

Finally, A Magic Bullet for Chronic Life and Health Challenges

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We all know someone who is “wound a little too tight” or whose “game is just a bit off.” And then there are those with chronic digestive, hormonal, or neurological problems. Often, the problem has been present so long that the person assumes that their experience is normal and/or permanent. Not so. Now that can usually be changed simply, safely, and swiftly.

The Reticular Activating System Your Ticket To Survival

All living creatures are wired for survival; humans are no different. The most primitive and important part of our nervous system is a collection of structures called the Reticular Activating System (RAS). These include the pons, medulla oblongata, cerebellum, dural tube, and adrenal glands. When working properly, the RAS gives us two strategies for responding to danger: fight or flight.

The RAS is a positive feedback system: the system detects a threat and sends out an alert; the body responds by fleeing or fighting; the threat passes, and the system automatically resets to detection mode. When neither fighting nor fleeing are options, which is all too often the case with humans, RAS can get stuck in elevated alert status. —and this usually translates into chronic cognitive, behavioral, emotional, and/or physiological problems, like indigestion, colitis, compromised immune function, and failure to thrive.

This is because when RAS is elevated the lion’s share of oxygen and nutrients are diverted to the RAS structures, at the expense of the cerebral cortex and forebrain. Similarly, the muscles of fight or flight—the large muscles of the legs, arms, back, neck and jaw-- over-develop at the expense of the internal organs of assimilation, digestion, elimination, and immunity. The adrenal glands discharge adrenalin continuously and are chronically depleted. The Central Nervous System interprets the presence of adrenalin in the vascular system as evidence of danger, helping perpetuate the cycle. At the cost of all other activities, the nervous system focuses on detecting potential threats from the external environment and keeping the machinery of survival ready to go at a moment’s notice. The RAS does this by examining all neurologic traffic for signs of external threat—even normal messages coming from internal organs. The RAS is only designed to monitor about 100 million neural impulses a second. Monitoring the 5 billion impulses normally surging through the body each second is inefficient and counterproductive

The level of alert usually reflect the severity and persistence of a threat where fight or flight are not options, a situation all too common in utero, infancy, childhood, and hostile academic, occupational, and relationship settings. Most of the public have never heard of RAS and are unaware of the epidemic of elevated RASs. As a result, most cases of elevated RAS go undiagnosed—indeed, few are the physicians who would even think to look for it, even though it’s reaching epidemic levels.

You'd be surprised at the range of in-utero exposures that can peg a newborn's RAS to the ceiling, for example. These include exposure to caffeine, nicotine, alcohol, anesthesia, recreational drugs, pharmaceuticals, pesticides, herbicides, and other chemicals, or prolonged tension, anger, violence and threat of violence. Trauma at the time of birth (such as complications, inductions, caesarians, forceps, spinal, delays while waiting for a physician, etc.) can cause the RAS to get stuck in full alert. And then there's childhood and all its potential exposures.

It shouldn't be surprising, therefore, that so many children fidget, can't focus, or are overly aggressive or passive. It shouldn't be surprising that so many adults have mysterious ailments and symptoms or chronic cognitive, emotional or adaptive challenges. No wonder there are so many adrenalin junkies and extreme sports enthusiasts! Their antics can be seen as their way of squeezing a palpable amount of adrenalin from their adrenal glands or crude attempts at resetting their RASs. Some day, we'll look back and marvel that there were so many otherwise high-functioning people stuck in fight or flight.

Resetting RAS: Your Ticket To Thrival

Without external threats, or once RAS has been reset, normal physiological functions proceed. The cerebral cortex gets its full share of blood, cerebral spinal fluid, oxygen and other nutrients. Our digestive systems return to assimilation, digestion, and elimination. The big muscles of fight or flight relax. Our immune system goes back on-line. A perfect example of normal RAS functioning are the grazing herds of Africa, which run like the dickens to escape lions and then moments later calmly return to grazing while the big cats dine nearby on a former member of the herd.

So, how can you tell if your RAS is set too high and needs to be reset? Having read this far, you may already know. Signs include persistent life or health challenges despite one's best efforts and intentions. Likely suspects include kids who can't concentrate, dads who never came home from the war, and overwhelmed moms. Essentially, anyone with a history of exposure to toxins, stress, or violence is a prime candidate for resetting RAS, as are those who have serious breathing or circulatory challenges.

A Simple Self Test

Take a few deep breaths. Even if you've never done anything like this before, be positive. Ask your body if your RAS is set too high. Wait to hear the answer in your mind. Allow it to come up. Whatever it is, trust it. If the answer is yes, ask whether it would be good to have it lowered. If that answer is yes or maybe, please call for more information or an appointment.

The Mechanics of A Reset

The body knows when a reset is necessary and appropriate and will actually direct the work. Sometimes, it's simply a matter of permission, of your giving yourself permission. Frequently, resets involve releasing mechanical restrictions in the brain and other structures. This may entail emotional releasing. Either way, resets can typically be done in a session or two and the body will

tell us what, if any, follow-up is necessary. Patients generally report profound and immediate changes in their chronic conditions and complaints. Absent subsequent exposures where fight or flight are not viable, resets tend to last.

Post Traumatic Stress Disorder

An extreme case, where RAS is completely pegged out, would be Post Traumatic Stress Disorder, or PTSD. Symptoms of that include extreme jumpiness—as in ultra-sensitivity to loud noises or sudden movements and, either a tendency toward panic and terror or belligerence and combativeness. Some PTSD victims will appear rigid and frozen. This is because they are caught between two extremes they don't want to re-experience: an overpowering sense of helplessness and equally potent feelings of rage. If this sounds like you, don't give up. There are some very effective techniques just for you.

However, resetting the RAS is not just for cognitive and adaptive challenges, like ADD/HDD or PTSD. If the RAS is elevated, a reset will allow the body to self-correct all kinds of chronic and mysterious health problems, including reflux, digestive problems, chronic fatigue, migraines, headaches, sinusitis, and respiratory infections, and chronic pain and neuralgia. Again, this is because, when we are stuck in fight or flight, all routine operations and maintenance are set aside in favor of immediate survival. The only known contraindication to RAS work is mental illness.