**HISTORY OF CRANIAL OSTEOPATHY**

**William G. Sutherland**

In 1899, while William G. Sutherland was a student at the American School of Osteopathy, he viewed a disarticulated skull. The beveled articular surfaces, relative to the greater wings of the sphenoid and the squamous portions of the temporal bone, were especially intriguing. Suddenly, “…like a blinding flash of light came the thought: beveled like the gills of a fish and indicating articular mobility for a respiratory mechanism.” As he searched for a reference through countless volumes of anatomy and physiology, he could find no hint of this concept. He tried to put the thought out of his mind, wanting to be neither contrary nor outspoken. Over the next few years the thought kept creeping back in. His eventual experiments strengthened his conviction. Holding that no design of anatomy is without purpose, Sutherland quietly began a series of bizarre investigations. After careful study of the cranial articulations and relationships, he rigged a series of ingenious leather devices designed to restrain the bones of his cranium and strapped them onto his head. Here his wife recalls his account of an early breakthrough experiment:

> With no accurate understanding of the use to which they would be put, I helped in lacing together two catcher’s mitts, and observed as a buckle was attached to one, and an adjustable strap to the other. Will then rested his head upon the laced mitts to test their contour, which was similar to the V-shape headrest of a dental chair.

> “I wonder what Will will be doing if not busy with a patient?” That was my thought each time I turned officeward. One day upon arriving there I learned with startling abruptness that the “doing” has been done.

> His color was unnatural, his appearance feverish, and his manner disturbingly preoccupied… He explained that the experiment to compress the fourth ventricle had just had its initial tryout. He told of lying down, his head in the V-shape headrest; of imposing compression by gradual tension of buckle and strap. He described the sensations he had experienced as he approached near-unconsciousness. And that although weakened he had succeeded in releasing the leverage strap. “A sensation of warmth followed,” he explained. “And also a remarkable movement of fluid, up and down the spinal column, throughout the ventricles, and surrounding the brain.” His physical experience he summed up in one word: “Fantastic!”

> “Believe it or not, there also was a movement of my sacrum! What are we getting into? Is there no end to this?”

Thus Sutherland serendipitously discovered the reciprocal tension relationship of the cranium and sacrum. He continued his study for 55 years, keeping his work mostly to himself for the first thirty years. In 1932 he first presented his concepts to the American Osteopathic Association, itself an outcast group in the world of science, and was not well received. By this time, having devoted three decades to single-minded study of every possible aspect of the cranium, its bones and articulations, its membranes, and its function in relationship to the rest of the body, he was confident of his observations. He returned undaunted to his clinic in Mankato, MN, and continued to conduct research and teach for another 25 years. William Sutherland died in 1954, barely recognized but not in the least bitter. A self-motivated man, his satisfaction in life came from his devotion to clinical practice, where his principles served him unfailingly.

Dr. Sutherland’s fundamental principle: “To allow the physiological function within to manifest its unerring potency, rather than the application of blind force from without.