

# Membership Network Newsletter

All content copyright ©Booth VRT Ltd  
No 38 Summer 2014

Dear VRT Member,

Greetings to all out VRT members and I hope you have all enjoyed a great time this summer wherever you are.

This newsletter is packed with interesting articles and items and the tutors and I find it heartening, on our travels, to hear and see how much VRT is being integrated into complementary health care. Reflexology Week is coming on 22 -28 September 2014 and many of you will be involved in promoting reflexology and sharing your skills.

This year I have been delighted and honoured to accept the invitation to take on the role of Expert Reflexology Advisor to the Federation of Holistic Therapists (FHT). I recently enjoyed a great day of celebration at their *Excellence in Practice Annual Education Awards* in the majestic Coombe Abbey Hotel near Coventry. Six outstanding therapists received one these prestigious awards including two VRT practitioners, Dr Carol Samuel and Zoe Warner, both of whom have written articles for the VRT Newsletters in the past.

**Dr Carol Samuel, FFHT (Excellence in Practice - winner)**

*For her PhD, Carol carried out laboratory-based research into the effects of reflexology on acute pain in healthy human subjects. Carol is also the first non-medically qualified practitioner world-wide to achieve a PhD in reflexology.*

**Zoe Warner, MFHT (Excellence in Education winner – Student of the Year)**

*Zoe continues to train to this day, in order to broaden her skills and support her two successful businesses. After her husband was injured in a roadside explosion while in the army, Zoe also founded Therapies4Forces, offering free therapy*

*services to injured personnel, veterans and their carers and families.*

The Federation is the largest professional association for therapists in the UK and Ireland. They have thousands of members and offer a broad range of specialisms - from sports and remedial therapies, to complementary health care and holistic beauty treatments.



**Dr Carol Samuel (3<sup>rd</sup> right) supported by fellow guests and colleagues; Lynne Booth, Sally Kay and Judith Whatley.**

“Complementary therapy” was at its best when practitioner Rosemary McCray describes in her article how she directed her daughter in reflexology/VRT techniques as she lay badly injured.

Thanks again from all the VRT tutors for your support. Please continue to send in letters and articles for publication

Kind regards



**for Booth VRT Ltd  
Tel 0117 9626746**

**[contact@boothvrt.com](mailto:contact@boothvrt.com) [www.boothvrt.com](http://www.boothvrt.com)**

**Index: Page 2:** VRT Practitioner Award

**Page 3:** VRT and serious back injury - Rosemary McCray. VRT in Practice - Annie Zakiewicz

**Page 4-5:** If the world were only 100 people

**Page 6-7** Back issues and reflexology - Lynne Booth and World reflexology week

**Page 8:** *MusicbyMood* - therapeutic music review

**Page 9:** Who holds the door handle?- Chris Roscoe

**Page 10-11:** VRT nail-working ideas- Lynne Booth

**Page 12:** VRT Course dates and membership details

## VRT Practitioner Awards!

VRT CPD Training classes began in 1998 and since then we have taught over 7,000 individual reflexologists internationally with classes held in over twenty countries.



Many VRT practitioners have attended a large number of classes we have organised which include VRT as well Nerve Reflexology, Lymphatic Stimulation, Cranio-sacral, ART and the "Roundabout" series of reflexology classes from Denmark.

We thought it would be interesting to see who had attended the most classes and the winner is Helen Kemp from Wales who has attend 28 classes comprising an astounding total of 51 days' training! Lynne, and all the VRT tutors, send Helen our warmest congratulation on this great achievement and she received a bouquet of flowers with our appreciation. We invited Helen to reflect on her career as a complementary therapist.

### REFLECTIONS ON REFLEXOLOGY Helen Kemp

During the dozen or so years I have been practicing I have had the opportunity to work in the voluntary sector with cancer patients and stroke patients and I use my skills wider with friends and family as well as running a private practice.

