CASE STUDY 97

DATE: July 2018

CLIENT: 25 year old left-handed female

Subjective Complaint: The client presented with **chronic upper back and neck pain** for about 12 years. He reports that the upper back and neck pain is centrally located but that it often feels **worse on the left side**. She indicates that the pain came out of nowhere and that there was no physical injury. She admits that the pain is constant every day, but the intensity of the pain varies. She rates the pain as a 2-3 out of 10 normally, but it can get as bad as a 6-7 out of 10 when it is really intense (on a scale of 1-10 with 10 being severe pain). The client indicates that her pain does not affect her sleep and that it seems to feel worse in the morning when she first wakes up. She admits that she has felt only temporary relief with physiotherapy, chiropractic, massage therapy and acupuncture treatments over the years. The client reports that x-rays and an MRI of her neck only revealed mild alignment issues and mild degenerative changes in her cervical spine.

Observation: The client was observed to be healthy and not in any obvious physical discomfort. Active cervical range of motion revealed mild restriction with flexion, extension and bilateral lateral bending. She reported left neck pain in all cervical end ranges of motion. All orthopaedic tests performed for her neck were unremarkable. Chiropractic evaluation revealed full spine joint restrictions and myofascial trigger points in bilateral cervical paraspinal muscles, bilateral levator scapulae muscles and bilateral sub-occipital muscles.

Organs Affected: Upper back and neck muscles:
- Embryonic Germ Layer: new mesoderm
- Brain Control Centre: cerebral medulla

GNM Explanation: Left upper back and neck muscles: a moderate intellectual self-devaluation conflict, experienced as “I made a mistake”, “I’m not smart enough”, “this is not fair” in relation to “a partner”. These Biological Special Program (SBS) cause muscle tissue loss (necrosis) of the striated musculature of the left upper back and neck muscles during the **Conflict Active Phase**. During the **Healing Phase** the tissue loss is replenished and restored, with accompanying swelling and pain. The biological purpose of this Biological Special Program (SBS) is to strengthen the upper back and neck muscles to better handle future “intellectual self-devaluations”. The client is currently in a **Hanging Healing** with potential tracks and triggers. The original conflict must be identified and brought to her awareness in order for her to complete the healing.
**GNM Understanding:** The client understood the explanation and recognized that the conflict must be related to the divorce of her parents when she was 13 years old. She admits that it was a real shock to her when her parents split up especially as her father became less involved in her life (her DHS). She recalls thinking that it was not fair that she was not able to keep them together. She indicates that she currently lives with her mother and that she is on talking terms with her father, though she often doesn’t feel that he is really a part of her life. She states that it’s possible that she has always questioned herself since the divorce, particularly because she felt unworthy enough as the only child to be able to keep her parent’s marriage together. She now sees that she may have many tracks or triggers related to her mother, especially when she talks negatively about her father, or when her father makes “half-hearted” attempts to connect with her and be involved in her life.

She was asked to make the connection that her upper back and neck pain symptoms are related to her childhood perspective of her parent’s divorce and the ongoing issues in her relationship with her father in particular. It was important for her to acknowledge how she interpreted the separation of her parents and how unfair it was to a 13 year old at the time, but that she has the ability to change her perspective of the divorce now as an adult. Perhaps she needed to recognize that despite how much a couple loves their child and how unfair it may seem to put a child through a separation, that there are good reasons not to stay together in an unhappy marriage. She needed to work on letting go of her resentment towards her parents and especially her father, and somehow realize that in the big picture, it was the right decision for their family.

It’s quite possible that she also has a secondary localized self-devaluation conflict (“something is wrong with my neck”, “my neck is not 100%”), which makes her anxious about any “bad positions” for her neck, or when she sits too long in front of the computer at work. This could also contribute to her chronic pain. She needed to remind herself that her upper back and neck muscles are strong, and that they are repairing and healing. Chiropractic treatments (including muscle work and spinal adjustments) were provided and she was asked to do a follow up visit in one week.

**Results:** The client returned to the clinic one week later and reported a 70% improvement in her neck and upper back pain. She was pleasantly surprised at how quickly her body responded. She was reminded to watch for any tracks/triggers especially if her pain flares up. She was provided chiropractic treatment and asked to do follow up again in one week.

During her next visit one week later, she reported feeling good in general until that morning. She states that she woke up that morning with severe neck pain and rated it as a 7/10. When I asked her if she had any tracks/triggers last night or this morning, she recalled that she had dinner with her father last night and that it did not go over well. She expressed disappointment that her father brought along a friend to what she thought was going to be a father-daughter dinner. She was also upset that despite her father not really knowing or asking about what she had been up to, he was nagging and criticizing her all night about her life and work choices. She was now able to see why her neck pain flared up this morning. The client was asked to continue to work on neutralizing the charge around her father making her feel “intellectually devalued”, in order for her symptoms to subside. She was treated that day and asked to come back to the clinic within 2 weeks.
The client returned to the clinic 2 weeks later and reported that her neck pain had improved significantly once again. She was seen one more time in the clinic where we focused on other symptoms. On her last visit, she reported feeling good about her neck and upper back pain, to the point that it was no longer a concern for her. She understood that if symptoms flared up in the future, it would be because of a track/trigger that she would have to identify and connect to the symptom so that she could slowly get relief.

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