Abstract

Every organ has a cutaneous area to which it refers pain. Visceral referred pain (VRP) areas exist throughout the body. The location of the thymus VRP will be proposed.

Introduction

Visceral problems will most commonly result in a muscle inhibition pattern. Activating a VRP area with some type of sensory stimulation, usually rubbing (mechanoreceptor stimulation) or pinching (nociceptor stimulation), will elicit a muscle response if the VRP is related to the organ with a problem. The VRP areas are extremely useful in guiding the physician whether to perform more sympathetic (pinching strengthens) or parasympathetic (rubbing strengthens) activity. While [most] all major organs have identified referred pain areas, there is none currently known for the thymus gland.

Discussion

The thymus, along with the spleen and gut associated lymph tissue (GALT), accounts for the majority of an individual’s immune health. Although there are many references for the spleen’s VRP area to be over the left shoulder/acromioclavicular joint, one does not currently exist for the thymus. Knowing when to provide more sympathetic or parasympathetic activity to the immune system is important. The author has found a referred pain connection for the thymus over the skin of the right first rib, both anterior and posterior.

The Chapman’s Reflex (CR) for the thymus as reported by Schmitt is over the right ribs, 4-6, from the axillary line anterior to the midmamillary line. Therefore, if a thymus involvement is present, this CR should therapy localize (TL). Whether to rub the CR to create a net parasympathetic response or to perform visceral challenge technique to create a net sympathetic response requires the use of the VRP. Rubbing or pinching over the skin over the right first rib will guide the physician towards the treatment necessary to improve the thymus, and therefore immune, function.

If there is an inhibition of the infraspinatus and rubbing over the VRP causes facilitation, then there is a need for more parasympathetic activity. Rubbing over the CR and/or providing the necessary supplement(s) to support the thymus will accomplish this. If pinching over the thymus VRP negates the inhibition, this would indicate a need for more sympathetic activity. Visceral challenge technique with the appropriate offender will correct this problem. Having the patient TL to the thymus CR with the offender on the
tongue, and performing IRT to the taluses bilaterally will negate the infraspinatus inhibition. The most common irritants to the thymus gland are cortisol, trans fats, sugar, allergies, and caffeine.\textsuperscript{5}

**Conclusion**

There is an apparent thymus visceral referred pain area which exists over the right first rib area both anterior and posterior. This area may be used to determine the need to rub the thymus Chapman’s Reflex or to perform visceral challenge technique to the thymus.

**References**


