CV-4 SELF HELP TECHNIQUE

THE DEVICE

Two tennis balls are tethered in tandem so that they are touching one another. The two balls can be placed in the toe of a sock, which is then knotted tightly to ensure that the balls stay in contact with each other.



INSTRUCTIONS

Recline on your back on the floor, or on your bed without a pillow. Place the device under your head so that the entire weight of your head rests on the two balls. They should be symmetrical with respect to the midline. They are placed about one-third the way up the back of the head near the top of the occipital bone, in a slight horizontal depression in the skull just above the attachment of the main neck muscles. The level is slightly above that of the ear openings.

Allow the weight of your head to rest comfortably upon the device for 10 minutes or more. You may shift position slightly in order to maintain symmetry and comfort, but do so gently and gradually.

Repeat daily. A convenient time is to do it is first thing in the morning. Move your pillow, set snooze alarm and place the device under your head.

If your neck is sore and needs support or the device tends to slip, place a rolled up hand towel under your neck and place the device under your head, at the height of your ears.

INDICATIONS

This is a good "shotgun" technique for enhancing fluid and tissue motion, especially relaxing connective tissues throughout the body and for restoring flexibility of autonomic nervous system response. It is beneficial for acute and chronic musculoskeletal lesions including degenerative arthritis. You can lower fever as much as 4°F. You can reduce cerebral or pulmonary congestion and dependent edema. It has been used to improve autoimmune disease, autistic behavior of children, and anxiety. This technique can benefit most individuals to some degree and is rarely harmful. This is designed for adults not children.

CONTRAINDICATIONS

The only contraindications are in situations, which even slight and transient increases in intracranial pressure are to be avoided: impending cerebrovascular hemorrhage or aneurysm. Do not use this technique during the acute stages of stroke or head injury.

-original text from The Upledger Institute, updated by Susan Steiner OTR/L, 7/2017





