

Vertical Reflex Therapy



Membership Network Newsletter

No. 15 Spring 2007

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Dear Colleague

Working as a reflexologist can be quite a lonely career as far as meeting other colleagues is concerned. Many of us work from home, offer domiciliary visits or rent a room in a clinic and some appear to do all three! But unlike employees in an office or teachers in a staff room, we do not have the day to day contact with like-minded therapists. Even in a clinic there is often not much time to speak to the other practitioners who are usually offering other forms of complementary therapy to clients at the same time.

We all need to discuss our work with fellow reflexologists, to sound off new ideas or debate certain issues and this is why it is so good to continue to study on post-graduate courses such as VRT or the many other reflexology courses available. This is all the more important now that there is a growing emphasis on Continuing Personal Development (CPD) points to submit to your professional body. It is on such courses that reflexologists have the pleasure of meeting others with the same shared interests. The other way is to attend conferences and they are fairly few and far between, especially in this country. I was fortunate to be asked by the Association of Chartered Physiotherapists in Reflextherapy (ACPIRT) to speak in January at their conference and it was heartening to meet so many dedicated physiotherapists who work in a medical environment and yet can sometimes bring their complementary skills into their work.

The Association of Reflexologists has organised their second major conference in Warwick in July and I would encourage you to attend. More information is on the back page of the newsletter. The last conference by the AoR was

also held on Warwick University campus in 2004 and was one of the most interesting and well organised conferences I have ever attended. They offer day places as well as a conference "package" and there will be some fascinating international speakers as well as those from the UK. It is rare for us in Britain to have such a calibre of reflexology talent in one place, so do consider attending. You also, of course, gain more of those increasingly valuable CPD points!

In this issue, on Page 11, we have an article from the Reflexology Association of New Jersey on Brazilian Toe Massage. There are also practitioners' letters, interesting case studies and VRT hints as well as a cautionary tale about a small dog called Jazz on Page 9.

How comfortable is your bed, is it supporting your back as it should or is it elderly and in need of replacement? Val Bullen, a senior lecturer in the Department of Complementary Therapies at the University of Westminster, takes this problem further and also looks at the emotional links there may be to inhabiting a certain bed. As we spend up to a third of our lives in one piece of furniture it behoves us to select the best possible mattress and base for the job! It is also helpful to look at the more esoteric side of where we sleep. Read all about it on Page 6.

Kindest regards

Lynne Booth

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Try working a very helpful sciatic reflex on the lateral arm

Congratulations to my very efficient secretary Gill Voisey whom many of you know via the telephone, e-mail or at registration on the day of a course. Gill is very good at her job but has also proved to be good at reflexology in a very specialised way! A while back I showed her a standard sciatic point on the side of the hand, about wrist level, for her to work and also taught her a secondary helper area about three inches up from that reflex on the lateral side of the arm.

In the last three months she has shown three totally sceptical friends how to work the secondary point on the arm as she has always found that to be the most sensitive when locating the reflex. In each case, long standing sciatic problems disappeared in just a day or two of self-help. Try this on clients or friends and experiment on just working the helper reflex on the arm either passive or weight-bearing. Not only did the sciatic problems vanish almost immediately but they not returned either! A great example of enterprising self-help to inspire reflexologists and their clients!

Wherever I am is wherever I am meant to be, whatever I am doing is whatever I am meant to be doing and whatever everyone else is doing is exactly what they are meant to be doing - this is contentment. If you do want to change where you are, or what you are doing, the first thing is to be content with wherever you are and whatever you are doing right now! Paradoxically that's what attracts opportunities and invitations to be somewhere else! Why? Because you are a living magnet, and contentment is one of your most attractive qualities. And the law of attraction says that according to your dominant thoughts so you will attract the people and circumstances into your life. Being content right now attracts the best possible future.

Start the day with a little wisdom and get these daily thoughts sent direct to your email for free. Visit www.thoughtfortoday.org.uk

Nerve Reflexology And Pelvic Instability

In November we had a wonderful two day seminar on "Pelvic Instability" with Nico Pauly and his skilled colleague Griet Rondel. It was a fascinating and informative session and we intend to have more post-graduate seminars for the diploma students. We are still hoping to arrange a forth nerve reflexology diploma course in the future and will let all those who have expressed in interest, know first.



