

Vertical Reflex Therapy



Membership Network Newsletter

No 6. Spring 2004

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There will be more about the course and new dates inside this issue.

Dear VRT Member,

Greetings to you all and welcome to our regular VRT members and all our new Network Members. This issue covers a variety of topics and gives some ideas for using VRT in different situations and encourages you to give all your clients self-help homework. Page 12 has a copy of a VRT Hand Chart and Self-help instructions for you to reproduce and personalise for clients by the marking individual reflexes to be worked.

Apologies for the late arrival of this newsletter but my father became critically ill and died in February and there has obviously been much to organise and deal with plus a backlog of admin to sort out on top of normal work.

There is an increasing interest in VRT in the United States and I have been invited to speak at the bi-annual Reflexology Association of America Conference to be held in Nashville this May. I am teaching the Basic and Advanced VRT courses to some of the delegates directly afterwards. I shall also go to Memphis to visit the second most visited home (after the White House) in the USA. Yes, it's Elvis Presley's former home, Graceland. where I shall enjoy seeing 60's and 70's kitsch memorabilia. I am sure it will be the perfect antidote to the serious, interesting topics I shall discover at the conference! There will be a report on the conference presentations in the next issue.

The first two courses of the acclaimed Nico Pauly Nerve Reflexology seminars have taken place in London and Bristol this year. The results are amazing and attendees have been very pleased to learn new reflexes and techniques that work so precisely on the nervous system. For example, we can now find a new reflex on the ankle for the Ischiadicus nerve point that, when worked in a precise direction with the side of the thumb, can sometimes free up a tight hamstring in seconds!

The bulk of the VRT Network Membership renewals are due each March and many of you will be receiving a copy of the renewal form with your newsletter. **The good news is that we have reduced the annual membership to only £20 per year but all the benefits remain unchanged!** This is great value as only VRT members names and details are published on our website (one referral alone will more than pay for your annual subscription). There are three newsletters a year with various offers at certain times. You are allowed £5.00 off any subsequent VRT courses and £15 off any courses you attend for a second time. So please send off your renewal form at once. It is reassuring for those who have joined within the last year that they will also pay £20 when their renewal is next due.

We also look at the results of the workplace research in VRT and there are more case histories and letters. Recently my VRT tutor for Scotland and the border counties, Geraldine McCullagh, treated, and was interviewed by, a journalist from The Scotsman. Geraldine is a very experienced teacher and reflexologist and her skills certainly impressed the journalist, as you will see from the enclosed article. Please keep those case histories coming in.

With all good wishes and thanks for your continued support of VRT.

Kind regards

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The Duke of Edinburgh visits the St Monica Trust, Bristol - November 2003



Lynne writes: For the past nine years I have run a weekly reflexology clinic at one of the largest residential nursing complexes for the elderly in the UK. Eighteen months ago the Duke of Edinburgh visited the Trust and laid a foundation stone at the site of a new state-of-the-art nursing home in the grounds. In November 2003 he returned to visit the staff and residents who had settled into the new building the previous summer. In March this new home won first prize in *The best new development category* at the 2004 Healthcare Design Awards.

HRH toured the building and I was introduced to him in my role as reflexologist at the Trust. He was very interested in all aspects of life for the residents at St Monica and was well informed. He was particularly keen to know about the resident's freedom of choice in their décor and possessions, the opportunities for hobbies and other interests and facilities on offer.

The Trust intended that he should visit two of the residents personally as well as in the communal areas so I spent several minutes talking to him in a resident's bed-sitting room. He quizzed me on the various types of wheelchairs available and on the therapies offered within sheltered housing and the home.

I must say I admire the Duke of Edinburgh for his interest in the elderly, stamina and good sense of humour. After his private visit to the Trust he left for a busy schedule at two major venues in Bristol followed by a 120 mile return journey to London for a large official banquet in the evening. At 82 years he is older than many of the residents I treat!

Unfortunately I have my eyes closed in the official photo and look as if I am praying or about to faint!

