

The Panic Pattern

(and fixing it with Koren Specific Technique)

By **Tedd Koren, D.C.**

Fight or Flight

Life has its scary moments and, in a life or death situation, the proper reaction may make the difference between, well, life or death.

Fortunately, we are “hard-wired” to improve our chances of surviving dire emergencies with our “fight or flight” or “acute stress” response.

How does it work?

At the sign of danger, we have two options: fight (confront the threat) or flight (avoid the threat). Within moments, a cascade of changes occur in the body and we can run faster, jump higher, hit harder, see better, hear more acutely, think faster and focus more intensely than we could only seconds earlier. Bodily functions not needed for struggle shut down: digestion stops (our mouth feels dry), sexual function stops, even our immune system is temporarily turned off. If necessary, excess waste is eliminated to make us light on our feet (and possibly dissuade an attacker!).

Additionally, our heart starts pumping two-to-three times its normal speed, sending nutrient rich blood to the major muscles in our arms and legs. The tiny blood vessels under the surface of our skin close down, so we can sustain a surface wound and not bleed to death (this makes our skin turn pale). At the same time, our blood pressure rises, so life-giving fluid reaches our muscles faster, sweating increases to cool our muscles and help them stay efficient and our eyes dilate so we can see better.

Whew!

After that terrific expenditure of energy, when the danger has passed, we must rest to restore our depleted reserves.

But, our reactions in day-to-day human interaction are, well...complicated.

For most people, stress remains chronic—it doesn't let up.

For example, we can't kill our spouses, our bosses, the idiot in the truck who almost sideswiped us, or the government.



We usually can't run away from them either (OK, maybe the idiot in the truck). The danger is never over, so we don't get the rest we need and our reserves continue to be depleted.

Living in a stress-filled body

Continuous, unresolved stress causes a buildup of stress hormones and we become aggressive, anxious, over-reactive, irritable and hyper-vigilant. Eventually a person in this state has less energy, a weakened immune system and various stress-related disorders, such as heart disease, headaches, sexual dysfunction, insomnia, high blood pressure, chronic fatigue, depression, rheumatoid arthritis, lupus, allergies and premature aging among others.¹

What can we do?

Turning to drugs (and surgery) to suppress stress symptoms generally means the body and mind continue to deteriorate while we are, superficially, feeling fine.

Fortunately, an increasing number of people are turning toward the natural, drugfree, non-surgical “alternative” approach.

This approach seeks to reduce stress levels and strengthen an individual's ability to handle stress.

More people are turning to yoga, meditation, exercise, psychotherapy, nutrition, herbs, homeopathy, acupuncture, massage, shiatsu, craniosacral therapy and other natural approaches. What about chiropractic?

The structural panic pattern

Chiropractic has a unique approach to dealing with stress.

The fight or flight response was originally discovered and researched by the great Harvard physiologist Walter Cannon in the 1920's. Cannon and his associates, being physiologists, studied the body's reactions to danger by limiting their observations to a person's chemical, vascular and internal organ changes.

Chiropractors using Koren Specific Technique (KST) have discovered that structural changes in the body are also involved in the fight or flight response. We refer to this as the panic pattern.

What is the panic pattern?

The panic pattern is the structural component of the fight or flight response. It consists of the following:

1. **The coccyx** (tailbone) moves anterior (forward). The meninges, protective and structural coverings over our brain and spi-

nal cord, are anchored at the coccyx. When the coccyx moves anterior, the meninges tighten over the brain and spinal cord, girding us for battle. This is seen in dogs when they tuck their tails between their legs as they run in fear. Similarly, our tails also go anterior.

2. The sternum moves superior. This provides better protection for our heart and lungs.

3. The zyphoid process moves anterior. Breathing often “freezes” during frightful experiences. This helps us concentrate and conserve our energy.

4. The larynx moves superior. It appears to be a response due to emotional suppression and is not seen in every case.

5. The pubic symphysis moves superior. Purpose not known (perhaps it relates to the coccyx). This is not seen in every case.

Which comes first—the emotion or the posture?

The body's life is the life of sensations and emotions. The body feels real hunger, real thirst, real joy in the sun or snow, real pleasure in the smell of roses or the look of a lilac bush; real anger, real sorrow, real tenderness, real warmth, real passion, real hate, real grief. All the emotions belong to the body and are only recognized by the mind.—D.H. Lawrence

Which comes first, the emotional reaction or the postural change? That may sound like an odd question—don't we feel an emotion and then our body reacts? Doesn't the emotional stress come first?