Griet Rondel demonstrates a pelvic nerve technique



Nico Pauly and reflexologists from the USA, Romania, Argentina, Eire, Belgium and the UK!!

LETTERS FROM PRACTITIONERS

Hello,
I am a qualified reflexologist and plan to attend the courses in 2007. Can you tell me if that would enable me to call myself a VRT Practitioner and put the letters "VRT" after my name or do I need to attend all the advanced course first?
Thank you. Miss CC

Lynne's response:
..... After a one day authorised VRT Basic course a reflexologist is able to integrate VRT into their practice. You can state that you are a VRT practitioner as you have taken an authorised course which is accredited by the Complementary Therapists' Association (IGPP). This does not imply any qualification as an attendance certificate only is issued. Under no circumstances should anyone put the letters VRT after their name as no exam has taken place or diploma been issued. Thank you.

Hello Lynne,
I have just found the time to email you following the two day course at St Wilfrid's, Chichester. My clients have all been amazed at the added potency of VRT - even one client who assured me she would not find it so relaxing (before I went on the course), I gave her a session on Friday of the course week and she found it very powerful - and last Friday I decided to leave out the VRT to see how she went and half way through relaxing the foot she announced 'oh, we haven't done the standing up yet' and jumped up ready to be VRT'd. I thoroughly enjoyed the course Lynne and was reading your VRT book in bed last night! pleased.
Thank you so much for doing the course - I am currently treating between 10 and 13 people a week and am hoping to take on a client with restless legs who doesn't sleep at night and has been referred to a pain management clinic.
Thank you again. Carol Cliff

To Cherele Waters, VRT Tutor, Australia

Dear Cherele,

Since doing the Advanced workshop my work has taken on a new life. Even only using the techniques when my clients are reclining has had quite an impact.

Thank you for your wonderful presentation and inspiration.

Warmest regards, Anne Hilarius-Ford

Dear Lynne,
..... Babies: Do you have any tips for treating babies. I have someone I treat who would like me to treat her 6 month old. I treated my own and friends, obviously some time ago now. I am planning to see them for about 20 minutes and was going to do a light all over treatment, being careful around the toes. His sleep has become disturbed since having a chest infection, which seems to be lingering. The doctors have seen him again, but feel it just needs time.
Yours, YC

Lynne's response
Babies: I use the slightest stoking movement for 20 minutes max. I work spine and heel first on each foot. I never touch the toes individually in any way .. just hold the top of the foot generally as I believe the bones are too fragile. D Rocking is never done with two hands but you right index and middle finger in a scissor type movement and gently flip the foot back and forward a little. Synergistic on hand and feet for bowel and stomach. Teach parents to work stomach gently while feeding if baby has indigestion or bowel if it suffers from wind/colic.

Dear Lynne,
I did want to say how much I enjoyed your VRT course I attended in Roehampton - I found it so interesting and informative - I certainly want to come on further courses.

I was talking re VRT with an old friend, who has a pacemaker and she wanted to know if it would be safe for her to have a treatment. So now I am asking you as I was unable to give her an answer.

Thank you for your help. Suzanne Farmer

Lynne's response:
I am so pleased you found it useful course and I can assure you that there are no contraindications as far as I am aware regarding use of a pacemaker when using reflexology or VRT. VRT works in exactly the same way as reflexology where our aim is just to balance the

body. I consider this to be no more an issue that I would when working on someone with an artificial hip or knee-cap. I don't think the electrical components of the pacemaker are interfered with by the energy of reflexology. My father had a pacemaker for 20 years and received regular VRT and reflexology treatment and lived to be 90! If you are unsure of an issue, I always recommend that practitioners refer back to their tutors of professional body for definitive advice.

To Hedwige Dirx, (VRT Tutor for Belgium and Holland)

.... I have been meaning to write to you for a while to say how much I enjoyed the 2 day workshop (Ear Reflexology) in Bristol. Thank you so much for coming over & teaching us the basics of this fascinating therapy.

I have put the teaching to good use on a number of my clients. The Monday following our workshop I tried it out on 3 clients, one of whom has severe asthma. She has been to me since & said she felt it helped & could I do it again.

I have been helping at a hostel for the homeless in Bristol for many years. I used to help in the kitchen, but for the last 3 years have been offering Reflexology treatments instead.

