

Vertical Reflex Therapy Membership Network News

Dear VRT Member,

I trust you are enjoying the summer and get time for a well earned holiday. Therapists hopefully look after themselves in the same caring way they look after their clients. Or do they? We are often caught up in so many events and demands each day that it is often difficult to make time for their own needs. It is always worth remembering to: "Be kind to your body. It's the only place you live."

When I attended a conference in Australia I was struck by a very memorable presentation from an Asian lady who was a University lecturer and a motivational speaker. She praised us all for being great reflexologists and was sure we were all very busy doing superb work on our clients. She said that many at the conference had told her of the long hours they worked and the number of clients they treated and that they often held other jobs at the same time. But she wanted to ask us "Where is time for you in your busy schedule? When do you make yourself a priority?" And then she added a very telling talepiece by stating, "If you don't make time for vourself, you don't value yourself enough and may get burnt out. And I don't want to be treated by anyone like that.... I want to pay my money to a therapist who practises what they preach!" It gave us all much food for thought.

In this issue we cover the RAA Conference in Nashville and we look at more results from VRT. If you missed the first course by Nico Pauly, or just wish to learn the basics of nerve reflexology in three days, with a focus on the lumbar spine, then you have a special opportunity to do so this November 4th, 5th and 6th in Bristol. There are only a few places left.

Hedwige Dirkx's Lymphatic Stimulation Bristol course for Sat 20th November is full and we are

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delighted to announce she is going to teach the same course again on Sunday 21st November. The cost is £80 for VRT members and the 2nd day is also open to non-members at £85.

We look at the unsavoury (but pertinent!) subject of fungal nails and Rob Wood's excellent article on Reflexology and Anxiety research is published.

Dr Martine Faure-Alderson is a homeopath, osteopath and reflexologist and is running a 3-weekend Cranio-Sacral Reflexology course in London in 2005. This is her only UK course next year as she is in great demand internationally to teach. I know Martine's work is immensely impressive both in results and in the way she teaches and VRT Members have an opportunity to read more about the course in this newsletter and on the enclosed application form.

We also want to know what you, as members, want to see in the newsletter. So please let us know and contribute as well by sending in letters, articles or comments. We are also happy to publish interesting and unusual relevant articles that you may have seen possibly in overseas publications. We would only publish with acknowledgement once we have permission from the editor.

If your Membership is due for renewal - now only £20 per year - you will receive a renewal form along with your newsletter. Please complete and return at once to ensure continuity and to keep your practitioner details on our website.

Kind regards Contact Details:

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REFLEXOLOGY ASSOCIATION OF AMERICA (RAA) CONFERENCE

Nashville, Tennessee May 7-9 2004

I was honoured to be asked to present a paper on VRT at the Nashville Conference in May. It was a very interesting and well organised event at the Sheraton Hotel in downtown Nashville, directly opposite the State Capitol Building. Other European speakers were Dorthe Krogsgaard and Peter Lund Frandsen from Denmark whose work I much admire from previous European conferences where we have met. Peter started the conference off with a fascinating visual and musical presentation on energy and how it relates to forms of therapeutic healing. He is a renowned reflexologist who has a medical background so was able to combine many dimensions into his talk. Dorthe has been a reflexologist in Denmark for over 20 years and runs a busy practice in Copenhagen where she has great results with orthopaedic problems among others. Some of her work combines Nico Pauly's nerve reflexology techniques with those of other pioneering reflexologists. Peter, Dorthe and myself were also booked to run workshops after the conference and it was exciting to share our techniques with such enthusiastic and well trained reflexologists.

The speakers from within the States were impressive and we learnt about Feng Shui practise from Christine Issel. It was a useful forum to swap techniques and share experiences in the breaks and network among many reflexologists who came from many backgrounds and States.

VRT nail-working came into its own when a member of the RAA committee experienced a debilitating migraine that rendered her virtually comatose and she lay in a darkened room in great pain. I was not able to give her standing VRT but used gentle weight-bearing techniques on the nails and hands for 20 minutes. Within an hour she was able to resume her attendance at the conference. This was an exceptional results as she had been violently sick and unable to move with a "cluster" headache on the top of the skull. her usual time-scale for recovery from these headaches was several days with strong medication. On this page I will describe the treatment I administered.