I have given treatments in a wonderful variety of settings, on boats, in hospital and care homes (with permission of course), within my own practice and in clients private homes. Rural home visits bring their own challenges – flooded or snow blocked roads and manoeuvring my treatment couch through scaffolding and escapee livestock to name but a few!

My treatments utilise a number of approaches; classical foot reflexology, VRT foot and hand, Nerve Reflexology and acupressure techniques combined with a foundation understanding of Acupuncture and the use of meridians. Treatment approaches vary according to clients and their needs over a period of time. Discussion with reference to

lifestyle, diet and relaxation also underpins treatments. I often suggest that people consider diet and seek professional advice in these areas along with related therapies such as cranial osteopathy.



Reflecting on the wider practice of healing two events come to mind; the first that of an acupuncturist meeting with a native Australian aboriginal healer who was discussing pressure points relating to heart conditions of which a number coincided with traditional acupuncture points; the second, a rustic sailing friend of mine, held his palm directly over mine without touching just for a moment or two (I was suffering from a persistent abdominal pain at the time). A few minutes later there was a warm feeling around the area and the pain receded. I looked across and he winked and continued his beer.

As a Reflexologist in private practice I work to clear professional guidelines but I try to retain an open and enquiring mind and a level of humility about healing in all its guises. It is my clients, many with serious long standing conditions, who provide so much humour and inspiration, in particular those in the midst of difficult treatments who rejoice when they feel relief from some of the side effects and ailments which accompany their conditions. For others, the human touch and a time to relax are an essential part of the treatment.

Attending courses, learning about and sometimes being baffled, by the human body are an integral part of my practice. Meeting up with like minded professionals and tutors with an amazing range of experience and understanding inspires my work. I hope never to cease learning and gaining new experience.

**Next edition: we introduce the runner up!**

## VRT and Reflexology's positive role in a serious back injury

Rosemary McCray

In December 2011, I fell over backwards while out for a walk and heard a noise in the lumbar region of my back that I describe as a "chalky crunch". I knew immediately that I should not move and, once hospitalised, the doctors diagnosed that I had a *crush fracture* of my L1 – first lumbar vertebra, to the right side of the lumbar body.

I was aware of being in shock rather than great pain, provided that I didn't try to move. Any movement resulted in a feeling of total weakness and inability to support myself, then pain quickly followed.

I decided to ask my daughter to try a specific form of reflexology developed by Lynne Booth (VRT) called Diaphragm Rocking and asked her to put both thumbs against the diaphragms of my feet and leaned in using her body weight, then pulled back with her other four fingers on the dorsum of each foot - *dorsal rocking*, in other words, but in a standing position with me lying flat.

After about 15 seconds, my whole body began to tingle and there was a dull throbbing at the site of the injury. After about two minutes of treatment, I can honestly say that I had no more pain from the injury site while I was in hospital. There was plenty of discomfort and difficulty in moving, but not the hideous pain of a broken bone.

I was in hospital for two nights for observation. An X-ray and CT scan were done that evening, and another scan just before I left. I wore a back brace for three months, and then returned to the fracture clinic for assessment. The bone had to be allowed to heal and, as I looked like a fairly fit person, he said I should regain all normal function. I lay on my back for three months, then returned to bed often for the next three months, then gradually got back to walking with my dog, cooking etc. It took a year before I could reliably lift my grand-daughter who was born six days before this event. It took two years to get

back to work. I am very grateful that it wasn't a totally disabling injury, and that my daughter treated me with reflexology to such good effect when the pain was at its worst.

## Results



I have been using VRT on a gentleman who has bone spurs on his cervical vertebrae which are putting pressure on his spinal cord, causing all sorts of pain and loss of sensation down his arms. He can't have massage and an osteopath wouldn't touch him. My friend sent him to me. He's had 3 treatments, 1 a week so far and every time he feels an improvement. He's got almost full feeling back in his arms, hands and fingers and is in much less pain. He said finding Reflexology has been a "Godsend"!

