

Healing Arts Report

Examining Alternatives in Health and Healing

Volume 1, No. 6

Dear Reader:

People often describe being carried back to another time or place when they smell a particularly memorable odor. I have one of those outstanding fragrance memories myself. It's an odor that I don't smell very often, but when I do, it is so intensely and strangely comforting that it makes me laugh. It's the combined smell of turpentine and french fries -- the odor of Saturday morning oil painting classes from childhood and the delight of satisfying my hunger during the breaks with french fries from the local greasy spoon.

According to Diane Ackerman in *A Natural History of the Senses*, the physiological links between smell and memory are strong in contrast to the weak links between smell and the language centers of the brain. She points out that when we discuss vision we have a vocabulary to describe attributes such as sharpness, line, tone, pattern, texture, and color. When it comes to smell, however, we seem to be at a loss for language. With smell, we describe odors in terms of other things, such as fish or flowers, or we describe it in the way it makes us feel -- nostalgic, revolted, hungry. Our very inability to verbalize odors seems to add to their mystery.

In these days of prepared foods and grocery stores we have little need for our sense of smell. Yet almost all manufactured products are scented.

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The public demands scent. Even products which claim to be odorless are scented to seem that way. Though the need for a sense of smell for survival has mostly been replaced by sound and visual cues, Ackerman sums it up when she says, "We may not need smell to survive, but without it we feel lost and disconnected."¹

SCIENCE REPORT

Aromatherapy: From Folklore to Research

In the first medical students' textbook on complementary medicine, *Fundamentals of Complementary and Alternative Medicine*, aromatherapy is defined by the author of that chapter, Caroline J. Stevensen, as combatting a disease or abnormal condition "using a range of organic compounds of which the odor or fragrance play an important part."²

The therapeutic potential of smell is not taken very seriously in our culture, possibly because of its link to the cosmetics and food industries. Yet it was a part of ancient cultures. Oil-distilling equipment that is 5,000 years old has been found among artifacts from the Indus Valley cultures. Recipes for fragrances have also been found in ancient Egypt and Greece, and Rome was known to use oil essences for healing. In spite of this history, it wasn't until recently that scientific studies have been attempted, mostly by nurses practicing in the United Kingdom and France.

Stevensen, a lecturer at the Royal London Homeopathic Hospital, points out that too many books on this subject are written to appeal to popular commercialism. They provide recipes but add nothing in the way of research-based information.

She highly recommends a book by two

(continued on page 2)

Frenchmen, Franchomme and Penoel, which gives detailed chemical analyses of the oils, conditions responsive to the oils, and indications and contraindications for their use.³ Unfortunately, this book is available only in French. Two other books she recommends that further the science of aromatherapy by including research of chemical constituents and clinical practice are *Massage and Aromatherapy: A Guide for Health Care Professionals*⁴ and *Essential Oil Safety*.⁵

Research

Essential oils used for their aroma are extracted from different parts of the plant -- leaves, roots, flowers, stalks, rind, resin, and even bark. Oils are sensitive to heat, light, and damp so they need to be stored in dark, airtight, cool, dry conditions. The amount of oil that can be extracted varies considerably and accounts for the great variation in price among the oils. For example, over 100 pounds of rose petals yield less than one ounce of essential oil.

Chemically, the aroma is defined as belonging to organic compounds or benzene derivatives. Essential oils are a mixture of over 100 organic compounds, only some of which have been researched for their therapeutic effects:

- *aldehydes* are anti-infectious
- *ketones* are mucous and stone-dissolving
- *esters* are antispasmodic, calming
- *sesquiterpenes* act as antihistamines
- *phenols* are immunostimulants
- *oxides* are expectorants
- *C10 terpenes* are antiseptic

Stevensen summarizes a few findings from research:

1. The basis of aromatherapy is that its chemical constituents are absorbed into the body and affect various physiological processes.
2. Cardiac patients who had aromatherapy massage with the essential oil of neroli, *citrus aurantium ssp. aurantium*, had a reduction in anxiety compared to those who had massage with plain vegetable oil.⁶
3. Inhalation of essential oils leads to changes in brain wave activity and may support claims about their stimulating and relaxing qualities.
4. There is some scarce evidence that lemongrass

and undiluted lavender oil give pain relief. Myrcene, a constituent of rosemary, lavender, juniper, and lemongrass is also analgesic.