As well as the sharing of reflexology information and research I am always keen on foreign trips to sample life abroad beyond reflexology! I am now an "expert" on the life of Elvis Presley since my fascinating visit to Graceland and Sun Studio in Memphis. In glorious sunny weather, with few tourists, I explored Presley's house which was suprisingly small and homely if somewhat garish. The 1970's were not the best era for taste in home décor let alone when money was no object in the pursuit of kitsch furnishings! It was interesting to wander alone round the private jet complete with bedroom, dining area and two bathrooms. The National Civil Rights Museum was a moving experience. It is a state of the art museum built behind the façade of the Lorraine Motel where Dr Martin Luther King was assassinated in 1968. Another part of the museum is situated across the road in the former sleazy boarding house where James Earl Ray gunned Dr King down from a bathroom window. The dirty rooms have been preserved.

A reflexology trip to the States would not be complete without a meeting with Dwight Byers of the International Institute of Reflexology. True to form Dwight was his enthusiastic and hospitable self and took my colleague Evelyne Huegi and me to the Grande 'Ole Oprey live Saturday night radio show. After two and a half hours of the best in country music we left with the songs still ringing in our ears for most of the next day!

EMERGENCY VRT TREATMENT FOR A SEVERE MIGRAINE

This is the course of action I took when asked to treat a person who was totally incapacitated by migraine. As she was unable to move and lying in a darkened room with an eye mask and a bag of ice on their head, I could not use VRT in any true weight-bearing sense. So I applied the following method:

- I held both central thumb nails, nail-on-nail, for at least a minute to try to allow the body to calm down and to initiate a healing response. She reported a sense of calm.
- I then gently worked each finger up and down the sides simultaneously in a pinching motion. I paid special attention to the head and neck reflexes and connected some neck reflexes on the dorsum of the hand to the corresponding nail-reflexes.

- At this stage the person reported that the cluster pain had rapidly diminished. So I performed Diaphragm Rocking for two minutes per hand.
- I worked the passive hands on the bowels and stomach to help the nausea and general debility.
- I kept returning to the central pituitary nailon-nail and Harmonised roughly every 5 minutes.
- Her hands and feet were worked synergistically for the stomach and adrenals.
- I used Zonal Triggers for the neck and lumbar spine as on occasion you can work two Zonal triggers if they are in the same system.
- The only weight-bearing work I did was to gently press the nails as her hand rested on my hand.
- I left my fellow reflexologist lying in the darkened room and said I would return later in the afternoon if she still felt ill. I was most surprised and delighted to see her only one hour later in the conference hall. She felt fully recovered and had just eaten a light lunch!
- We both agreed this was an exceptionally good result as she normally took days to recover. She had been worried that she would not be well enough to fly home a couple of days later.
- My conclusion is that we must never limit the body's innate healing response to natural therapy. Although I could not apply full weight-bearing techniques I was able to apply gentle pressure to the hands in a pinching/pressing mode which enhanced the passive VRT techniques. Nowadays I always use the nail-on-nail pituitary hold as a balancer and trigger before undertaking any reflexology treatment.

Lynne Booth May 2004

Fungal Nail Infections (Discoloured Nails)

<u>Cause</u>: Toenails or fingernails can become infected by the same fungi that causes athletes foot. This will discolour the nail to a dirty yellow/brown colour. It can cause the nail to thicken, making it unsightly and causing discomfort.

Fungal nail infections are quite common, as almost one third of people with athletes foot will go on to develop a fungal nail infection. This can be a painless condition, but it is contagious. It can spread to other people or spread to other parts of your body. It can cause athletes foot or spread to the groin area, causing jock itch.

<u>What to do</u>: The fungus will not go away without treatment, because it is easily spread to other people and parts of the body. Your family doctor or a dermatologist will prescribe effective oral treatments. If you have tried treatments for a nail infection in the past with little success, you may find it is now worth going back to your doctor for further advice. Your doctor may wish to take clippings of your nail before treating you to make sure the problem is caused by a fungus as it can often be confused with psoriasis.

How to Recognise a Fungal Nail Infection

1. <u>Discolouration</u> - Your nail loses its healthy pink colour. It becomes a yellow or grey-ish yellow colour.

2. <u>Thickness</u> - Your nail becomes thicker and less transparent. They can become oddly shaped and sometimes the end can be pulled from the skin.

3. <u>Crumbly nails</u> - The end of your nail cracks and breaks easily. Small pieces of nail can also crumble away.