Clair Symcox

## VRT in Practice



**Annie Zakiewicz, MAR,** takes a good humoured view of her enthusiasm for VRT techniques and the results that she achieves.

I suppose you could call me a bit of a *VRT tart* really, because I "put myself around" with it! For instance, if I give a talk on reflexology; a talk on just classical reflexology could become a little bit boring as not many people get to experience a foot treatment. However, with VRT you can do a "hands on the table if you would like to experience it" type approach.

Usually somebody will have a good response and whoop about it. In my local health food shop recently, one of the assistants was complaining about a painful shoulder. She put her hands on the counter and I gave her a quick VRT hand treatment including an advanced

technique on the shoulder reflexes. Immediate relief was the result and my name now comes top of the list when people ask if they can recommend a reflexologist in the area. In a care home environment I never wonder if I can achieve a treatment, VRT always finds me a dignified approach for both me and my client.

Back in October, I had a new client who wanted help with severe psoriatic arthritis. Diagnosed at 15 yrs, now, he turned up for his appointment with his mother. She sat on the sofa throughout the treatment and kept a very low profile. The treatment was a resounding success, and he embarked on a 6 bi-weekly treatment plan, with his fiancé providing VRT support under my guidance.

His Mother then recommended me to an elderly neighbour, and she is now having regular mobile sessions. Two weeks ago Mother accompanied her husband who wanted treatment for various health issues. Once again she quietly sat and watched.

When I had finished her husband's treatment, I turned to her and asked if I could give her a little VRT hand treatment as a thank you for all the clients she had bought me. She shyly accepted, but thought she should remove the compression sleeve she was wearing. She said she had had breast cancer some years back and had to wear the sleeve most of the time because the arm was painful and swollen.

I was only doing a little thank you treatment so I didn't subject her to questions, but just gave a Basic VRT hand routine, nail-on -nail zone walking, and added Advanced VRT for the tender spot we pin-pointed in the shoulder/upper arm reflex area. I ended the routine with a gentle hand massage to include hand brushes and the VRT Harmoniser. My little treatment was 10 minutes maximum. She felt relaxed and a bit light-headed when she left, but the look on her face said that my small gesture was as if I had handed her a large and exquisite bouquet of flowers.

The next morning she rang me and asked to make an appointment for herself. She told me that after her mastectomy she

had had radiotherapy and that had resulted in a hard lump forming under her armpit. The consultant had told her that he attributed it to the radiotherapy; it would be with her for life. For the swollen arm, she was given the compression bandage and shown how to give herself a simple lymphatic drainage massage, which was fairly successful, but still left her with an uncomfortable arm.

After her VRT hand treatment, the hard lump disappeared and the swollen arm looked and felt normal and she felt so much better in herself. 2 weeks on, the hard lump has started to return and the swelling is coming back. She now wants a full treatment to see what can be achieved. When I get a new client I always start with VRT because most of the time we get an instant result of some sort, and the client just opens up to receive a full treatment.

Positive word of mouth is precious; you can't buy it. It is the most precious form of advertising you can have, because trust accompanies it. Achieving trust ensures the best possible outcome. It costs me nothing but compassion and time and brings more clients to my door than my website or any other form of advertising I do. For me VRT represents the best CPD I have invested in, for me, it is a true compliment to Classical Reflexology.

## **If The World Were Only 100 People, Here's What It Would Be Like**

**With acknowledgement to  
Christina Sterbenz and Mike Nudelman**

The seven billionth person on Earth was likely to have been born on October 31, 2011, according to United Nations data. With this milestone, how the planet can sustain such a large population has become an urgent question. But even beginning to envision a billion people can boggle the mind — let alone seven.

"100 People: A World Portrait" tries to simplify global issues like this. Using World Health Organization, Census, United Nations, and other data, the project shrank the world population statistics down to apply to just 100 people.



Inspired by a 2010 visualization of old data by designer Allysson Lucca, they produced their own graphic to show 100 people that would represent the world. In 1992, the Retired Peace Corps of Madison, Wisconsin, published the original statistics which inspired 100 People's project. Then, the world population was 5.48 billion.

