

Tailbone Correction

by Judy Levin

In 1991 I went on a fabulous trip to Russia with Wayne Topping and a wonderful group of Touch for Health friends to teach the basics of Touch for Health to doctors and nurses in Moscow. One week before we were to leave I fell on my tailbone, which caused me great pain. This Tailbone Correction was done to me by Irene Yachuck-Arabei while on the train from Helsinki to Moscow. I was so pleased with the results from such a simple correction. The pain was gone, and I felt good.

I had no problem during the 2 weeks we were in Russia, but on the day we were leaving I slipped on a snow bank and, once again, I fell on my tailbone. Of course, Irene came to my aid again with this Tailbone Correction.

The Tailbone Correction was easy to do and the results were marvelous. This was something I knew I should teach people. I immediately went about learning the Tailbone Correction Technique so I could help others as Irene had helped me.

The main causes of the tailbone not being in alignment seem to be from falling down and landing on your bottom, or riding horses, bicycles, and motorcycles. Of course, doing gymnastics, karate, and other deeds we do when we are young and fearless, or silly things we do like slipping on ice, or puddles can also be the problem.

If the tailbone doesn't get corrected, by whatever means we try, we tend to become used to the problem and often don't realize that the aches and pains are not normal. Also, we may ignore or adjust to it to the point that we don't think we have a problem at all. We may not even realize it is out of alignment.

It is always a good idea to get a good case history to make sure there is no medical problems we don't know about. If the person is experiencing pain or discomfort in the tailbone area you might consider recommending a visit to a health professional to make sure to rule out the possibility of a

broken tailbone instead of just out of alignment, and to verify there is not a tumor or other illness there.

Test

1. First test and use a clear indicator muscle. (IM)
2. Run your hand up the shin bone from ankle to knee and test an indicator muscle (IM) to see if the response is still strong or goes weak.
3. If the IM is still strong then there is no problem with the tailbone. If the IM is weak, then the tailbone may be not aligned. Test both legs to see if correction is needed on right, left, or both sides of the body.

Correction

1. Find the emotion (which ever list you prefer)
2. The person lays prone (face down) on a table or bed
3. Place both hands at the base of the spine and run hands up the spine to the head (keeping one hand on the person's body at all times). When I get to the head I bring down my hands one at a time to make sure one of my hands are always on the body. Repeat 3 times.
4. Rub your hands down the spine. Again bring one hand at a time to the top of the spine and run down again. Repeat 3 times.
5. Bend the leg at the knee to approximately a 90° angle. Keep one hand on their tailbone to feel the muscle tension).
 - a. Have person exert slight pressure in opposition as you pump the leg in each direction (similar to HypertonX).

You can use an IM to decide which direction to go first.

- b. Pump the leg 3 times in each direction. The pressure is gentle so we don't cause the person any pain
6. Put your arm under the leg you have been working on, (using your arm that is closest to the feet) lift the leg in your arm. If you place your arm at the knee as they lower their leg you can lift the thigh, the weight of the whole leg is on your arm. Make sure the client is not helping to hold up their leg. Gently swing the one leg over the other leg, crossing the midline, and then back. Repeat 3 times.

7. Repeat on the other leg if both the legs tested weak.

Remember to keep a hand on the body at all times until the correction is complete.

8. Massage the buttocks gently but firmly to find any pain spots that may need a little attention. Piriformis and Gluteus Maximus may need extra attention. Include work on the sacrum and coccyx, and the sockets of the femur bone with the massage.
9. Using an IM muscle test the shinbone to verify correction.