrong...at least once...I think ☺ So, who's going to provide a response to this?

European Commission Takes CAM Seriously

Well there's a headline I never expected to see! Thanks to *Roz Elliott* and her student *Sema* for pointing out this interesting article to us. *Ed.*

Across the institutions of the EU there is general agreement that the EU is facing a growing health crisis. A combination of an aging population, rising levels of chronic diseases such as cancer, diabetes and heart disease, a growing burden of mental ill-health and the challenge of anti-microbial resistance are all underpinned by the impact of the strain of austerity on healthcare systems. Such a situation begs the question as to whether there are ways to approach healthcare other than the current disease-focused, pharma-based model that seems to cost ever more to provide. It was in this context that the CAM Interest Group conference took place in June 2013

"Patient empowerment is on the increase. It progressively serves to put patients in the driver's seat – taking charge and control of their own health. Patients often know what treatment works for them, and which healthcare is efficient for their condition. This can include the use of complementary medicine." This statement, given by EU Commissioner Tonio Borg at a recent meeting in the European Parliament, is a

clear sign that the EU Commission is taking CAM more seriously.

The conference heard a set of presentations from a range of expert providers and researchers on:

- the growing popularity of CAM with citizens and patients;
- what characterises the holistic approach of CAM to patient care;
- various aspects of the current provision of CAM in the EU; and,
- the potential benefits of its integration into health systems.

Other speakers presented recent studies on the economics of CAM. These studies seem to support the proposition that its widespread use and integration could potentially result in cost-savings for health systems.

In their closing remarks, Mr Peterle and Ms Pietikäinen, members of the European Parliament, called for the EU to invest more in the research of the effectiveness and cost-effectiveness of CAM and to take action to resolve the highly confused and inhibiting regulatory situation that currently exists for products, providers and patients.

More information about this conference including the presentations of the speakers at: www.homeopathyeurope.org

On the other hand, in July 2013, the Belgian Council of Ministers decided that homeopathy is a medical act. Only medical doctors, dentists and midwives are entitled to practise homeopathy, and dentists and midwives only within their competence!

Lucky Prize Winner...

...is **Camelia Pop**, who has chosen the name badge. **Camelia** will receive her prize within a week.

Contribute an article to the next edition and you'll be in with the chance of winning.

CAM Expo 2013

The Committee has negotiated some publicity at the CAM Expo 2013 show in October and a discounted entrance price for members who want to attend. The deal includes exposure on their website as a supporter of the show and for them to provide us with their after-show feedback of information on people who signed in as being interested in Bowen so that we can use it. In return for this, we've been asked to publicise the event in our newsletter, so here it is. *Ed.*

See all the big names at camexpo 2013



Busy, informative, invigorating, and enjoyable – that's the verdict from last year's Camexpo. Camexpo is the UK's leading event for, practitioners, therapists, healthcare professionals, and students that are looking to improve skills.

An essential diary date for the UK's complementary healthcare community, camexpo's unrivalled line-up includes over 200 top natural healthcare suppliers, associations and training providers, plus over 100 CPD-accredited seminars, workshops and demos from some of the CAM industry's leading subject specialists.

Exclusive show-only promotions

Big name exhibitors – showcasing everything from VMS and natural beauty to essential clinical services and supplies – include industry favourites like BioCare, The Nutri Centre, A.Vogel, Green People, Ayurveda Pura, Eterno Naturals, Songbird Naturals, Solgar Vitamins, Acumag, Therapy Essentials, Balens, Mahi Naturals, Kinetic Natural Products Distributor, Holistic Insurance Services, Myofascial Release UK, Rio Trading Company, Algeos UK, The Alphamusic of John B. Levine, Water for Health, Bio-Kult, Vivomed, C&P Medical, Ovantis, and many more.

All the latest industry developments

Your £6.50 ticket also includes entry to 22 world-class keynote speeches. Notable highlights include a regulation update from the CNHC's Hazel Russo and Margaret Coats and 'Secrets to sustaining a successful CAM practice' by CAM Coach Mark Shield.



Plus sessions from Antony Haynes, Dr Marilyn Glenville, Medicinal Chef Dale Pinnock, Dr Jane Buckle, Naturopath Andrea Jacobs, and Patrick Holford.

Camexpo's popular Taster Workshop programme (priced at £18.50 each) provide 48 different ways to expand your business into new therapies and techniques.

When registering for your badge, use priority code **camx295** to attend for just £6.50 (normal price £20). Register to visit at www.camexpo.co.uk/register

AGM 2013 - Write-up

This summer saw the AGM take place on Wimbledon Mens' Final day. Regular updates were received all through the afternoon and the AGM finished just in time to see Andy's final couple of matches – good job we didn't have the opportunity to sit through the whole of the match is all I can say! In truth, the AGM just as absorbing and much more relaxed.