Since then, the world portrait has changed. The graphic above shows the current population at seven billion. But compared to the original data in 1992, there are:

- **Two more Africans.**
- **One more Asian.**
- **Four fewer children.**
- **One more elderly.**
- **Four more Muslims.**
- **Two fewer Hindus.**
- **Three fewer "non-religious."**
- **Three more literate.**
- **Six more college educated.**
- **Twenty-one more who own or share a computer.**
- **Three fewer homeless.**
- **Five fewer undernourished.**
- **Six more overweight.**
- **The same number starving.**
- **Four more with access to safe drinking water.**

The world population has now reached 7 billion people. This milestone inspired us to conduct research to update our statistics, and the changes over the past 5 years are remarkable. In 2006, only 1 person out of 100 would have had a college education-- today that number has

jumped to 7 thanks in part to advances in higher education in Asia.

### **If the World were 100 PEOPLE:**

**50 would be female**  
**50 would be male**

**26 would be children**  
**There would be 74 adults,**  
**8 of whom would be 65 and older**

**There would be:**  
**60 Asians**  
**15 Africans**  
**14 people from the Americas**  
**11 Europeans**

**33 Christians**  
**22 Muslims**  
**14 Hindus**  
**7 Buddhists**  
**12 people who practice other religions**  
**12 people who would not be aligned with a religion**

**12 would speak Chinese**  
**5 would speak Spanish**  
**5 would speak English**  
**3 would speak Arabic**  
**3 would speak Hindi**  
**3 would speak Bengali**  
**3 would speak Portuguese**  
**2 would speak Russian**  
**2 would speak Japanese**  
**62 would speak other languages**

**83 would be able to read and write; 17 would not**

**7 would have a college degree**  
**22 would own or share a computer**

**77 people would have a place to shelter them**  
**from the wind and the rain, but 23 would not**

**1 would be dying of starvation**  
**15 would be undernourished**  
**21 would be overweight**

**87 would have access to safe drinking water**  
**13 people would have no clean, safe water to drink**



## Back Issues and Reflexology Support

by Lynne Booth

Thousands of working hours are lost each year due to *backache* or *back trouble*, but this vague generic description can cover a wide range conditions ranging from very acute to chronic illness. So what can reflexology offer to help ease this very common form of pain and tension? Working the hand or foot, musculo-skeletal, reflexes can often bring about feeling of relaxation and relief in any part of the back and many reflexologists also teach their clients to administer self-help techniques in between reflexology appointments.



A client and fellow tutor came to me for reflexology treatments when she developed a painful lower lumbar condition and was unable to lie down or walk for long without discomfort. I reminded her to apply the Vertical Reflexology Technique (VRT): Metatarsal Pressure, to apply to her weight-bearing foot so, whenever she felt acute pain, she applied some pressure to the lumbar foot reflexes and almost immediately experienced some relief. Whenever her back began hurt she would stop, stand her foot on a low wall, stool or stair and bend down to work the specific foot reflexes for a minute or so and within days she reported that this muscular tension had cleared up completely. This standing technique is only suitable for persons who are generally fit, supple, and able to lean forward, to apply pressure to the foot. The passive feet can also be worked to help ease back tensions (see self-help description below).

The wide-ranging scope of reflexology is illustrated by two results that describe the possible efficacy of reflexology for supporting spinal issues following very serious falls. In the cases described by Beatrice delatre in the Spring VRT 2014 Newsletter and Rose McCray on page 3, it was imperative that medical intervention

and continued medical support formed an essential focus for recovery and the role of reflexology was seen as an adjunct to support the body's recovery. The term "complementary therapy" is a helpful description as, in many cases; both doctors and therapists can play an important part in a patient's recovery. Minor cases of back strain, that may follow rigorous exercise or gardening, for example, can still greatly impinge on someone's working life and their general well-being and mobility. So reflexology techniques are a useful non-invasive option to possibly aid a quicker recovery.