VRT Refresher Days

Many VRT practitioners have been asking for VRT Refresher Days where those who have attended the VRT Basic and Advanced courses can refresh their techniques, learn new ways of working with VRT and to have taster sessions on the hands and nails and endocrine foot reflexes. They offer new aspects on VRT and there is a £5.00 discount for members. These will be occasional courses and we have one booked in Leicester for Sunday 31st October 2004. Cheryl Sue Waters, my VRT tutor in Australia organised and ran a well received *VRT Refresher* course in Australia recently where the following questionnaire comments were made,

- "Excellent – really cemented some of the cloudier points".
- "Very useful & more valuable than just a refresher".
- "A very enjoyable informative course"
- "Excellent – well spaced theory and practical"
- "Very thorough & comprehensive"
- "I feel more confident about using VRT and applying it in other ways".
- "I need this refresher – it was rewarding to revisit some of the techniques I had forgotten. I am again filled with enthusiasm".
- "Came away with practical info I can use at work tomorrow".
- " Highly recommended".

Letters from Practitioners

Dear Lynne

Thank you very much for the time you dedicated to teaching us in the USA. I want to share with you an incident that took place on the flight back from Orlando, Florida. A child, around 8 years old, sitting in front of me had started coughing uncontrollably and her mother did not seem to know what to do. I volunteered to use what you taught me, by working her hands with Diaphragm Rocking. Five minutes later, the girl was fine and the mother very thankful and impressed. I told her about VRT, and I showed her your books. I want you to see what kind of impact your work has on other people and to thank you once again for all

your help and support. I wish you a happy New Year 2004 and I hope to see you again in May in Nashville.

Love Florica Radu

Florica recently sent in another good VRT result, she writes: I want to share with you another one of my 'vertical experiences'! I was working on a person who had a bad eye condition and the doctors were giving him a different medication every week. Six weeks after I started working VRT (once a week), the eyes were perfectly healthy. Of course, my client wasn't convinced that VRT made the difference. His next condition was a swollen, red-and-blue ankle. His condition was so bad he couldn't drive. After I checked my charts, I realised it led to his lower back. He confirmed that he used to have problems with that area a year ago but that since then he has been fine but his ankle started to swell. Two days after the first session (working his lower back), he called to tell me that his ankle was back to normal: normal size, normal colour and no pain.

Dear VRT

Is Lynne considering a badge of any sort for those who have attended VRT courses or who have VRT membership? I personally would be very pleased to be able to wear a badge indicating that indicated I practised VRT.

Regards H.C.

Reply: I have it in mind to produce a badge at some time but the costs are quite considerable in getting a specialist badge designed and manufactured with VRT logo which would be of a high quality but not too expensive to purchase, approximately £5.00 £7.00. When I have finished mapping out the new colour hand chart and have had that printed I will think about the feasibility of badges. Would other VRT practitioners like

a VRT logo badge?. Please let us know your opinion.

Teaching in Schools

We are increasingly being invited to run in-house courses for reflexology schools and colleges. The fundamentals of VRT are relatively easy to learn and can be quickly assimilated into a newly trained reflexologist's practice. It is a useful tool to have and training establishments are very aware that a new therapist requires extra skills quickly if they are to compete in the complementary therapy marketplace. The feedback has been good and we are regularly invited to return to teach courses to each intake at the end of their training. This is a contrast to some unscrupulous establishments where college tutors are teaching various ART, Precision, VRT and other courses as part of an advanced reflexology syllabus with no authorisation or tutor training programme.

Nico Pauly

Nerve Reflexology Courses

In January and March two groups of 24 reflexologists, most of them VRT members, learnt the first level of the Nerve Reflexology course in London and Bristol. As soon as the course began we realised that we were about to learn some very profound and effective techniques. We also knew that we were going to have to work hard to understand the clinical concepts but this was made possible and enjoyable by Nico's upbeat approach, excellent colloquial English and ways of teaching and demonstrating anatomical concepts to us. Nico is a Belgium physiotherapist and Manual Neuro Therapist who runs a very busy practice in Belgium, is secretary of the national manual therapy body, IRSK -Wings and teaches manual neurotherapy and physiotherapy to medically trained therapists in Belgium. This was a unique opportunity for us to learn new techniques and ways of treating the body through the feet.

It is extremely rare to attend a course by a mainstream medical practitioner who also encompasses reflexology techniques and reflexes or *zones* as he (like Hanne Marquardt) calls them. Nico rightly suggests that all reflexes on the feet must be triggered by an impulse connecting to the central nervous system and therefore individual organs, muscles, glands and parts of the skeletal system. Many of us

purchased a foot skeleton from Nico and we were able to pinpoint the exact nerve reflexes on various parts of the bone. For example, Nico and other tutors of reflexology place L3 and L4 either side of the navicular bone. This makes a lot of sense as his approach, based on Froneberg reflexology, places the thoracic and cervical reflexes further up the foot than most reflexology charts show.