This photo provides a glimpse of what it was like at the AGM and I'm offering a prize to whoever comes up with the funniest caption for whatever it is that Marco is whispering in Ossie's ear! Although to be honest, several of the photographs deserve captions.



Approximately 50 members turned up to participate in what proved to be a very interesting day with each speaker providing extremely informative presentations. Here are some snippets from the day, which can't hope to convey just how interesting it was. If you weren't there then talk to someone who was and look at the videos of the presentations on the members' area of the website.

At lunch, I overheard someone say, "I only came to the AGM because I was here for the workshop. I didn't realize it was so interesting!" That's how good it was! ☺

AGM Notes

- **Declining Membership;** During Rob's finance report, he highlighted the problem with the way in which membership has declined over the last few years. Our association depends on the revenue brought in by the membership fees. Without it we aren't viable, we can't market ourselves, and we can't invest. There is a variety of reasons why membership continues to decline including:
 - Less students joining once they've finished their course.
 - Natural "wastage" as people stop practicing Bowen.

The debates followed two themes:

- How to increase membership?
- How to obtain revenue from other sources?

The first requires some analysis and follow-up with students and exiting members, and generation of ideas. The Committee is looking for a **volunteer** or two to lead this activity. If this interests you then **please contact the office**.

The second activity focused on marketing and also the idea of a Bowen Charity event. Sheila Whyles described the marketing material and services available to all members, including:

- Banners for loan
- Editorial writing
- Material for shows

Talk to the office to find out more about these free services and if you'd like to be involved in a Bowen Charity event.



Holistic Insurance – Gemma Brown



Well, this I found to be much more interesting than the title suggested ☺ Gemma (left) has been at Holistic Insurance (HI) for 9 years now, with HI celebrating its 10th anniversary this year. Gemma has been the account manager for the Bowen association since 2004 so she knows us well. The purpose of her talk was to provide some background into how our insurance works, and what to do and not do if a claim is made against us, or even if you think someone might make a claim. Her presentation is available, as are all the others, in the Members area of our website. Here are some snippets for you:

- If you were to receive a Solicitor's Letter, a typical out of court settlement will cost you about £5,000. Complaints rarely go to court but if they do then the settlement will be much higher. In Ireland, a typical claim is 20,000-30,000 euros! [You do have insurance don't you? *Ed.*]
- In the last 4 years, Gemma has not seen a case go to court but approximately 5% of claims do go to court.
- In the last 5 years, there has been only 2 claims against Bowen practitioners.
- BUT claims against complementary therapists have increased by 100%, i.e. doubled
- As part of your insurance, HI provides these services:
 - Complaints – how to stop them turning into a claim against you.
 - Tax investigation advice.
 - If you're accused of committing a crime.

Client Records:

- Client Records: These need to be kept for a minimum of 5 years because a client can claim within 3 years of the treatment if they think you injured them or made them worse. However, that time period starts when they're 18 or over. So, if they're 12 years old now, you'll need to keep their records for up to 11 years!

Dealing with complaints/claims

- If you receive a complaint or think you might then you need to contact HI within a week. They will then advise you on the next steps.
- Often, people will complain, even if you think the session went well or they said at the time that they were happy with it.
- If you receive a Solicitor's Letter – Do not respond to it, send it straight to HI.
- Never, ever say “Don't worry, the Insurance will pay”. It does not work that way! And it encourages people to claim.
- If you refund money, you must say that it is a “gesture of goodwill”, not an admission of liability.
- Conversations can get tricky. If you get stuck in a conversation, your last resort is to ask them to put their complaint in writing so it can go through your formal complaints procedure.
- There are **deadlines!** A Solicitors Letter must have a response within 14 days, so don't put it in your filing tray, get in touch with HI.

Types of complaint

- Gemma has seen a marked increase in people complaining lack of information about the treatment and what to expect. E.g.:
 - Being touched in unexpected area.
 - What to expect when they get home.
- She has also seen an increase in complaints in being told it will work, or not being told that it might not give the results they're expecting.

What makes the Insurer happy?

- Good training.
- Consent forms. An example is available from the HI website.
- Letting your client know what to expect and what not to expect.
- Good practitioner notes! [Ed. Look on www.trainings.co.uk for a webinar by David Balen, 25th Feb 2014, on this topic.]
- If you work from home, inform your Household Insurer. Ask HI if you can't find one.

And remember, Holistic Insurance is there to defend you, not to pursue claims!