This time I took my ear probe & ear seeds, and placed seeds onto the ears of a variety of clients for a range of problems, instructing them to press the seeds for 30 seconds several times a day. It will be interesting to see if I get any feedback from this client group.

Thanks again, Judith Ryder

Hi Lynne,

I took your class in New Jersey At the Ocean Place in Long Branch. I have had great results with VRT. My co-worker was complaining of a pain in his leg very sharp pain. I worked on his hand for a few minutes. I saw him one day later and he could not believe that the pain was gone. He had the pain for a while. He said whatever you did it worked he was so happy and SO was I.

I just had a client who got a massage she was a few months pregnant, she laid on her side and when she got up she could not stand on her leg. She said that she has problems with sciatic. I did not have her for a service. I new that I could help her in some way I felt bad so I went in to see her I told her that she could do some self help I showed her, I worked on her spine and sciatic

reflex gently if was less that five minutes. Then I left her. I walked out in the hall and she came walking out of the locker room fast as if she was never in pain. She said I don't know what you did but it worked!! She could not believe it I was happy that she was able to walk and free of the severe pain.

Angela Cruz

Hi Lynne,

I would like to take this opportunity to thank you and Yvonne for two lovely days (VRT Basic & Advanced, October, 2006). I really enjoyed the enthusiasm you showed not just for reflexology and your technique but your ability to think outside "the box". I met some lovely people and hopefully some will remain friends. I would like to attend your courses in March and April 2007 for hand and nail and endocrine.

Again many thanks,

Love and Light, Caroline Bradford.



RIEN Conference Limerick - Sept 2006

Pictured above, with Lynne Booth, Beryl Crane and Cecily Mills is Russell McAllister, the enterprising Australian Editor of *Reflexology World* which is an excellent independent reflexology journal that is published internationally. Why not take out a subscription and read what is happening in the wider international field of reflexology.

**See Reflexology World website:
www.reflexologyworld.com**

Hedwige Dirx who ran her very successful Ear Reflexology courses in 2006 writes in reply to queries about natural earseeds after her very successful course on auricular reflexology:

"The earseeds are made from 'cow herb' or 'cow soap wort'. The official Latin name is 'vaccaria'.

It is a small light purple flower that grows in green areas."

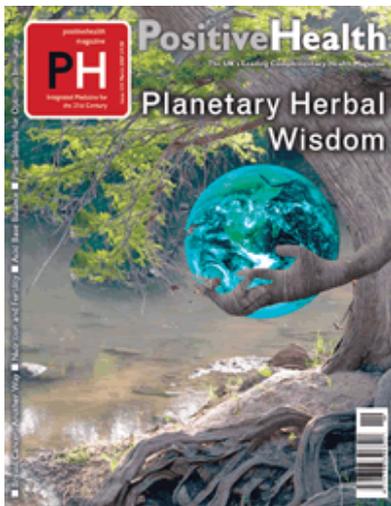
Positive Health Magazine

www.positivehealth.com

Find out all you need to know about living a healthier life. Authoritative features, research updates, case studies, book reviews, fully-searchable database of articles and much more!

Read *VRT and Sports Injury* by Lynne Booth
Three page article in the April Issue

**April issue just out!
(March issue illustrated)**



Stephen Hershman writes in with some exceptional results some of which have been published in the April 2007 issue of Positive Health. In this journal Lynne has written an illustrated article on VRT and sports injuries and includes other examples of acute problems.

Stephen writes: After attending your VRT introduction in London on 23rd April 2006 I introduced VRT into my treatment sessions. I had very good feedback from clients that they seemed to feel much more relaxed (if that is possible) with their heads seemingly much clearer and focussed. There was an immediate response from one lady with IBS who reported an immediate improvement. After attending the Basic course on the 23rd May 2006 I treated my first clients with orthopaedic conditions with quite astonishing results.

A lady had to cancel an appointment due to her back seizing up on her. She had been confined to bed for 2 days before she rang me. I visited her at home the next morning to see if I could help - she wasn't too sure about seeing me but when I said that there wouldn't be a charge she agreed!

I gave her a brief VRT treatment as she wasn't too comfortable standing and managed to do DR on her in a sitting position. I told her to ring me later if she wished me to pop by the next morning for a repeat. She rang later that day apologising that she hadn't rung earlier as she had been asleep most of the day. She reported that she couldn't believe the improvement in her condition and yes could I please come again for a repeat the next day (again I said that there wouldn't be any charge). I went round again to be confronted by a beaming client almost bounding to the door! She immediately booked a series of appointments!