We also learnt how to work bone-on-bone to trigger a reflex. The pressure was firm and the side of the thumb is used. The principle is the same as we use in VRT when we work the spinal reflexes bone-on-bone with our knuckles to trigger a neural pathway reflex. Nico takes some of our neural pathway work further with his clinical approach.

Although reflexologists are not qualified to perform body work or manipulation, Nico showed us how to treat a tight hamstring muscle where we observed the range of mobility of the leg before the treatment. We then held a specific ICH point on the lateral ankle for 8 to 15 seconds. He also showed us how he uses a gentle rocking movement on the leg to gently stretch it while still holding the Ischiadicus reflex with the side of his thumb. After a short pause the hamstring was tested and there was immediately an increased range of at least 20% movement. The same and better results were achieved in the subsequent classroom practical and I have freed up several hamstrings this way in recent weeks. My feeling is that every sports club should employ a reflexologist with VRT and Nerve Reflexology skills!

The first level of the course was to learn the reflexes for the lower back and those relating to the bladder, prostate and uterus and others. Levels 2 and 3 will address all other areas of the body as we work up the spine including the hormonal system. We were fortunate to have reflexologists from Holland, Belgium, Solvenia, France and Denmark on our courses.

A Neuroreflexology course attendee reported to me the following results two weeks after the January 2004 course:

"One of my clients, a 69 year old lady with severe pains in the lower back is literally dancing around, she has been in almost constant pain for many years, and the points have really created a miracle (to use Nico's own words!!) My son is my primary client, and he too is responding to the treatment (my family is remarking how good he is doing and naturally I trust their assessment. I also treat a 72 year old retired man, who has been operated for reduced blood circulation in the legs, and this the doctors treat by inserting a syringe in the groin to open the arteries somehow). Unfortunately they hit a nerve (or nerves) when they treated him, and besides the fact that it didn't improve the blood circulation, he had much more pain than before. I tried Nico's points on him too, using the points for the nerve plexes and he is much better now, and says his legs are better than they have been for a long time. Unfortunately, he is a walking history of diseases (he has only 45% lung capacity and a weak heart), but says, that during the last year reflexology is the only lasting and truly positive treatment he received".

I am delighted that I have booked Nico to come back to the UK to teach his Nerve Reflexology course again in Bristol in November 2004, January and June 2005. As with the last courses, VRT practitioners are being given first choice to attend before the course is put on the website. There are an absolute maximum of 24 places per course and last time these were filled within two weeks. Level 1 can be studied on its own and there will also be some places available for Levels 2 and 3 as well, on a first come first served basis. Attending all three Levels opens up the scope for a much more clinical practice for the reflexologist. Some of us have begun experimenting with Nico's nerve points on the weight-bearing feet using VRT techniques. These are also very effective.

New Bristol Nerve Reflexology Dates:

4/5/6 November 2004 - Level 1
28/29 January 2005 - Level 2
9/10/11 June 2005 - Level 3

Current dates (all fully booked) :

2/3 July 2004 - Level 2
9/10/11 September 2004 - Level 3

See enclosed booking sheet

GREEN TEA BENEFITS

Regular drinking of green tea can reduce 'bad' cholesterol levels. It's been tested on 240 patients with high cholesterol who were already on a low-fat diet, and LDL cholesterol levels fell by as much as 16 per cent.

The participants, who were selected from among patients at six urban hospitals in China, were given either a 375 mg capsule containing the aflavin-enriched green tea extract or a placebo. LDL cholesterol levels did not fall in the placebo group. (Source: Archives of Internal Medicine, 2003; 163: 1448-53).

From "What Doctors don't tell you"

Geraldine McCullagh, is our VRT tutor for Scotland and the border counties. Geraldine was recently interviewed by a journalist for The Scotsman, one of the two largest circulation Scottish newspapers. As you will see from the enclosed article, Geraldine's VRT skills were well received as the journalist comments, "I've had reflexology treatments before, but none of them have had such an immediate effect".

Geraldine also has these two tips to offer:

Weight-bearing Hand Reflexology

"On VRT Hand courses we suggest using, and provide, a small tray in certain circumstances if a table is not available or suitable. Instead I find a place-mat (corked on the back) is better than a tray and much easier to carry around with you".