Although we may think that we “feel” scared and then assume a scared posture, studies reveal that the opposite may occur: postures may not just reflect internal states but rather produce them.

For example, researchers discovered that tasks performed in “defeated” or “helpless” postures (slouched) create a sense of defeat or helplessness more easily in patients. When people perform the tasks in erect spinal positions, the sense of defeat (giving up) or “helplessness” takes far longer to manifest.²⁻⁴

This is similar to finding that, by physically smiling or frowning, irrespective of our emotional state, we create a chemical physiology of happiness or sadness.

The locked panic pattern

After the danger is over, our body structure relaxes: our coccyx returns to its rightful place, releasing tension on the meningeal system; our sternum falls; our zyphoid moves posterior; our larynx and pubis drop.

However, for some, the structural system remains locked in fight-or-flight (panic pattern) mode. The locked structural panic pattern may keep the body in a fight or flight response mode, preventing our physiology from returning to normal.

Finding and correcting the panic pattern

Using KST protocols, we can quickly and easily analyze and correct or adjust the entire structural system, including the cranial bones. It is ideal for correcting the panic pattern.

First, segments in question are analyzed for listing, using a challenge, and the body's reaction is observed. KST uses the base of

the skull reaction for analysis: the occipital/mastoid drop, a biofeedback phenomenon similar to the muscle weakness in applied kinesiology (AK) or the short leg reflex of directional non-force technique (DNFT)/Truscott. The occipital/mastoid drop permits the practitioner to accomplish analysis with greater speed and permits the practitioner to check the patient in the posture of subluxation/dysfunction/injury more easily.

After the listings are determined, an adjusting instrument is used to correct the involved segments.

The patient is usually adjusted in standing or sitting posture. I use the ArthroStim™, setting it at 12 taps per second.

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In a pinch, a hand-held adjusting instrument may work. You can also use a thumb toggle (à la DNFT).

1. Coccyx. The coccyx listing is determined by gently challenging it anterior. It is not necessary to perform an internal rectal adjustment to release the coccyx. The patient is fully clothed, usually standing, and the contact point is on a lower segment or tip of the coccyx. The coccyx is lightly tapped inferior to posterior and quickly springs back into proper position. The amount of time needed to adjust the coccyx (or any segment using KST) is less than a half second.

2. Larynx. Challenge inferior to superior with your thumb and forefinger. Using the small width fork with an adjusting gun, gently tap both sides of the larynx superior to inferior.

3. Sternum. Contact is superior to inferior with the adjusting gun. I usually contact the sternum in two or three places—first at the manubrium, then at the upper and middle sternal body. Your patients will be amazed at how sensitive this area can be. Longstanding subluxation creates inflammation in this area.

4. Zyphoid. The zyphoid is lightly “toggled” from anterior to posterior. This is very sensitive and should be gently contacted for an exceedingly brief time.

5. Pubis symphysis. The pubis symphysis does not need to be contacted directly. Place the wide fork of the adjusting instrument on the abdomen, above the pubis symphysis, and adjust superior to inferior. As with all KST adjustments, less than a half-second of “toggling” is needed, using light force.

Patient response

Patients may feel a profound sense of relaxation, as if they are finally letting go. Sometimes, this is accompanied by emotional release. Others may not feel anything immediately, or at all! Everyone is different.

Will the panic pattern return?

Usually, one correction releases the pattern and it does not return unless that patient is traumatized again. It’s good to periodically check patients for this pattern. An easy way to do it is to challenge the coccyx anterior or the sternum superior. If you get a positive finding, check for the rest of the pattern.

*Koren Specific Technique, developed by Tedd Koren, DC, is a quick, easy way of locating and correcting subluxations anywhere in the body. Patients hold their adjustments longer and, because it is a gentle, low-force technique, it’s easy on the doctor too. An additional (and very important) bonus for KST practitioners is the ability to specifically analyze and adjust themselves. For seminar information, go to www.teddcoreseminars.com or call 1-800-537-3001. For information on the ArthroStim™ adjusting instrument, go to www.impacinc.net. Write to Dr. Koren at tkoren@korenpublications.com. **TAC***



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