My second result was even more astonishing as it was in front of my eyes!

A lady nearly crawled into my premises for her appointment virtually bent in half and unable to straighten up and said that she had a very painful sciatic condition affecting both legs that had commenced that morning. She asked if I could help and I said that I would of course try but not to expect an immediate response.

I did VRT at the beginning and at the end of a conventional treatment including DR and Lymphatic stimulation.

During the conventional treatment, as I started to work on her right hip area, she let out a gasp and said that it felt like I had reached into her chest and given an almighty yank! I was a bit concerned but obviously made sure that she was OK and she assured me that she was.

When I finished I stood her up very gently and asked if she could straighten up - she did slowly, expecting pain and was delighted when there was none! I got her to move around the room to gauge her movement and within a few moments I had to slow her down. She sat in a chair crossed one leg over the other to put a sock on (which she had carried with her, unable to put on earlier) and then crossed the other leg over to put on the other sock, reached down for her shoes and bent to do the laces up and exclaimed that she didn't know how to thank me enough.

I saw my father who suffers from an arthritic neck condition. His neck had gone into spasm that morning and he had a collar on with his chin almost touching his chest. The doctor had

prescribed very strong anti-inflammatories which were making him feel quite nauseous. I treated him with a brief VRT and DR which he found quite painful but reported feeling some "weird" sensations. He slept for several hours, got up and removed the collar saying that although he still felt a bit achy there was a tremendous improvement. I gave him another brief treatment in the evening before I went home and insisted that he should only gently exercise his neck and not show all and sundry the improvement. He thought it was a miracle and can't wait for the next treatment.

Thank you for introducing me to the wonders of VRT. More successes on the way I hope!

WDDTY - Vol: 7 Issue: 1 ALTERNATIVES TO A HYSTERECTOMY

Remember: The only true indications for a hysterectomy are: uncontrolled bleeding, particularly during a caesarean, and endometrial or invasive cancer. Many of the conditions which are currently "treated" with hysterectomy can be helped and even cured.

For all abnormal gynaecological conditions polycystic ovaries, too much bleeding, acyclic bleeding, heavy bleeding, endometriosis and fibroids, first. . .

Get your all your female hormone levels checked. This includes estrogen, progesterone, luteinizing hormone, etc, which can be checked by a simple blood test.

Consult a herbalist as the least invasive form of therapy. Agnus castus is a non hormonal herb which acts upon the pituitary gland to regulate female hormone levels naturally. In Alternative columnist Harald Gaier's experience, it has a high success rate in regulating all the above conditions, and there is evidence that it has reduced fibroids.

If you have fibroids, you might also. . .

Watch and wait. Fibroids are estrogen dependent and can stop growing, shrink or disappear altogether after menopause. They can also degenerate when the tumour outgrows its blood supply. Deprived of oxygen, the centre of the fibroid registers this lack of oxygen as pain, in the same way a frost bitten toe does. The pain can be quite severe but is not life threatening.

The fibroid may shrink or disappear altogether and over the course of a week the pain should disappear as well.

Watch your diet. Limit your intake of foods which stimulate estrogen production these include dairy products, red meat, chicken and refined sugar. Stay on a low fat, high fibre plan. Dietary supplements of methionine, chorine and inositol (1000mg each per day) and magnesium (up to 800mg per day) and a good B-complex supplement can help to alleviate symptoms.

Rule out cadmium poisoning. Cadmium is found in enamelled pans, in cigarette smoke and in heavily polluted environments and can cause enlarged ovarian and uterine tumours. Hair and mineral analysis can provide your cadmium profile. If levels are high, draining the cadmium homeopathically can reverse tissue growth.

Try other herbs or homeopathy. See our Alternatives column, WDDTY vol 6 no 4 for other suggestions.