LB comments: *It's well worth experimenting with both suggestions. I have always used a tray or a board but a large place mat has advantages as it has no lip like a tray and the cork backing is softer. This illustration shows the correct angle for the arms whether on a tray or table.*

Diaphragm Rocking

I have tried *Diaphragm Rocking* on the toes, in particular with the big toe. I suppose it would be called *toe rocking* or *head/sinus rocking*. I think it is ideal to use on clients who are very much *in their heads* and unable to switch off. Other members could try it out and give feedback".

LB. comments: *The toe Diaphragm Rocking has to be applied very gently and seems to be effective in reducing over-activity in the brain and I have experimented with a little gentle toe-rock followed by the standard foot Diaphragm Rocking*

MARCH VRT MEMBERSHIP RENEWALS

PLEASE COMPLETE
ENCLOSED BLUE FORM
ONLY £20 - SAVE £5.00!

- For those whose membership is due for renewal at this time and we would encourage you do so.
- The cost of the VRT Membership has been reduced to £20 so this represents even better value for money
- Special members offers will continue to be made, including reductions on subsequent or revision VRT courses.
- Priority booking for new dates for Nico Pauly Nerve Reflexology courses

"Incisive experiences always lie behind scars.

However, scars also symbolise healing processes"

*from Collected Treasures from the "Foot-path" of Life by Hanne Marquardt
www.fussreflex.de*

Vertical Reflex Therapy and Hand Reflexology Survey on the Workplace Bristol - Summer 2002

Report on the results of 4 weekly treatments on the hands and feet lasting 20-30 minutes per session. Clients were asked to work on the *weight-bearing hands* for a few minutes twice a day during the treatment period. At the end of four weeks most reported improvement of over 90% on long term problems. I suggest that this excellent result was possibly achieved because the clients used self-help VRT on their hands between treatments.

Suggestion:

Photocopy the hand chart on Page 12 to give your clients their homework!

The following examples illustrate the variety of ailments that can be quickly and successfully treated within the workplace or office environment. These results are exceptionally positive and I suggest this may be partly because *self-help hand reflexology* was applied on a daily basis to help to trigger the body to help itself in between the professional treatments. Six members of staff in a large company were invited to take part in this small survey. None had been receiving reflexology before and in each case there was a positive response to the treatment within the first one or two weeks and after four weeks some conditions had improved by well over 90% even though some of the problems were long standing and had resulted in time off work. All members of staff reported major improvements.

Each person's twenty-five to thirty minute treatment began with basic Vertical Reflex Therapy on the feet and the hands, then their feet were briefly treated with conventional foot VRT while using the hands synergistically. One female member of staff received mostly hand reflexology as she could not bear her feet to be touched and she was one of the employees who improved the most following a car accident. Their treatments culminated in a period of concentrated hand VRT including some specific nail-working. The client kept a record of their reaction/improvement to each treatment and was given VRT Hand charts marked with specific reflexes to treat with self-help VRT twice a day for a few minutes between the weekly treatments. All six results were exceptionally positive and after four treatments both the client and myself made an evaluation as to the progress made since the VRT commenced:

Client A

A female caterer had been badly hurt in a car accident seven months previously

resulting in whiplash and had very restricted and excruciating neck movements that caused headaches and her sleep patterns were so disturbed that she barely slept for more than two hours at any one time.

Result: 50% improvement in neck mobility. Can now turn her head from side to side with no pain. No lasting improvement for headaches. Sleep 100% improvement. Levels of stress and tension greatly reduced.

Client B

An administrator suffered from long-term Repetitive Strain Injury (RSI) and her shoulder and right side of neck were stiff and painful when the hand was held in a lateral position. This had become a chronic condition. She also reported painful knees that *clicked*, possibly due to early signs of arthritis. She also had a sprained right ankle.

Result: 90% improvement in arm, neck and shoulder in terms of reduced pain and increased mobility. Sprained ankle positively responded to VRT. Her knees did not improve. She also felt she had benefited holistically from the treatments.

Client C

An administrator had an extremely painful left elbow for three weeks and a right knee that every few days caused him to experience a momentary excruciating pain when he put pressure on it at a certain angle.

Result: Elbow improved immensely from the first treatment and was virtually 100% recovered by the end of four weeks. The clicks in the knee lessened and were not painful when they occurred. Immediate relief for hurt ankle.