5. Roman chamomile, *Chamemalum nobile*, reduced anxiety and physical symptoms and increased the quality of life for patients in a center for palliative care.

Stevensen also describes three drawbacks to current research:

1. Lack of legislation over labeling and quality control of essential oils. Not only do closely-related plants known by the same name vary in their chemistry, but where they are grown and under what conditions can cause wide chemical variations in the same plant.
2. Testing may not apply to humans. Clinical trials from animal and tissue models may not be replicable in humans.
3. Oils may complicate drug therapy. Essential oils may interfere with some conventional drug preparations.

Aroma-Chology vs. Aromatherapy

The Olfactory Research Fund, a non-profit organization, many of whose board members are leaders of the fragrance industry, is distancing itself from aromatherapy. The Fund is promoting a distinction between what they call 'folklore-based' aromatherapy and their research-based and newly-coined word, aroma-chology. They define aroma-chology as the study of the interrelationship between psychology and fragrance technology. Their focus includes natural and synthetic blends as well as single odors.

They define aroma-chology further as the study of the sense of smell and the *positive effects* of odor on human behavior. This precaution may be an attempt to counter concerns about the use of aroma to influence consumers. According to a Reuter's article from 1992, the Smell & Taste Treatment and Research Foundation diffused an undivulged odor to an area housing a group of slot machines that then proceeded to take in an average of 45 percent more money than the control slots (*Washington Post*, 7 September 1992). Alan Hirsch, a neurologist who conducted the study thought that certain scents might relax consumers, possibly making them more willing to make purchases or take risks. In a more recent article, according to

Maureen Morrin, a Boston University assistant professor of marketing, geraniums beat lavender, rosemary, and eucalyptus in helping students concentrate and better remember products they saw flashed on a computer screen. Hypothetically, this would increase their chances of buying when encountering overwhelmingly large numbers of products in the market place (*Washington Post*, 20 April 1997). Many consumers leave a store without buying anything if they feel overwhelmed.

Since industry is often able to earn back research expenses, the Olfactory Research Fund has the incentive to increase scientific understanding about odors, at least in the psychological realm.⁷ In one experiment the Fund supported, persons exposed to pleasant smells in a mall were asked to perform a helping task -- picking up a dropped pen or making change for a passerby. Helping was significantly enhanced by pleasant aromas, whether the pleasant smell was pastries baking, coffee, or perfumes.⁸

What both sides seem to agree on is that odors perceived as pleasant can enhance mood and affect behavior. This is consistent with other research indicating that odors rated equally pleasant by individuals have virtually identical effects on their behavior, regardless of their precise olfactory nature. The Fund believes this aspect is contrary to the beliefs of aromatherapists who often claim that different odors produce specific effects.

Methods of Use

Dr. Christine Page, a British physician specializing in complementary therapies, suggests these methods for using essential oils:

Massage or bath oil. Her favorite recipe is to blend 1 cup water, 1 cup castor oil, 3-5 drops essential oil, and a 1/2 cup lecithin granules in a blender. This must be kept refrigerated so don't forget to warm it up before using it for massage!

Compresses. 2 drops of oil to 1 pint of warm water. Soak a cloth in the solution, remove and squeeze lightly. Apply for 2-4 hours or overnight. Good for fevers, relief of aches, pains, bruises, sprains, and skin conditions.

Steam inhalation. Add 8 to 12 drops to a facial steamer. Good for lung disease, sinusitis, or emotional needs.

Diffuser or oil burners. Put 3-4 drops in water

over a nightlight or in an electrical heater. Use in a wet towel on a radiator or applied to ceramic oil rings made for placing on light bulbs.

Aromatherapy in Life

Daniele Ryman, author of *The Aromatherapy Handbook*, was a student of Marguerite Maury, the woman who brought aromatherapy to the United Kingdom and popularized it. Maury had studied the works of Rene-Maurice Gattefosse, who experimented in military hospitals during WWI, and Jean Valnet, the French army doctor known for his work with aromatherapy during WW II.⁹ It was Gattefosse who coined the word 'aromatherapy' and is considered to be the father of the scientific use of essential oils.