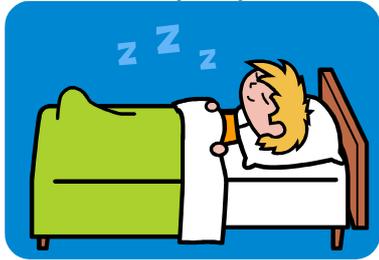
If you get no relief, consider surgery for the fibroids alone. This doesn't include cases where the fibroids aren't causing any symptoms; they'll shrink anyway after menopause (Ob Gyn, 1992, 79:481-4). The least invasive surgery is myomectomy the removal of the fibroid leaving the uterus intact though there is a widespread ignorance of this technique, which takes much longer than and requires more surgical finesse than a hysterectomy. If you are pre menopausal, be aware that in around 30 per cent of cases they may grow back.

A perfect day

*You have not lived a perfect day,
unless you've done something for
someone who will never be able to
repay you.*

Ruth Smeltzer

How healthy is your bed?



By Val Bullen, a senior lecturer in the Department of Complementary Therapies at the University of Westminster.

Considering the amount of time we spend in our beds it is interesting the scant attention we pay to them. Yes, you might change and clean the sheets and pillowcases regularly but what about the pillows themselves and the mattress?

For those that suffer from asthma and are allergic to house-dust mite, or rather a protein in its dung pellets, it is important that the pillows themselves are non-allergenic or cleansed regularly. House-dust mites live off our dead skin which we shed regularly at about 500gm per year into our clothes and bedding. It is estimated that 1/10th of the weight of a pillow can be made up of old human skin, mould, dead and live mites and their droppings. Personally, I think you should have new pillows every year – they aren't that expensive. The new lower temperature washers do not destroy the house-dust mite – they may even enjoy the nice cleansing shower!

House-dust mites also like the warm humid atmosphere of our beds. We sweat about 1/2 pt of fluid a night and this soaks into our mattress. So what? Well, considering the recent work on patterning of water by Dr Emoto, this water will be patterned by what goes on in the bed – particularly our emotions. So you are in fact sleeping in an 'emotional sewer'. Our recommendation is to 'cleanse' the bed regularly. This can be done energetically with visualisation, if you are good at that kind of thing, or by using an essence. We recommend the Alaskan Flower Essence spray – 'Purification', which can be purchased from Universal Essences. This is particularly important for children after a nightmare or if you have had a row. You can use other sprays such as Calling All Angels to ensure a peaceful

night's sleep or the Findhorn Essence, 'Sacred Space'.

It is at night that the repair and regeneration of our cells takes place, i.e. healing. So the bed is an important place for therapists to consider for their clients. Rolf Gordon, of the Dulwich Health Society, has written a book called 'Are you Sleeping in a Safe Place?' This considers the impact of geopathic stress or distorted earth energies, on our bodies. Like stress in general, geopathic stress is but another stressor that adds to our stress load. However, it may also interfere with our sleep patterns and the production of melatonin which occurs mainly at night. Melatonin is known to be important for the functioning of our immune system and also is anti-proliferative so may be important in the control of cancer. If your bed is situated in a geopathic stress area you may find that you are constantly tired or have chronic health problems which do not respond to treatment.

If you would like more details on how to detect and/or deal with this, please contact me, Val Bullen, on 01749 870026 or visit our website: www.livingharmony.co.uk

References

Masaru Emoto: www.hado.net

Rolf Gordon: www.rolfgordon.co.uk

Universal Essences tel: 0870 0620 206

Booth VRT is delighted
to announce a
Weekend ART Seminar
with Anthony Porter
Sept. 29th – 30th 2007
in Bristol
BOOKING FORMS
ENCLOSED!



Booth VRT are delighted to book this seminar with Anthony Porter who has over 30 years experience as a reflexologist and has developed a wide spectrum of Advanced Reflexology Techniques to enhance your practice. He has also written an ART Handbook. Anthony's courses are usually fully booked months in advance, so book your place now.

THE FIRST SUB-FERTILITY MASTERCLASS

The first Sub-Fertility Masterclass was held on Friday Feb 23 2007 in Bristol and was a huge success! Four people came together with tutor Chris Roscoe and the programme included looking at the Endocrine and Reproductive Systems, the causes, tests and treatments for sub-fertility. We also discussed the emotional aspects of infertility and the 4 month Pre-Conception Plan for couples which looks at their lifestyles and aims to boost their general and fertility health. Our role as Reflexologists in giving support and information to clients was examined as it can be so vital. We can provide the humane and compassionate side of treatment which can counterbalance the more physical and mechanical medical treatment.