Client D

A care assistant who had suffered from right lower lumbar back pain for seven to eight months. Her work necessitated standing all day and as the day wore on her back became increasingly sore. She had taken two weeks off work on the onset of the pain and a further month off work five months later. She also had chronic eczema in her ear which caused discomfort and irritation.

Result: Back had improved considerably over four weeks with little soreness remaining. Her long term ear problem became worse before it got

completely better. Her sleep was much improved.

Client E

A nurse had left neck/arm problems that gave her limited mobility so that she could not raise her arms behind her back any distance and also had an old right hip injury from many years ago. She had badly sprained her left ankle three months previously, resulting in crutches and then a stick for a while and was still suffering from weakness and soreness. She also said that her foot was permanently at an awkward angle and she felt she could feel the bones *almost grating* as she walked.

Result: Immediate increased mobility in arm at the end of first treatment. Can now stretch arm straight. Immediately after the first treatment she had more backward arm movement which has further improved. Long term problem with left foot improved and virtually pain free and walking was easier. However self-help was not enough and it requires professional VRT to maintain this situation on the foot.

Client F

Administrator had whiplash injury and low back/hip and neck pain. All these conditions were long standing problems that occasionally flared up. She was regularly treated by an osteopath.

Result: Neck is now generally much improved but a little stiff. Entire body is much more relaxed than it has been for a considerable period. Hips are much improved. Her osteopath noted these improvements and suggested a longer gap between treatments for the first time ever. VRT self-help techniques also helped her holistically.

Conclusion

All staff reported that they felt the reflexology had been of great benefit and all said they would continue to use self-help reflexology when required. One person expressed doubt that the short self-help VRT on the hands would not be powerful enough to achieve this level of results. This is a very valid point as in the case of Client E self-help VRT was not good enough and her foot only improved when I professionally worked her hand. However, the general opinion so far is that when the hands are worked in a *weight-bearing position* the body is particularly responsive whether the person has been treated professionally or not.

This report was published, in a similar format in June 2003 in
"Vertical Reflexology for Hands " by Lynne Booth

VRT Case Histories

Reflexologist:	Gill Smith	Condition:	Chronic fatigue
Duration of Illness:	Unspecified		
Aged:	34 years	No. of Treatments:	Four
Contraindications:	Trigeminal neuralgia, cerebral palsy, frequent migraines, menstrual problems, IBS, mild asthma and suffers from stress.		
Aim of Treatment:	To try and give client some energy back.		
Result:	Inconclusive.		
Comments:	<p>I followed the advice from Lynne Booth on a treatment plan. I think client had too many other ailments and a negative outlook, so I don't think she saw/acknowledged the small weekly improvements that I noted in my notes.</p> <p>Comment from Lynne: We cannot always achieve great results and the lack of a real breakthrough is often the case, as many of us have experienced. However, a client recently announced that she was no better at all, as did the person above. I then asked her if her sleep or energy had improved. "Oh yes", she said, "I have much more energy and sleep like a log!" These examples show that precise note-taking each treatment is essential to monitor changes although it is still up to the client to acknowledge them.</p>		

Reflexologist:	Jon Webber	Condition:	Frozen Shoulder
Duration of Illness:	Two months		
Aged:	60 years	No. of Treatments:	Three
Contraindications:	None		
Aim of Treatment:	To free up the shoulder and make the condition less painful.		
Result:	Excellent. More work could have been done but client was very happy with result and decided not to have any more treatment.		
Comments:	<p>During treatment client was in pain, felt nauseous and faint with cold sweats, so I would get him to sit down. Treated only for 10 minutes each time, finishing off with lymphatic flushing, which client felt draining out of him, after which he felt better. Then Diaphragm Rocking, which brought him right back to normal again. He was absolutely amazed and I was thrilled. His shoulder freed up more after each treatment and the constant pain went away. I thought it was incredible that during each 10 minute session he went from feeling completely rotten to, after treatment, feeling completely well again, so much so that he went straight back to work and had a bacon butty for breakfast!</p>		

Reflexologist:	Diane White	Condition:	Infertility
Duration of Illness:	Trying for a baby for ten months.		