### Water – essential for a healthy body and hydrated muscles

The human body consists of 75% water and all our organs and muscles respond better when properly hydrated. Thirst is not the brain's first sign of dehydration, but one



of the last, so always keep up your fluid intake. If water (the purest form fluid) is not available, substitute weak herbal teas, preferably dilute, fruit juice, but bear in mind that many drinks contain sugar stimulants. So the intake of these is best kept to a minimum. I work with professional athletes and many report feeling very stiff and achy in the morning when they first get out of bed and clients of all ages from many other walks of life report the same problem. I suggest that, if you have backache or any muscular ache on rising, you ensure that you immediately drink a glass of water as this can quickly help to rehydrate the muscles and after extra water intake, the muscle tension often begins to ease very quickly

### Self-help reflexology to support back conditions

I recommend commencing treatment for all muscular/skeletal injuries from a fixed starting point which comprises working the hip, pelvic and lower lumbar spine reflexes first to adjust and balance the entire body, prior to specifically targeting specific reflex points. This has proved very successful, and I use this premise for adjusting the entire body via the pelvis as a blue-print

for all my Reflexology/Vertical Reflex Therapy treatments. Most manual therapists recognize the maxim that *structure governs function*, hence the need to first make corrections to the lumbar spine area in the belief that once stability returns to the lower part of the body, then the glands, organs and muscular and skeletal system throughout the body are in a better position to respond.

## Method

### 1. Cradling the heel reflexes to balance the pelvis

The hip and pelvic reflexes are situated round the heel of the foot and, for a general foot workout, gently press and rotate your thumb and fingers in a soft pinching, rotating movement to stimulate and relax the whole area. Duration about 1 minute per foot. This gentle stimulating technique can easily be applied, one foot at a time, for self-help.



### 2. Working the neck reflexes

Working the neck reflexes involves stoking, pressing and rotating your fingers and thumb round the base of the big toes. The aim is to relax the body and release muscular tension. This is an important factor in relaxing the entire spine. The base of the thumb contains neck reflexes and can also be stimulated in the same manner for approximately 1 minute.



### 3. Working the spinal reflexes.

Press the fingers up and down the first metatarsal bone on the big toe (medial side) of the foot. Once you reach the arch of the foot you are working the lumbar spine and this may be particularly tender. The feet may feel sensitive but it should not be painful so reduce the pressure if it feels uncomfortable. The medial side of the hand, below the thumb, may also be stimulated in the same way, for approximately 1 minute, to ease the back. The lumbar reflexes, at the base of the hand or foot are often the most sensitive.



Reprinted with due acknowledgement to  
Positive Health Journal  
<http://www.positivehealth.com>  
July 1014 Issue 216  
Lynne Booth is the Positive Health Expert  
Reflexology Advisor

### World Reflexology

**Week 2014**, runs from  
22 - 28th September 2014,  
is a great opportunity to  
show potential clients and  
employers the many  
benefits that our wonderful  
complementary therapy has  
to offer.



The Association of Reflexologists (AoR) and the Federation of Holistic Therapists (FHT) have many suggestions and supportive literature and ideas to help you publicise your practice as well as informing the general public.

- Contact your regular clients and local businesses, offering a discount of your choice on all reflexology treatments booked, or being carried out, during World Reflexology Week. (FHT)
- Contact your local newspaper or radio station, or send them a press release, telling them what you are doing for World Reflexology. (FHT)  
<http://www.fht.org.uk/>
- The AoR are advertising several Members' ideas which include taster sessions at coffee mornings and health fares which may include a donation to a charity as well as publicising the benefits of VRT. <http://www.aor.org.uk/>