Maury helped Ryman realize that aromatherapy was something she had grown up with though her family never had a name for it. On the day she was born, her family, according to tradition, welcomed the newborn by filling her room with the scent of flowers to "animate the baby's first breath." In their daily lives, when family members were physically tired from farm work, they massaged their bodies with oils. They took teas for sleeplessness and indigestion. They inhaled essential oils when they had colds, flu, and bronchitis. Aromatic herbs used in cooking helped digestion. Breathing the pine-scented air during a walk through the forest was believed to be a preventative against tuberculosis. In a way, Maury brought Ryman back to her own roots and helped her take seriously her calling to heal people through aroma.

Improving Your Sense of Smell

Contrary to popular belief, according to the Olfactory Research Fund, a good sense of smell is acquired more than inherited. Most people have the same potential as professionals. The Fund suggests five tips for training your sense of smell and living closer to your potential.

1. Become more aware of the odors of familiar things. Train your mind to take note of them.
2. Smell often, but not a lot. Noses fatigue easily. Smell things alternately or pause between smellings. Refresh your nose by blowing small amounts of air in and out a few times.
3. Every trip from home offers new smells. By attending to them, you can create an impression

of the places you go. The strong associations between smell and memory will leave you with the ability to recall these places with a whiff.

4. Don't allow your sense of smell to become bored. Change fragrance at different times of the day. Even using one fragrance differently -- aroma from a candle, spray in the air, or applied to your skin -- creates a different impression.

5. Use personal fragrance moderately. It should remain within an arm's length of your body.

An Aroma Psychology Experiment

Given the power that scent has to elicit emotions and memories, Annette Green, President of the Olfactory Research Fund, suggests trying to think of smells from your past that evoke a positive feeling. Mother's lilac perfume, herbs from the garden you played in as a child, or the pine woods at the family summer cabin may be scents that give you a sense of well-being. Find a similar fragrance. Smell it or apply it before beginning a challenging task such as speaking at a meeting, going for an interview, or installing a new program on your computer. See what effect this scent has on your mood, attitude, energy, and behavior.

Caroline J. Stevensen, B.A. Hons., author of the Aromatherapy unit of the first medical school textbook on complementary medicine, Fundamentals of Complementary and Alternative Medicine, edited

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HEALING ARTS

Myss Provides Clues for Healing

Carolyn Myss, presenter of the seminar "Why People Don't Heal," became known for her amazingly accurate intuitive medical diagnoses. At recent seminars, however, Myss focuses on describing the growth process in human perception and wisdom. She explains how attitudes, beliefs, and feelings either nourish or diminish our health. According to Myss, our level of understanding life is reflected symbolically in our state of health. Although this may sound dangerously close to blaming the patient for being ill, she encourages us to look non-judgmentally at the problems we are faced with in our lives, especially those that recur or require constant attention.

Imagine that we live for the specific purpose of coming to grips with these problems. What must we learn in order to deal with them? By looking at them as if they were lessons designed specifically for us, we can approach them with a different attitude. Instead of seeing them as unyielding adversaries, we can experience them as allies, guiding us directly to our work. The concept can provide a positive and empowering outlook. Our task in life is to learn and then, to the best of our abilities, make the changes that painful situations call for.

Myss points out that the individual does not need to know in advance how to change or what changes to make. By spending time in contemplation, meditation, or prayer, we become able to identify behaviors and attitudes that aren't working. Edgar Cayce, one of the most well-documented medical intuitives,¹⁰ once answered someone who asked how she could change a certain behavior when she didn't feel

she really wanted to behave differently. He told her to 'act as if' she had the feelings that would reflect an improved attitude. He pointed out that by actively practicing and seeing the results of the new behavior, the feelings would eventually follow. It's interesting that he assumed, as Myss does, that we 'know' within ourselves exactly what good, productive behavior is.