Aged:	38 years	No. of Treatments:	One
Contraindications:	None		
Aim of Treatment:	To improve chance of conception.		
Result:	This lady came to me for a massage first and explained that she felt very stressed, having been trying for a baby since miscarrying in January 2003. I suggested she came for reflexology and as she was using an ovulation kit, knew exactly when she was ovulating, arranged her next appointment around that time. I did basic VRT, synergistic thyroid and lumbar spine reflexes, Zonal Trigger to ovaries, conventional reflexology, lymphatic drainage and lots of Diaphragm Rocking and relaxation to complete the treatment. I asked her to ring me if she had a period to arrange some more appointments. A few weeks went by and I was beginning to wonder whether she was pregnant or not, when she rang to say she was in fact pregnant and was delighted that reflexology had worked so quickly. She wanted another treatment but due to the instability of her last pregnancy, I recommended a Reiki session instead. I hope to continue treating her throughout her pregnancy with reflexology once she is over the danger period.		

Reflexologist:	Clare Newby	Condition:	Pain Right hip and leg - muscular
Duration of Illness:	Over several years		
Aged:	83 years	No. of Treatments:	One
Contraindications:	None		
Aim of Treatment:	Reduce pain from hip and leg, thus aiding mobility.		
Result:	I came back from Lynne's VRT Hand and Nail-Working course in London, November 2003, and worked on my mum's hand as she had a painful leg. I was just practising hand VRT and then did nail ZT and linking. She said once I connected nail trigger she felt a huge rush of warmth to the affected leg - a surprise to both of us. Now I give her regular hand VRT and taught her self-help hand reflex in between. The aches come and go but are controllable. It was the suddenness of the reaction - just by touching the nail that amazed us!		
Comments:	That night, after the course, I also did just the nail work on my 11 year old hyperactive boisterous son who never sleeps through the night without at least one wake up. I worked all the nails 'just to see' - he got a horrible headache and I thought 'Oh no'. He went off to bed and slept straight through! Magic!		

Advertisement

EQUIMENTUM	BRISTOL, Fri-Sun 4-6 June 2004
<p>Back & neck pain Disc problems Injuries Etc. etc.</p>	<p>Increase your skills and your earning potential! Learn to correct all types of structural problems with this new gentle method of subtle bodywork. Taught by Boyd Campbell Mackenzie, osteopath, who developed Equimentum. 'For all complementary therapists.....!' Using a process of 'active observation' combining attention and intuitive responsiveness with very light touch, a rapid and profound healing response is enabled in the client.</p>
	<p><i>For more information, contact: Pauline A. Noakes Tel/Fax (01275) 846683 Email: pauline.noakes@lineone.net</i></p>

Association of Reflexologists - CONFERENCE DETAILS

**July 22nd - 24th 2004
University of Warwick**

**Theme: "You and Your Practice
Over the Next 5 Years"**

**Open to non-members
Largest ever reflexology conference in the UK**

**Key-note speaker: Hanne Marquardt
Also Dr Christine Page, Inge Dougans, Susanne Enzer
and many other influential reflexologists
Tel: 0118 984 1271 email: aor@slinnmccarthy.com
www.aor.org.uk/www.slinnmccarthy.com**

"I consider Hanne Marquardt to be the most influential reflexologist since Eunice Ingham. Her teaching, books, charts and influence on the reflexology world has been enormous. She is an excellent speaker and is very generous in sharing the knowledge and clinical skills that she has developed over the past 45 years. It is well worth attending the conference for many reasons but the highlight for many will be to hear what Hanne has to teach on "The Importance of the Autonomic Nervous System and Reflexology of the Feet" and "The Marquardt Technique Workshop".

(I shall also be speaking and demonstrating at the conference on "VRT - basics and new developments").
Lynne Booth

STOP PRESS!

Booth VRT have been fortunate to book the following course:

Lymphatic Stimulation Via the Feet Presented by Hedwige Dirkx

**Saturday 20th November 2004 in Clifton, Bristol
10.00 a.m to 5.00 p.m.**

Hedwige is an experienced teacher of reflexology and our VRT tutor in Belgium and has devised a method of stimulating the lymphatic system which, though gentler, is deeper and more effective than conventional reflexology. It is therefore a valuable adjunct to reflexology *and all other physical therapies* but can also be used alone. This is a highly relaxing technique that promotes better cell metabolism, improves circulation and increases immunity. The practical part of the day will cover relevant zones/reflexes and movements. Hedwige presented her method at the REiN conference in Finland in 1998, at an AoR day seminar at the Commonwealth Institute in London last September and has previously taught the Lymphatic Stimulation course in London three times in recent years.