**Great new relaxation music for therapists by Jack Vaughan that bears no resemblance to “muszak”. How refreshing!**



**Lynne Booth writes:**

At last, quality relaxation music, with a difference, for all tastes. I have sometimes enjoyed beautiful music in therapy rooms but also heard some pretty average piped “musak” that tends to grate on the senses rather than bringing about a sense of peace and calm. In view of my past experiences, I was very agreeably surprised to listen to several beautifully produced tracks from the company, MusicByMood. The pieces been sensitively composed and appeal to a range of situations such as background music when working from home to different tempos for various types of therapy or situations. I found the website, [www.musicbymood.com](http://www.musicbymood.com), helpful as it offers an opportunity to listen to sections of the tracks to help you make a choice. All in all, an excellent discovery and I look forward to hearing more of the music the plan to release soon.



MusicByMood specialise in providing high-end audio for therapeutic professionals and users. The products they offer range from relaxation and meditation tracks, to quality spa-music, music for studying, sleep music, music for babies, and many other situations. All the downloads have been carefully crafted and approved by professional audio engineers, therapists, classically trained composers

and meditators. They are very confident that the purchasers will enjoy the relaxation downloads relaxation and offer a money-back guarantee if not satisfied.



The founder of MusicByMood is Jack Vaughan who explains, "The desire to build our company came out of a lack of sensitive, high-quality music to assist and empower moods, spaces and activities, not for music's sake, or even for art's sake – but for the sake of real human lives and experiences. Very often, the professions or activities that use music for a purpose (as opposed to entertainment) can suffer from the quality of the music itself, and from it's background effects not being thought through. With some extensive experience as a film & theatre composer, and my ongoing training as a therapist, mine and my colleagues interests lie in providing sensitive, high quality experiences that supplement and support the therapeutic environment.

Listen to samples of the music on the website listed below or contact jack Vaughan direct for more information.

**Jack Vaughan**  
**+44 7817 165 141**  
[MusicByMood.com](http://MusicByMood.com)

~~~~~

We are each other's harvest; we are each other's business; we are each other's magnitude and bond."

*Gwendolyn Brooks, poet*

**Lynne writes:**

*Have you ever had problems keeping*



*your reflexology appointments to time due to talkative clients who will not leave quickly and seem oblivious that another person is waiting or that you may have other things to do? I'm sure it sounds a familiar scenario and I must admit my patience ran thin recently when a client rejected several dates I suggested for her next appointment and then proceeded to tell me why and where she would be! VRT tutor, Christine Roscoe who sadly died recently, was a respected, experienced reflexologist and VRT tutor. In honour of her interesting articles over the years I am re-printing this very apt account from 2006 where she shared some helpful insights into overcoming this common problem.*

## **Bringing Sessions to an End or Who Owns The Door Handle?**

***By Christine Roscoe, former VRT Tutor***

Yes, this is an odd question, but it does have important implications for bringing a session to an end and I'll get back to the door handle later!



Many therapists have difficulty bringing a session to an end, because they don't want to upset the client or make them feel rushed at the end of a relaxing session. It's important for your own sanity that you don't let sessions just run and run out of your control and important to keep to a good time schedule to benefit all clients. So what strategies could we use for ending sessions?

- ◆ Keep a close eye on time throughout the session. Make sure you finish about 7 – 10 minutes before the hour is up. This gives you time to wash hands, discuss feedback from treatment, client to put shoes on, pay, make another appointment, put coat on etc and for you to have a few deep breaths before the next client.
- ◆ If they seem reluctant to get up from the couch, remove the towel and blanket while asking for and giving feedback to the treatment. If client is still on the couch, just indicate the

chair and say politely 'would you like to get your shoes on while we talk?'

- ◆ If you have another client/patient waiting, the process is relatively simple, because you can bring the session to an end by indicating that someone is waiting. Or you can say that you have another client arriving shortly even if you haven't!
- ◆ Unfortunately it's not always that easy. One of the most effective ways of ending a session is to withdraw some of the good listening skills which indicate you are paying attention. So reduce the amount you look at a client, and reduce the amounts of auditory and visual cues that you give e.g. head nodding, making agreeing noises etc. If you do this suddenly, it can seem rude, but if you gradually reduce all of these over a 3-4 minute period, clients will often bring what they were saying to an end without being aware that you have been influencing them.
- ◆ Other things that you could do ..... Tidy up the couch, replacing couch roll, smoothing covers etc.
- ◆ Pick up your diary and cash box/wallet or whatever and you say clearly . 'That will be £xx please, Sue' or "Would you like to settle up now"? "Would you like to make another appointment?" etc
- ◆ Pick up your record sheets and pen and 'tidy' them – this is what TV newsreaders often do at the end of a broadcast.
- ◆ Assuming that you've hung their coat up, go and fetch it, hold it open and help them on with it.
- ◆ Now back to that door handle! A really important rule of thumb is that you must get to the door first and put your hand on the door handle!! If you have your hand on the door handle, it makes it easier for you to guide the client gently out, but if the client is holding the door handle it is much more difficult to get them out of your room.
- ◆ If they're still talking, say something like 'that sounds interesting / sad /

useful, perhaps you could fill me in next time'. Sometimes you just *have* to interrupt someone. Although this can feel uncomfortable and rude, some clients can *talk for England* and you need to be the person in charge of the session!

- ◆ Ask if they feel OK to drive home, wish them a good night's sleep / relief from back pain or whatever. Ask them to monitor any changes and let you know next time.
- ◆ If someone is unloading some problems at the end of the session, it's a good idea to have details of other practitioners to hand so that you can refer them on to someone who could help them more e.g. counsellor, hypnotherapist.

Of course, sometimes sessions do over-run, as people will tell you valuable information, or be very emotional, just as they are leaving and you can accommodate this need if you wish or are able to. But, it's important to realise that some clients can be quite self obsessed and enjoy talking about themselves in a way that is not always healthy for them, nor healthy for us. Remember that we are not counsellors. Their problems can be a burden for us and upset the time schedule of our day. So we need to be able to manage the situation for the good of the next client and also practice good time / emotional management skills for our own sakes too.

