the patient was conscious, but the collaboration proved to be difficult: he was able to answer only by movements of the eyeballs; sometimes he would slightly move his right arm. He had trouble swallowing (he was fed through a nasogastric tube), had no control of the sphincter (he needed a urinary catheter) and was completely unable to walk.

Later on, the patient was hospitalized in the Medical Rehabilitation Clinic, where he started physical therapy and speech therapy. His movement ability improves slightly. After trying to remove the nasogastric tube, the patient suffers bronchopneumonia due to his swallowing difficulty. Endoscopic gastrostomy is performed on the 24th of June 2011. All this time, the patient had also undergone physical therapy at home, but without any significant results.

In September 2011, the patient’s family finds out about Bowen therapy and decides to try it, as a last resort, in weekly sessions, with the therapist Niculina Gheorghita. 

**After the first sessions, remarkable results appeared: he started talking and swallowing** in November and later on he was able to sit and take a few steps. In a few months after starting the Bowen therapy, the patient regained his sphincter control as well.

In February 2012, the patient showed up at our clinic in order to undergo cranioplasty (correction of the bone defect with an acrylic plate). Everything went fine, with good evolution of the patient: he was able to talk, walk and eat by himself by the beginning of the month.

In September 2012, the patient presented a left front suppurated wound. After trying to solve this with antibiotics, according to the antibiogram, it is decided to remove the acrylic plate, considered to be the foreign body maintaining the infection. This decision was also influenced by the existence of a post-surgical dehiscence (separation of the layers of a surgical wound).

At first, I did not have an explanation for this dehiscence. I was able to find an explanation during surgery, when, after removing the acrylic plate, I observed a fibrous structure at that level (a reaction of the body), which looked like onion layers.

**Conclusions**

The vegetative state of the patient was constant for one year after the accident, despite the medical treatment (physical therapy, speech therapy). One year after beginning Bowen therapy, the patient looked and acted like a healthy person: he thought, spoke, ate and walked all by himself. The fact that the infection was not followed by meningitis, considering that the head plate was a foreign object for the body, can only be explained by the “inner doctor” work – activated by the Bowen technique.

Finally, the fibrous structure I found after removing the acrylic plate seems to be another consequence of the self-healing. Seeing bone regenerate itself left me amazed. During my time as a doctor, I have had the chance to see the body react after such an intervention, but I have never seen the fibrous tissue display itself in such fine layers.

I have to admit I wouldn’t believe such a story if I didn’t see it happening, with my own eyes. I was so impressed about this case, that I decided to register for Bowen courses and since I started practicing this technique myself, I encounter many other amazing recoveries.

Happy Bowening!

**DR. CATALINA ACSINTE**

Iasi, Romania
Dr. Cătălina ACSINTE

Sectia Neurochirurgie 1

Medic primar neurochirurg

Experiența profesională

- 2009 - ...... Medic primar neurochirurgie, Spitalul Clinic de Urgență „Prof. Dr. N. Oblu” Iași
- 2002 - 2009 Medic specialist neurochirurgie, Spitalul Clinic de Urgentă „Prof. Dr.N. Oblu” Iași
- 1995 - 2002 Medic rezident, Spitalul Clinic de Urgență „Prof. Dr. N. Oblu” Iași

Educație și formare

- 1989 - 1995 Universitatea de Medicină Și Farmacie "Gr. T. Popa" - Iași
- 1983 - 1987 Liceul teoretic "Emil Racovita" - Iași

Articole publicate

- "Curs De Neurochirurgie Pediatrică", Editura Contact Internațional, Iași - 2001

Aptitudini și competențe personale:

- 2004 - 2005 Specalizare, Hopital Universitaire – Brest – Franța

Participări la conferințe

- 2011 - "18'th International Mousee Medical Meeting", Salzburg - Austria
- 2011 - atelierul de formare "Cum ne aparăm de malpraxis?" – MedRight Experts
- 2010 - curs "Vertijul în viziunea medicului de familie. Noi abordari ale terapiei tulburanrilor vestibulare bazate pe calitatea vietii pacientului" - Colegiul Mediciilor Iași
- 2009 - "Patologia vasculara intracraniana" - Societatea Romana De Neurochirurgie si UMF „JilIU Hatteganu” Cluj Napoca
- 2009 - "Hemoragia subarahnoidiana si anevrisme intracraniene" - Societatea Romana De Neurochirurgie si Spitalul Clinic De Urgenta "Prof. Dr. Bagdasar"
- 2008 - Curs deschis la distanta - UMF „JilIU Hatteganu” Cluj-Napoca si British Medical Journal
- 2008 - Conference Nationale Annuelle de Neurochirurgie avec participation internationale - La Societe de Neurochirurgie de Langue Francaise
- 2008 - The Annual National Conference of the Romanian Society of Neurosurgery with internation participation
- 2008 - Conferinta "Les strategies therapeutiques modernes dans les lesions vasculaires cerebrales" - Colegiul Mediciilor Iași
- 2008 - "Approches contemporaines des urgenes medico – chirurgicales", Chisinau - L’union Medicaile Balkanique
- 2008 - "Actualitati in neurostiinte (neurochirurgie, neuroradiologie, neuroanestezie)", Colegiul Mediciilor Iași
- 2007 - IMSP Institutul de Neurologie și Neurochirurgie, Republica Moldova
- 2007 - Curs deschis la distanta - UMF "JilIU Hatteganu” Cluj Napoca si British Medical Journal
- 2007 - al VI-lea Congres al S.R.N. - Societatea Română de Neurochirurgie
- 2007 - Programul Educational pentru Managementul Epilepsiei - Societatea Română de Neurochirurgie
- 2007 - "Traumatisme vertebr – medulare cervicale" - Societatea Română de Neurochirurgie
- 2007 - Curs deschis la distanță - U.M.F. "JilIU Hatteganu” Cluj Napoca
- 2006 - Conferinta Nationala a SRN, Sinaia - Societatea Română de Neurochirurgie