4. <u>Sore, tender nails</u> - Your nail can become sensitive to pressure and tender to touch.

5. <u>Lack of growth</u> - Infected nails grow more slowly than normal nails. Toenails grow at a rate of approximately 1cm every six months. If your nails don't seem to be growing at all, you could have a fungal nail infection.

Reflexology in the treatment of anxiety

Rob Wood is a VRT member and writes about his continuing VRT research:

Reflexology is well known for its relaxing effect on clients. It is common for someone to leave a session feeling distinctly more relaxed than when they came in. While this is always a welcome consequence of a treatment, it is not necessarily a treatment aim in itself.

Having come to reflexology from over 30 years experience working in mental health, I am particularly interested in its application within this field. Towards the end of last year I put forward a proposal to the manager of a local mental health unit. This was to make reflexology available to clients with a diagnosis of severe and/or chronic anxiety. In preparing my case, I researched what was already known on the use of reflexology in the management of anxiety. I found no specific information on its value in the treatment of anxiety, but there were a few references to it in relation to other medical conditions.

Partly because of the open mind to complementary therapies by the manager of the unit, and partly because of my own past experience in mental health, my proposal was accepted. It was agreed that reflexology would be offered as an alternative treatment for clients attending the unit with a predominant diagnosis of anxiety. Prior to starting, I met with a psychologist based there, who helped set up a system of evaluating the effectiveness of the project, through the use of questionnaires. The project has been funded initially for 30 weeks, and is running from March till December this year. Clients are offered up to 6 sessions, and their response to treatment is measured prior to starting and 3 months after completion using the Becks Anxiety Inventory (BAI) - a standard psychological measuring tool. They are also asked to comment on their anxiety level before and after each treatment to measure their immediate response.

In order to be consistent in how I treat each client, I try where possible to keep the treatment format the same. My main aim for the initial treatment is to give the client a relaxing experience that will encourage them to come back for more. Therefore I don't introduce VRT until the second session, as the potential fairly potent effects of VRT may be too much too soon, especially for someone who already has high anxiety levels. The treatment sequence I then use is an initial VRT treatment, giving an endocrine flush, paying particular attention to the adrenal glands. This is followed with a conventional treatment with emphasis on diaphragm rocking and the harmonising/consolidating techniques. I also do extra work on boosting and strengthening the immune system, which has often become weak from the effects of chronic stress.

The results so far have been very encouraging, and the clients have welcomed having reflexology made available to them. I am quite excited with having the opportunity to 'break new ground' by bringing reflexology into the field of mental health within the NHS.

My intention is to complete this project and then seek to publish the evaluation some time next year once all the follow up questionnaires are returned. I will offer these results to the VRT membership newsletter. In the meantime if anyone is interested in knowing more about this project, you are welcome to contact me direct.

Rob Wood - MIFR. Tel: 0117 9424566 e-mail: robwood19@aol.com

VRT Newsletter

Letters from Practitioners

Dear Chris Roscoe

Just to say I have used VRT on a client 2 weeks ago with great success.

The client was experiencing severe swelling and intense discomfort to the top of her left foot (breast area) and ankle. After medical checks revealed no injury or any thing to worry about I was asked to holistically treat the foot in which ever way I felt may help.

I used Reiki which took the heat out and relieved the pain and also drew my attention to the left breast area, where I also found a distortion in the energy field on the clients body, but after four days the foot was still swollen severely. I then tried all the usual reflexology tricks and could barely tell I had treated the foot, only a slight reduction in swelling and the pain still persisted. I left it a week to give it chance to do some healing but still we had a severely swollen, painful foot.

I offered VRT and carried out a fifteen minute session with rocking and Zonal reflex points. The client said it 'hurt like hell' and wasn't my usual approach! However, the following day hardly any pain remained and the swelling was completely gone in 2 days. I saw the client again today and the foot looks great and is causing no problems.

ΚM

Dear Lynne

I would like to share with you the VRT treatment that I gave to my sister on Monday 11 May 2004.

A brief outline of her history, she had her gall bladder removed about 1 year ago, she had complications, which led to a further 2 operations, where they had to readjust her colon, she took a further 3-4 months to recover from the operation. She has also suffered with back pain since childhood, and has had an operation on her back 2 years previously.

I treated my sister for sciatica which she has been suffering from for the past 2 months, I simply did a 5 minute VRT session, where I used synergistic reflexology on her spine and hip also zonal on her spine, she had a strong reaction at the time where her face perspired.