Isobel Knight - “Bowen for Connective Tissue Disorders - Ehlers-Danlos (type111) and Hypermobility Syndrome (EDS111).”



With quite possibly the longest title I’ve seen since my research days, Isobel took the tricky post-prandial depression slot, or, to you and me, the after dinner stupor slot, and managed to keep most of the audience awake! See the photo as proof. I’ll use “Hypermobility” as shorthand in this write-up.

This was a very interesting talk full of hints, tips and anecdotes on how to spot, treat and manage people with this dis-order. Isobel also provided advice for ongoing management and on whom else to call in to provide a rounded wellbeing programme. She also demonstrated on herself what hyper-mobility means.

Hypermobility is a genetic, connective tissue disorder where joint sockets are shallower than normal and therefore prone to dislocation. It affects about 0.75%-2% of the population. Unfortunately, that’s not the only problem it causes with connective tissue pervading the body. Such people have big problems with their gut leading to symptoms that overlap with many others dis-orders such as fibromyalgia, chronic fatigue and, in young children, ADD. Often the sufferers are in pain but not of all them. As a consequence, only 1 in 20 sufferers are correctly diagnosed.

Their core muscles seem to switch off and strain in the body is taken up by superficial muscles resulting in the need for large effort on their part and leading to stiffness. However, hypermobility is fine in most cases with sports people, ballet dancers, and gymnasts for example, all able to lead a normal life. But there is a tendency to Self-harm and be suicidal even in children.

How do you spot someone with Hypermobility?

Isobel showed scoring techniques that are used to diagnose hypermobility:

- Beighton Score
- Hypermobility questionnaire
- Brighton Criteria

The Beighton Score is calculated as follows:

- One point if while standing forward bending you can place palms on the ground with legs straight
- One point for each elbow that bends backwards
- One point for each knee that bends backwards
- One point for each thumb that touches the forearm when bent backwards
- One point for each little finger that bends backwards beyond 90 degrees

Unfortunately, a high score doesn’t mean you have hypermobility and nor does a low score mean you do not since the tests don’t include other parts of the body such as shoulders, TMJ, and spine. Other signs and symptoms must be present.

The same is true of the hypermobility questionnaire, although an answer of “yes” to two or more of these gives a high prediction:

- Can you now (or could you ever) place your hands flat on the floor without bending your knees?
- Can you now (or could you ever) bend your thumb to touch your forearm?
- As a child did you amuse your friends by contorting your body into strange shapes OR could you do the splits?
- As a child/teenager did your shoulder/kneecap dislocate on more than one occasion?
- Do you consider yourself double-jointed?

The Beighton Score is considered to be very accurate, ~93%, both for picking up the condition in the majority who have it (sensitivity), but also for ruling out the condition in the majority of people who do not (specificity). The Brighton score includes the Beighton Score plus several other major and minor criteria. You can check these out in Isobel's book and on "The Hypermobility Syndromes Association" website, <http://hypermobility.org/>

Treating Hypermobility Clients

Carefully, is the watch word here. For instance, their skin doesn't heal very well, is very stretchy and even Bowen moves leave a mark!

The best way to get their trust is to let them tell their story...just listen. Less is definitely more for this group. You must be gentle and leave longer pauses. You must refer them on for physio and Pilates to strengthen the body. Perform medial moves mostly as these bind the body whereas lateral moves separate and energise.

Bowen puts the body back together - Physiotherapy keeps it there!

Dr Alison Adams – Mouth Body Connection



With quite possibly the longest set of credentials I've seen since...ever...Dr Alison Adams, BDS (Lond), MS (Michigan), Dip Class K, Dip I K, KFRP, Dip AT, MRAT, Dip (Past Life therapy), Dip (Life coaching), H I Dip (Complementary therapies) provided a quite enthralling tale of her life and her research.

Alison began with a description of her interest in this area came about. Early in life when she was a standard dentist she was mixing a compound to create amalgam in a machine and mis-loaded the mercury capsule with the result that it broke and spattered over her clinic room. At the time, she didn't realize the seriousness of this accident and the hazardous materials team was not called and her clinic not cleaned properly. Consequently she suffered mercury poisoning following 6 months of exposure from the mercury hidden under furniture in her clinic. Over the course of her very long recovery, she had 20 operations, 5 miscarriages, 7 years of tortuous physio and a very serious motor bike accident.

By now, the audience was listening very closely and she described how her misfortune led her to become a naturopath dentist, and caused her to research in depth the importance of the TMJ/Jaw and how it is the cause of a huge number of problems to wellbeing.