There was plenty of practical work too. The very powerful VRT Endocrine routine was learned and also the technique of balancing the Chakras on the feet. The day was very holistic in its approach and so there were aspects from other therapies practised, such as Precision Reflexology links to the Endocrine and Reproductive points. We also looked at how magnet therapy, crystal healing, colour therapy and visualization can all help to empower the client and aid success.

We enjoyed a sociable and tasty lunch together (Chris is a keen cook) and the whole day was lively and stimulating. Roll on April 20 and the next Sub-Fertility Masterclass!

THE FIRST PAIN AND MOBILITY MASTERCLASS

The feed-back from the recent Pain and Mobility Masterclass with Lynne Booth was extremely positive and the day passed quickly with new techniques following in quick succession during the many practical sessions. It was important to examine the definitions of pain and how to help the client cope, often by means of self-help VRT or hand reflexology. The four reflexologists who attended enjoyed learning new specialized techniques and spent time on the very effective

new VRT *Pelvic Balancing* and *VRT Signalling* techniques recently developed by Lynne, that can be used on the reclining or weight-bearing feet (or hands). *Pelvic Balancing* involves precise working of the heel to balance the body through the pelvis, lower lumbar spine and abdominal reflexes.

VRT Signalling was developed from Lynne's work with professional footballers, who often experience one-sided injuries and conditions, we experimented by locating precise reflex points while using alternating pressures to connect to Zonal Triggers and nail-reflexes. Results over a period of time suggest that healing is accelerated as the injured side appears to mimic the healthy side of the body. Other therapies such as kinesiology, Emotional Freedom techniques (EFT) and particularly Nerve reflexology were also briefly shared on Lynne's course. Working on individual fingers for limb joint pain can bring almost instant relief in some cases.

Overview: Working in two pairs, with one highly experienced tutor, in these popular masterclasses enabled plenty of one-to-one instruction as well as dialogue, questions and discussion that would be impossible in larger groups. The classes combine the best of structured theoretical and practical work in a relaxed but very productive setting. The whole spectrum of the VRT repertoire was available regardless of what courses the participants had previously attended. Participants also benefited from the wealth of reflexology knowledge that Chris and Lynne have developed over the years. Copious handouts and an excellent lunch, that were included in the price, gave the attendees a different and very special day of tuition. More are planned in the future.

NEW DATES FOR MASTERCLASSES

See separate application forms

Chris Roscoe – Sub-Fertility

Fridays 25th May or 13th July 2007

Lynne Booth – Pain and Mobility

Wednesdays 20th June & 19th Sept 2007

How was it for you?!

Comments from both recent masterclasses

"I liked the small class size - it meant more one to one teaching - very helpful with practical".

"Very interesting and lots of good techniques to take away and use immediately."

"Lots of positive info on books, websites etc that will be very useful for me to pass on to clients"

"An excellent day. Well worth getting up at 6am for!" (reflexologist from Yorkshire)

"Brilliant day. Great to have so much attention to learn fascinating new techniques for all types of pain"

"I left totally fired up to try so many new and revised techniques, all learnt during a full but stimulating day. Wonderful lunch!"

Heel, Jazz, Heel!

Jazz, the Tibetan terrier, has been saved from a painful, lingering death - after getting her paws rubbed.

The cancer-stricken 10-year-old is now romping around like a puppy following treatment by a reflexologist.

The art of reflexology - a healing treatment involving foot massage is normally only practised on humans.

But expert Barbara Stanhope-Williamson who treated Jazz - and had never dealt with a dog before - said: "I just pretended I was working on a human. I worked on Jazz's paws as if they were human feet. Of course there are differences in anatomy, but there's an awful lot that is very similar."

And Jazz's owner, Naomi L, of Golders Green, North London, said: "It's a miracle. Just three months ago, Jazz was terribly ill with a liver cancer tumour. She was also severely impaired by ligament injuries in her hind legs and could hardly walk. Now she leaps on to the sofa at the slightest opportunity and there's no sign of the tumour at all. It's just amazing." ...

The above section is part of an article that appeared in the News of the World in 1999. With permission from former VRT tutor, Stanhope Stanhope-Williamson, we reprint it as a cautionary tale. Barbara was only too happy to treat the client's dog when the owner arrived for a treatment and co-operated with a journalist who had been contacted by the dog's owner after Jazz's miraculous recovery. However, Barbara later received a caution from the Veterinary Association that it was not acceptable to treat animals without a vet's permission and presence. Apparently, in some cases a prosecution could result. Before you work on animals please check what the current legislation is and what your insurance covers.