Price £80 to include liquid refreshments. Places are limited. Please contact Booth VRT on 01179 626746 or email: contact@boothvrt.com for an application form



VRT SELF HELP TECHNIQUES FOR CLIENTS

It is very helpful to continue to treat the body briefly between your treatments with a few minutes of simple self-help VRT Hand Reflexology each day. Your reflexologist has been trained in Vertical Reflex Therapy (VRT) - where the weight-bearing hands or feet are briefly treated. This method of reflexology may help accelerate the healing processes in your body and aid a quicker recovery.

You need only work three priority reflexes and your wrists for two minutes twice per day, on waking and before bed, on the weight-bearing hands. You can also work these reflexes on your passive hands, for a few seconds each, whenever you wish during the day. The priority reflexes will be highlighted on this chart by your therapist.

Method:

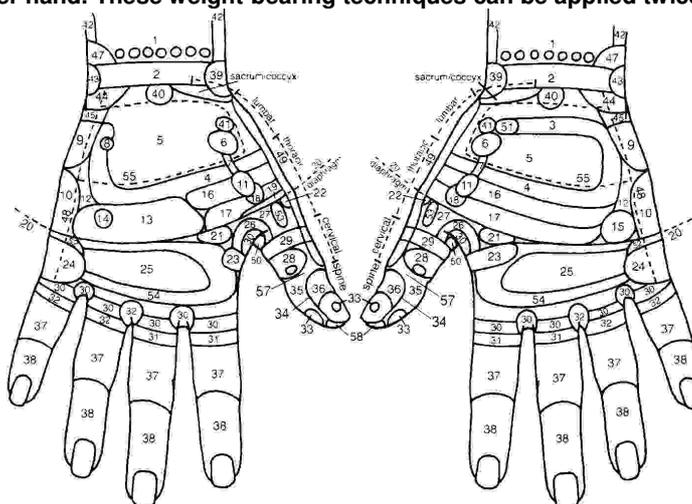
Start with either hand. Stand and place your palm downwards on a table while your straight arm is weight-bearing at all times. You may also sit and press your hand on a tray or book.



1. Slide, press and brush your thumb across the upper wrist 3 - 4 times.

2. In turn, work each of the 3 highlighted reflexes by stimulating a reflex with the rotating pad of your index finger or thumb followed by pressing on the same reflex firmly for up to 30 seconds. The reflex may feel tender but back-off if it feels painful and press more gently.

Repeat on the other hand. These weight-bearing techniques can be applied twice a day



Key master chart for all reflexes

- | | | |
|---|--|---|
| 1. Zonal Triggers | 20. Diaphragm | 39. Uterus/Prostate |
| 2. Fallopian tubes/seminal vesicles/vas deferens/helper diaphragm/heart | 21. Solar Plexus | 40. Helper ovary/testes |
| 3. Sigmoid | 22. Thymus | 41. Penis/vagina |
| 4. Colon | 23. Heart | 42. Helper lower back/sciatic/rectum/colon/uterus |
| 5. Small Intestine | 24. Shoulder | 43. Ovary/testes |
| 6. Bladder | 25. Chest/lung/breast | 44. Hip/sacro-ileac joint |
| 7. Ureter tube | 26. Trachea/oesophagus/bronchial tubes | 45. Leg |
| 8. Appendix/ileocecal valve | 27. Helper Thyroid | 46. Thoracic area/diaphragm |
| 9. Knee | 28. Thyroid/parathyroid | 47. Hip/pelvic area |
| 10. Elbow | 29. Neck | 48. Helper lateral spine |
| 11. Kidney | 30. Lymphatics | 49. Spine |
| 12. Helper lateral digestive reflexes | 31. Eyes | 50. Larynx/vocal cords |
| 13. Liver | 32. Ears/Eustachian tube | 51. Anus/rectum |
| 14. Gall bladder | 33. Pituitary/Pineal/Hypothalamus | 52. Armpit |
| 15. Spleen | 34. Neck - side | 53. Breastbone |
| 16. Pancreas | 35. Brain/skull | 54. Ribs |
| 17. Stomach | 36. Face/teeth/ jaws/ tongue/ throat | 55. Mid/lower back |
| 18. Adrenals | 37. Helper sinuses/teeth | 56. Sciatic nerve |
| 19. Duodenum | 38. Sinuses/brain/skull | 57. Cerebellum/brain stem/ cranial nerves |
| | | 58. Skull |