Alison became conversant with the protocols for heavy metal detoxification devised by Dr Klinghardt and consequently with his other work treating chronic disease such as Lyme, Alzheimer, Autism etc. [A quick look at the relevant website, www.klinghardtacademy.com shows an immense wealth of information and knowledge. *Ed.*]

The mouth and disease

From her research, Alison states that 90% of chronic disease is associated with disorders of the mouth. Her research started with Dr Weston Price Weston (b.1870-d.1948) a dentist known primarily for his theories on the relationship between nutrition, dental health, and physical health. His work is buried because it "causes embarrassment to dentistry".

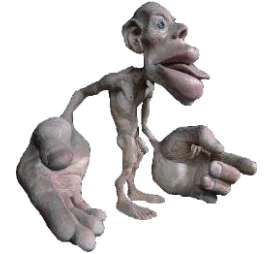
In the 1930s, he travelled widely to see natives in their indigenous countries and photographed them extensively. Here, Alison showed several of his photographs showing them with perfect teeth and perfect jaws. Then white man came 4 or 5 years later with the western diet! Mouth problems quickly became the biggest cause of suicide with malformation of jaws and teeth prominent. The subsequent photos were not so nice!

Weston Price concluded that aspects of a modern Western diet, particularly flour, sugar, and modern processed vegetable fats cause nutritional deficiencies that are a cause of

many dental issues and health problems. The dental issues he observed included the proper development of the facial structure to avoid overcrowding of the teeth in addition to dental caries. Modern diet is very poor compared with that of the 1930s. Fat soluble vitamins for instance are very deficient.

Some snippets on the importance of proper jaw formation include:

- Breast feeding is the best way to get jaw to form. Bottle feeding makes a baby suck in its cheeks and compresses its jaw.
- Tooth malformation leads to poor brain function.
- Under developed maxilla causes lots of problems.
- 90% bed wetting can be cured through expanding maxilla.
- The TMJ and hips are linked and influence each other.
- The Jaw is a girdle equivalent to the shoulder and pelvic girdles.
- The nervous system has a high proportion of nerves associated with jaw. As can be seen by this homunculus picture (right) where size represents the proportion of nerves associated with parts of the body.



And there was more, much more!

- Gold fillings in the mouth cause galvanic reaction with other metals, i.e. an electric current is formed between the various metals in the mouth.
- Root canals trap bacteria and because there is no circulation to the dead area they can't be cleaned out.
- More bacteria form and the chewing action forces them into the circulatory system causing infection. Mercury vapour release from amalgam increases by 50-fold.
- Teeth grinding can be caused by parasites or stagnant lymph.
- Changes to jaw should be made before about 5 years of age.
- Biological dentist should remove mercury fillings.
- And so on.

I was quite glad she was not on just after lunch and by the end of this presentation the discomfort caused by Isobel's demonstration of hypermobility was quite forgotten!

But again, an absolutely fascinating presentation, if you didn't see it...and even if you did, have a look at her presentation in the members area.

Food for thought ☺

Ossie and Elaine

We were honoured by the presence of Ossie and Elaine at the AGM. They took a keen interest in the presentations, asking questions for clarification. After Alison's presentation they were asked for their opinion and Elaine was quick to praise Alison for her work. They agreed wholeheartedly with her messages and were very glad that they were in tune with their own views of the causes of dis-ease and dis-order in the world.

After a few of Ossie's jokes, none of which concerned Aussie sport I noticed, he and Elaine had the pleasure to present to us their two latest recruits to the UK training ranks:

- Helen Mary Perkins
- Michael Patrick

Congratulations to both for all their hard work over their last two years of training.



BOWEN SUPPLIES

by Helen

- **Bowtech Ease...** for bunions and joint conditions
- **Lectric Soda Crystals...** for bathing or use with pack to reduce swelling
- **Bowtech Balance...** formula for wellbeing



Exclusive Distributor UK and Europe

+ 44 (0)1733 555476

www.bowensuppliesbyhelen.com



COMMITTEE MEMBERS

Chair - Veena Lidbetter, Vice-Chair - Angela Cannon,

Secretary - Sheila Whyles, Treasurer - Rob Godfrey

Members - Kim Pearson, Joy Whitehead, Marco Ferro, Gerry Ryan

Deadline for the next Edition - 1st December 2013

Send your articles to dave.riches@bowen-technique.co.uk

We are always eager to hear from you, for example interesting case studies, ways you have found to run your business, charity work you may be involved in, unusual circumstances you have done Bowen in, work on animals or children, events or shows you have been to - also please send in your pictures or post information on our Facebook site.

Office address: The Bowen Association, PO Box 210, Boston, Lincs, PE21 1DD

Telephone Number: 01205 319100

Email: office@bowen-technique.co.uk Website: www.bowen-technique.co.uk