~~~~~

VRT is now on TWITTER and FACEBOOK as well as Linked-In. Please look at our postings and "like us" or re-tweet! Thanks. Read my regular Blogs on [www.boothvrt.com/blog/](http://www.boothvrt.com/blog/).

**Click on these icons:**



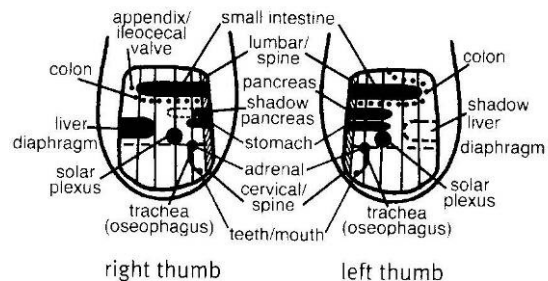
## Ideas for extending the benefits of VRT Nail-working

**By Lynne Booth**



**Lynne using VRT nail-working on Bristol City Football captain, Wade Elliott, before a match.**

VRT nail-working is a simple technique which can have very profound effects. Only certain reflexes, that reflect a specific imbalance in the body, are usually selected, making it a quick and effective method that is used sparingly as part of a complete VRT treatment or standard reflexology session, or a combination of the two. On the VRT Hand, Endocrine and Mobility classes we develop and enhance the range of VRT nail techniques such as the VRT Harmonising technique and stimulation of the central pituitary reflex.



**Example of the specific VRT nail-reflexes where the body is mirrored in the 5 Ingham Zones on the pad of the big toe or thumb. With VRT each system is mirrored in the nails. See my book, *Vertical Reflexology for Hands and Feet* for full details.**

On the second treatment the therapist can then start to introduce more precise nail-working if desired, but many therapists obtain excellent results by only ever working the centre of the nail.

The technique is appropriate for all ages and conditions and there is no difference between VRT techniques and classical reflexology in terms of contraindications to treatment, though nail-working should be avoided if the nails are damaged or infected.