Membership Renewal
Only £20 (£25 overseas)

For those members whose annual subscriptions were renewable on 1st March 2007, you will find a blue renewal form enclosed. Please post this form with your cheque, or fax with a card number, to the office address.

Members are first to hear of new courses and priority booking, theirs are the only names on our website and there are often special offers, reduced prices for courses and lots of hints and information in the quarterly newsletter.

Margaret Bill writes about the interesting course on Nails and their conditions that she studied.

I decided to take the nail course because many of my clients have such bad nails and callusing that performing reflexology on the feet is hampered. Many of the clients receive National Health Service chiropody but this only occurs at best at four monthly intervals. You can imagine just how uncomfortable this causes people's feet to become. Other clients, mostly males, simply don't take care of their feet and therefore have damaged nails and/or callusing. Some of my larger female clients and disabled clients just can't get to their toes to cut their nails properly. This causes them to walk and stand awkwardly which causes problems further up the skeleton. Many people don't "have time" to go to a chiropodist, or, where financial circumstances limit the options, would choose reflexology rather than chiropody. It therefore seemed obvious to train and qualify in pedicure so that I could obtain insurance to practice and make my clients feet both comfortable and easier to work. I enrolled on a Nails course at the local College of F.E.



One of the assignments was to find out about nail diseases so that we would recognise when a manicure/ pedicure was contra-indicated or whether particular caution was required. Some of the contra indications are not really applicable to reflexology but I feel it is important to know what we are dealing with and how very infectious are some of the conditions. It follows that we practitioners should know the precautions necessary in order to minimise the possibility of cross infection and cross contamination. I also feel that pedicure treatment is helpful to the chiropodist as keeping the nails in good order and the feet free of calluses enables them to get on with their highly skilled work within the short time allotted to them without having to spend time doing the "donkey work". One of the practices in manicure/pedicure work is to 'sanitise' the hand/foot before work commences. This is done by cleansing the hand/foot with either surgical spirit or rose water. I have adopted this practice before commencing reflexology and found it very beneficial, especially cleaning between the toes as this is an area that

despite a clients best intentions, often gets 'gunged' up and a little smelly! Reflexologists are in a privileged position in that they see feet that are often not usually exposed and can therefore give sound advice as to how to treat problems such as a fungal nail infection or direct the client to their GP or a chiropodist if there is something untoward going on. So knowing a little bit about how a disease manifests itself by showing up in the nail, could catch a medical problem in its infancy.

Fungal nail infections are a 'pain' in more ways than one. They are often an outward sign of a candida infestation of the gut. Mostly they should be treated by both a topical application and internal medication at the same time. If the problem is extremely bad then the client should consult his/her GP and have a sample of the nail analysed and the appropriate medication given. Preparations can be bought over the counter but should always be taken in conjunction with a topical application. Tea tree oil is very good as a topical application and in a few drops in a glass of warm water can be swallowed as an internal cure. In nearly all cases it is going to take at least 12 months for the problem to be eliminated and in some cases it may take years. Homeopathy or herbal medication can also be used, but should be done under the direction of a suitably qualified practitioner. In all cases good foot hygiene is a must. Clean socks/tights every day. Feet washed twice daily and dried thoroughly especially between the toes and the topical treatment applied each time.

I think that fungal invasions result from our sugar and salt rich diets and the use of so many artificial ingredients in many of the foods. Clients should be advised to cut down on these. Pesticides and fertilizers used in food cultivation have an impact on residues that remain within our bodies. Plastics, so widely used for wrapping food, also have an effect on our bodies and therefore the condition of our feet, hands and nails. The list is endless so I won't go down that route.

My research was initially from the 'Hooked on Nails' website, which has links to other useful sites, and from the excellent book 'Two Feet from our Thoughts' by Adrian M. Seager*

N.B Adrian also has a new book out which covers foot conditions among other interesting topics: "Reflexology and Associated Aspects of Health" Lotus Publishing, £14.99 ISBN 9543188-8-9

In the summer 2007 newsletter we hope to offer, for a nominal sum, a coloured handout Margaret has devised of various unsightly nail conditions.

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