The same evening she had terrible indigestion and throughout the next day, she was also sick with bile which relieved the pressure, on Wednesday 12, she felt a little better although her diaphragm felt sore.

The benefit of this treatment has been that her sciatica has completely gone, which she is very happy about, however, I am concerned about the severe reaction, I have spoken to Chris, who thinks it was a strong reaction and hopefully she won't suffer with indigestion further. Your observations and comments would be very much appreciated. Best Regards Ms M E MIFR

Lynne write: I agree with Chris that it was a probably a one-off reaction as the body eliminated waste.

Dear Lynne,

I am working part time as a reflexologist and chiropractic assistant in a multidisciplinary clinic in Chicago. VRT has become the opening and closing technique I use for all my bodywork now, as it seems to complement and advance all modalities. The chiropractic physicians in our clinic believe in a weight-bearing approach to stabilise adjustments and treatment. They have begun recommending the VRT technique and sending the patients to me for 15 minute manual therapy with specific requests that I incorporate VRT. Patients find it fascinating that I am able to pinpoint tenderness on the feet in the corresponding reflex and Zonal Trigger for their area of complaint and VRT encourages them to become participants in their own healing. I find that I can spend a shorter amount of time giving manual therapy directly on the physical area as the body is more receptive after VRT. We are definitely seeing quicker progress in their recovery from pain. Thank you for discovering and teaching this versatile, effective tool. I am looking forward to taking your course on the hands as soon as the opportunity presents itself. Warmest Regards, Gaia Tossing, Chicago

Basics in Belfast!

My colleague, Britta Stuart, has taught many VRT course in Northern Ireland and Eire and it is always a pleasure for me to go over and teach there as well. In May 2004 Britta taught a great group of reflexologists at Belvoir Park Hospital, Belfast. The photo shows them posing with their Certificates of Attendance. Britta is a woman of many parts as she also teaches baby massage as well as running a busy reflexology practice and also collates reflexology research in liaison with RiEN (Reflexology in Europe Network) and the RAC (Reflexology Association of Canada).

The Belfast VRT Group



VRT and High Blood Pressure – Have you noticed a difference?

A VRT practitioner recently reported to me at the AoR conference that she was very interested in the possibility that VRT could actually be immediately instrumental in lowering Blood Pressure (BP). She reported that she took the BP of a particular client before their reflexology session and then again at the end while they were still reclining. Their BP remained the same. However, she then gave VRT for a few minutes to conclude the treatment and took the blood pressure for a third time and it was considerably lower. I occasionally take a client's blood pressure if they suffer from hypertension and have observed a drop in the reading after VRT. If others have experienced this result please let me know. Obviously one does not want to take a client's blood pressure too often and it is not appropriate to do so anyway for most consultations. However, if you have a blood pressure meter, it would be interesting to get feedback from those of you who have clients willing to co-operate!

Growing Old Disgracefully

In May my VRT courses were held on the outskirts of Nashville. One lunchtime we went to a county restaurant where a group of ladies were eating their meal dressed in red hats and shoes and purple dresses. I asked them if they were anything to do with the poem printed below. They said they were one of many groups of older ladies in the USA who follow the poem's philosophy. Once a month they have wonderful outings doing outrageous things as they grow old disgracefully!!



Warning

When I am an old woman, I shall wear purple With a red hat which doesn't go, and doesn't suit me. And I shall spend my pension on brandy and summer gloves And satin sandals, and say we've no money for butter. I shall sit down on the pavement when I'm tired And gobble up samples in shops and press alarm bells And run my stick along the public railings And make up for the sobriety of my youth. I shall go out in my slippers in the rain And pick the flowers in other peoples' gardens And learn to spit

But now we must have clothes that keep us dry And pay our rent and not swear in the street And set a good example for the children. We must have friends to dinner and read the papers.

But maybe I ought to practise a little now? So people who know me are not too shocked and surprised When suddenly I am old, and start to wear purple.

Jenny Joseph (1932-)

This poem, written in 1961, has inspired many elderly ladies to "grow old disgracefully". In 1996 it was voted the *Nation's favourite poem* in a BBC poll. Jenny Joseph lives in Minchinhampton, Gloucester. Copyright prevents the full poem being printed here.