The technique can be used on everyone from older people to children, and is especially useful for sportspersons of all ages who can learn to apply simple self-help techniques to help accelerate recovery. It can also be used as a 'first aid' tool to help relieve stress, or to possibly help with pain relief in between reflexology sessions.



**On the reclining feet: after stimulating the neck reflexes, simultaneously hold the upper cervical reflexes and central nail for 30 seconds to enhance the response.**



**Teach your clients the self help VRT calming nail-on-nail techniques.**



**Always greet the feet with a 30 second nail-on-nail calming technique.**

To enhance the stimulation of reflexes, press with finger pad or knuckle on a priority reflex and then press the centre of the nearest toe or thumb nail. Or press nail-on-nail on the central pituitary for 30 seconds.



**Shoulder reflex is enhanced with nail stimulation. If working on older feet, press gently as the skin is thinner.**



**Shoulder reflex enhanced with nail stimulation with the addition of simultaneously working the corresponding Zonal Trigger.**



**Neck reflex enhanced with nail stimulation.**

Nail-working, in my view, is one of the most powerful VRT tools for the hands and feet. I have achieved some of my best results by applying these techniques in various permutations whether reclining or standing. Do send in your comments or results regarding your VRT Nail-working experiences.

**VRT Classes for Autumn 2014**

To book VRT classes and check on latest announcements of new venues please see website or call us for details.

Full contact details are on the website or venue sheets can be emailed or posted.

**[www.boothvrt.com/course-dates-booking/](http://www.boothvrt.com/course-dates-booking/)**

#### **VRT Basic Course**

Sat, 4 Oct 14 Breda, Holland -  
Suzy Jacops  
Sat, 4 Oct 14 Barcelona, Spain -  
Alik Vythoulka  
Sat, 1 Nov 14 Glasgow, Scotland -  
Anne Brunton  
Fri, 14 Nov 14 Wirral, Cheshire -  
Allison Walker  
Sat, 6 Dec 14 Hasslett, Belgium -  
Suzy Jacops

#### **VRT Advanced Course**

Sun, 5 Oct 14 Breda, Holland -  
Suzy Jacops  
Sun, 5 Oct 14 Barcelona, Spain -  
Alik Vythoulka  
Sat, 15 Nov 14 Wirral, Cheshire -  
Allison Walker  
Sun, 7 Dec 14 Hasslett, Belgium -  
Suzy Jacops

#### **2 Day Nerve Reflexology Refresher/Upgrade Migraines and Headaches**

Sat, 18 Oct 14 Bristol Nico Pauly  
and Griet Rondel **FULL**



**VRT Class in Paris with VRT Tutor  
Lilian Gautheron.**

### **Membership Renewal Notice**

**The membership fee is still not increased and there is one category of £25 per annum for UK and international and £20 by Standing Order**

**OR**

**UK or sterling accounts pay only £20 per annum by Standing Order**

**Annual Membership Renewal £25 per annum**

#### **YOU CAN PAY ON-LINE**

For those members whose annual subscriptions were renewable on 1<sup>st</sup> July 2014 your email will request you to renew online or send a cheque.

**[www.boothvrt.com/vrt-membership](http://www.boothvrt.com/vrt-membership)**

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

**Why not re-take a previous VRT class as a Refresher for only £65 per day? For current courses see online:  
[www.boothvrt.com/course-dates-booking/](http://www.boothvrt.com/course-dates-booking/)**

**Contact us on:**

**[contact@boothvrt.com](mailto:contact@boothvrt.com)  
or phone 01179 626746 for more details.**



**Important  
Conference date  
for your diary  
17-20 September  
2015**

**The International Council of  
Reflexologists (ICR) announce their  
next conference will be held in the  
UK, in Sheffield, North Yorkshire.**

**[www.icr-reflexology.org](http://www.icr-reflexology.org)**

**The list of international speakers is  
yet to be announced but Lynne**