

Vertical Reflexology Techniques (VRT)



& Healthy Ageing

What support can reflexology offer the wider public to help maintain and improve health now that many people have a life expectancy of 30 plus years from when they retire?

The sobering fact is that the tremendous advances in medical science, in many cases, led to increased life expectancy but do not mean disability-free life expectancy. A longer life span may include a decade or more of degenerative disease and chronic ill health.

Reflexology has a valuable role to play in supporting good health for an ageing population and there is no doubt that the reality of the *silver tsunami* of older people, i.e. the baby boomers following the Second World War, presents a considerable challenge that must be confronted not just by government, but by all of society. Reflexology is a particularly suitable modality for older people as it helps circulation, normalises bodily functions and may aid detoxification. It is important to register that the process of ageing does not always have to be a negative decline and that the older body still has an immense capacity for regeneration and healing given the right impetus.

Vertical Reflexology mobilisation techniques combine gentle movement of the body, including a limb or the spine, with stimulation of specific reflexes either on the weight-bearing feet or hands, or in the passive conventional reflexology mode (i.e. the reflexologist works the hands or feet while the client themselves gently moves a specific part of their body to increase mobilisation).



Fig 1. Working the weight-bearing hands to support the lower lumbar spine

have developed these reflexology mobilisation techniques over the past 20 years through my work with older people at The St Monica Trust, Bristol.

The chiropractic premise that "structure governs function" is particularly pertinent to older people as the ageing body's ability to repair itself gradually needs more stimulation, exercise and good nutrition to help to maintain good health. The body's

musculo-skeletal system can become stiff and sluggish and this can lead to a lack of mobilisation and exercise, which in turn impinges on the Central Nervous System and the function of individual organs and glands.

Complementary therapists have a privileged role in supporting clients in their quest for better health and simple Vertical Reflex Therapy (VRT) and daily self-help "homework" techniques take only a few minutes to be applied to the hands between appointments.

Hand reflexology self-help techniques to aid and improve sleep patterns are also very useful, as a deep and peaceful sleep each night is a great healer and allows the body to replenish. Many older people sleep badly, consequently feeling tired and dozing in the day. This has a negative cyclical effect as, by the time they reach bedtime, they are not tired enough to sleep deeply and yet another restless night ensues.



Fig 2. VRT Hand Diaphragm Rocking: Better sleep for all age groups.



Figs 3a and b. VRT Wrist-Twist:
Lower lumbar stretch.

The VRT Wrist-Twist is for all ages, although it was originally developed for sportspeople. Non-weight bearing wrist reflexes (hip flexors and lumbar spine) are held while the standing client mobilises gently from left to right. These techniques can also be modified for chronically sick older people who remain seated.

Development of VRT

The original discovery of the efficacy of VRT mobilisation techniques came through working on the dorsal semi-weight-bearing feet of an 87 year old woman who had lost mobility in her fingers following a broken wrist. I used the reflexology referral area protocol to stimulate her toes and then asked her to try and move her fingers as I worked. Within 5 minutes she had freedom to stretch and splay her fingers for the first time in a year. This improvement was maintained until she died 5 years later. I then began to widen the scope of mobilisation in my reflexology work for all clients, especially to help slow symptoms connected with the ageing process.

Conclusion

It is important to register that the process of ageing does not always have to be a negative decline and that the body still has many resources to implement some regeneration given a multi-faceted approach to holistic care, which includes reflexology. Many people aged 65 have a further life expectation of 30 plus years when they retire and both reflexology and Vertical Reflexology, including self-help techniques, can play a positive part in maintaining good health.

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Example

VRT can be applied to the weight-bearing or semi-weight-bearing hands if the client is sitting or even lying (as they can press down on a hard surface such as a small tray or book). To stand for VRT, or to press the arm downwards, is obviously not so relaxing for the practitioner or the client; however, VRT is applied in this position for a maximum of five minutes only and often 2-3 minutes is sufficient.

Increasing shoulder and neck mobilisation

Many people of all ages suffer from stiff necks and this is often related to injuries or tensions in the shoulder. Shoulder pain can be a result of injury or disease of the shoulder joint. Injury can affect any of the ligaments, bursa, tendons surrounding the shoulder joint, cartilage, menisci and bones of the joint. The design of the shoulder joint is such that it sacrifices stability for mobility. As an extremely mobile joint that plays a central role in the action of a major extremity, the shoulder is at risk of injury.

Method

- At the end of the reflexology session, the client stands or sits with their feet placed firmly on the ground. Ask the client to gently raise their arm to the limits that their injured or damaged shoulder will safely allow to indicate the range of mobility.
- First, stimulate the weight-bearing neck reflex by pinching the medial and lateral reflexes at the base of the big toe on the foot that corresponds to the compromised shoulder/neck area.
- Then work the weight-bearing neck reflexes on the other foot.
- Now simultaneously work the neck reflexes on both toes together briefly and maintain a steady pressure on both of the neck reflexes for about 15 seconds. While holding the neck reflexes, ask the client to gently move their neck from side to side.
- Stimulate the weight-bearing shoulder reflex, firstly on the foot that corresponds to the damaged shoulder.
- Then work the corresponding shoulder reflex on the other foot.
- Simultaneously work the two reflexes together briefly and maintain a steady pressure on the two shoulder reflexes for about 15 seconds.
- Hold both reflexes lightly in a "sedating" hold for another five seconds.
- Keep pressure on the reflexes and ask the client to gently raise their arm to the height it will safely allow without strain or pain. Very often they will present a wider range of mobility than they did on arrival.



Fig 4. Self-help. The weight-bearing neck reflexes are stimulated for 30 seconds maximum while the client gently moves their neck from side to side.



Fig 5. Foot VRT applied in the weight-bearing mode

Lynne trained 24 years ago with the International Institute of Reflexology. She has a private reflexology practice in Bristol, UK and also runs a reflexology clinic at a 400-resident care home, the St Monica Trust. For the past 12 years she has been part of the medical team at a professional Championship football club. In 2011, the Institute of Complementary and Natural Medicine gave Lynne an award for her Outstanding Contribution to Complementary Medicine. Lynne and VRT tutors have taught approximately 8000 qualified reflexologists worldwide. In 1998 and 2008 Lynne was awarded Honorary Fellowships for services to reflexology by the Association of Reflexologists and Anthony Porter of ART. She has written best-selling books *Vertical Reflexology* and *Vertical Reflexology for Hands*. Her books are published in 7 languages including Japanese, where VRT is taught as a diploma course in Tokyo.