<u>Reflexology treatment relieves</u> <u>symptoms of multiple sclerosis: a</u> <u>randomized controlled study</u>

Authors: Siev-Ner, D. Gamus, L. Lerner-Geva, and A. Achiron (published in *Multiple Sclerosis:* Aug 2003: Volume 9; p.356-361)

Type of study/article: Single study carried out at the MS Centre, Sheba Medical Centre, Tel Hashomer, Israel.

Aims of the study: To evaluate the effect of reflexology on symptoms of multiple sclerosis (MS), including paresthesias [pricking/tingling sensation of the skin], spasticity, urinary symptoms and muscle strength.

Subjects/method: 71 subjects with a definite diagnosis of MS (suffering from paresthesias and/or spasticity) were recruited and assigned to either a control or study group. Patients were excluded if they had an acute relapse 3 months before or during the study period, or if they had a recent onset or discontinuation of physiotherapy or any other manual therapies (e.g. massage). Each subject received a 45 minute treatment, once a week, for 11 consecutive weeks. Those in the study group received a reflexology treatment and massage of the calf area, whilst those in the control group received a sham treatment of non-specific massage to the calf muscle. Thirty-six reflexologists participated in the trial. Each therapist treated one study and one control patient. Two senior reflexologists supervised the treatments.

Results: Of the 71 patients recruited, 53 completed the study (27 of the study group, 26 of the control group). Comparisons between the control and study group revealed that subjects who received reflexology showed marked improvements in terms of paresthesias, spasticity and urinary symptoms, but not in muscle strength. No significant improvements were noted in the control group.

Lymphatic Stimulation via the Feet with Hedwige Dirkx

Our members seminar on 20th Nov is now full. We have booked Hedwige to teach the same course the next day. Price £80 for VRT members £85 for non-members. Book now to secure a place (form enclosed)

Visiting from Belgium, reflexologist Hedwige Dirkx will present her acclaimed lymphatic stimulation technique at a workshop for reflexologists, aromatherapists, massage therapists and other qualified health practitioners

Sunday 21st November 2004 Central Bristol

Cranio-Sacral Reflexology with Dr. Martine Faure-Alderson

Dr. Martine Faure-Alderson is a renowned reflexologist and osteopath who is also a doctor of homeopathy and general medicine. Martine will teach her unique and powerful techniques on a six day course, spread over three weekends

12th & 13th February 2005, 7th & 8th May 2005, & 24th & 25th September 2005 Central London Book now! (form enclosed)

JULY VRT MEMBERSHIP RENEWALS PLEASE COMPLETE ENCLOSED YELLOW FORM ONLY £20 PER YEAR (UK) – SAVE £5.00!

- For those whose membership is due for renewal at this time, we would encourage you do so immediately to ensure you details remain on the website and you receive the next newsletter. Please note that due to higher postage costs, the £25 fee remains the same for overseas.
- New VRT techniques are shared here first
- Learn from other VRT Practitioner's case histories and experiences
- 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 VRT courses taken for a second time
- Priority booking for new dates for all VRT courses on the enclosed venue sheet
- Priority booking for new dates for Dr Martine Faure-Alderson's Cranio-Sacral Courses
- Priority booking for new date for Hedwige's Dirkx's Lymphatic Stimulation Course
- Opportunity to take one of the last places on Nico Pauly's Nerve Reflexology Course in Nov.

INFORMATION REQUIRED!

DO YOU TREAT SPORTS INJURIES WITH VRT? DO YOU WORK WITH SPORTS TEAMS? IF SO, WHICH SPORT? DO YOU SPECIALISE IN PARTICULAR CONDITIONS OR INJURIES? DO YOU HAVE INFORMATION OR SUCCESSES TO SHARE ? DO YOU TREAT CLIENTS AT A GYM OR HEALTH CENTRE?





If the answer is "Yes" to any of the above please email or write in as soon as possible with brief details as I am compiling information regarding VRT and Sports Injuries. These type of injuries often respond extremely quickly to VRT and there is great scope in this field for reflexologists to offer their skills. Lynne Booth

PLEASE SEND IN ONE BRIEF VRT CASE HISTORY OR ANECDOTE!

Many VRT Practitioners, at courses and conferences, tell me of specific wonderful results they are achieving with VRT. Please take a few minutes to record just one of your successes so we can all share and learn from each other. None of us will ever have access to all conditions but between us we build up impressive data of how we have treated our clients and obtained results. Please complete and return the form overleaf