Chakras Reflect Issues and Illness

Myss refers to the energy vortices in the body, called 'chakras' by the Hindus, to describe the developmental stages of personal power. Power is the growth of perception or insight into dealing with problems of existence. Each chakra symbolizes one of the seven major arenas of life through which we grow in our ability to love and act on our ideals -- family, relationships, development of the self, love and forgiveness, will, mind, and spirit. By gaining insight into our spiritual and perceptual issues, we can use them as guidelines for healing our own physical illness.

Some examples correlating chakras, the subject of our increasing perceptions, and our related illnesses are as follows:

Chakra 1 is located at the base of the spine. Issues of being able to stand up for oneself. Depression is a common problem.

Chakra 2 is located at the sexual organs. Insights into power and control issues. Oby/gyn problems, potency.

Chakra 3 is located at the solar plexus. Fear and intimidation issues. Intestinal problems.

Chakra 4 is located at the heart or thymus. Grief and anger issues. Asthma, heart disease.

Chakra 5 is located at the throat. Strength of will issues. Chronic throat problems.

Chakra 6 is located at the pineal or pituitary. Openness to the ideas of others. Neurological difficulties.

Chakra 7 is located above the head. Values, ethics. Sensitivities to light and environments.

Richard Gerber, M.D., writing in *Vibrational Medicine* (Sante Fe, NM: Bear & Co., 1988), notes that only recently has Western science directed attention toward validating the whirling vortices of subtle energy called chakras. As with acupuncture meridians, conventional

Western scientists tend to think of them as magical concepts from primitive people. New instruments are able to record the subtle variations in bioelectric fields. Gerber points out that, "Anatomically, each major chakra is associated with a major nerve plexus and a major endocrine gland . . . situated in a vertical line ascending from the base of the spine to the head." In Vedic tradition, chakras are thought to be associated with perceptual functioning.

In *Wheels of Light* (New York: Fireside, 1994), Rosalyn L. Bruyere agrees that blocked chakra energy can lead to pathology. Bruyere is a trained engineer, instrumental in the eight-year research on the human electromagnetic field conducted at UCLA. According to Bruyere, personal history may provide some explanation about the development of our problems but it doesn't let us off the hook for needing to develop new attitudes which will help us heal.

Unreal Expectations

Myss points out that laughter and tears can happen at the same time in life. She cautions us not to get caught up in unreal expectations that life will be all one way or another or that it will be perfect after finding the perfect partner, the perfect job, or the perfect diet. We're here to learn how to live and the conditions of life are always changing.

In describing to her audience something regarding the difficulties of life, she tells how communication, even among friends, can sometimes be a challenge. A friend from New Jersey, with his strong Jersey accent, called her one day to ask for advice. "I'm seeing spirits around attics and cellars," he said. Being from Chicago, where they say "basements" and not "cellars," she heard his statement as, "I'm seeing spirits around addicts and sellers".

"Addicts?" she says. "Where?"

"In my house," he answers.

"In your house?!! What's an addict doing in your house?" she asks.

"Came with the house" he says.

". . . came with the house?" She's incredulous.

"All the houses around here got them.

"They've all got them?"

"Geez, you seem to feel pretty strongly about attics. What do you think of cellars?"

“They’re immoral!” she huffs.

At this point he figures out they just must not be talking about the same thing.

Life Is A Journey

Her message is that life is a journey about the evolution of our perceptions. We invest our energy in different ways and when we invest it poorly, as in holding onto resentments, it can become unavailable for our health. Our goal is to give expression to the Divine, and through our physical existence, learn how to manage the Spirit. She suggests that we:

- don’t judge others
- live by a code of honor
- master forgiveness
- trust in love and companionship, for it will be there when we need it
- learn to perceive our gifts in a new way which will help us make changes in our lives

The gifts we are given may not fit what seems logical, financially feasible, or what we are trained for. In fact, we may find ourselves changing occupations and becoming something for which we have no training. She encourages us all, for the sake of our health, to take the risk.

Myss is author of Anatomy of the Spirit.

To obtain a schedule of Myss’s lectures and workshops, call The Conference Works at 317-329-8445. ☺

COMMENT

James S. Gordon Encourages Call for New Medicine

James S. Gordon, M.D., professor at Georgetown University School of Medicine, is author of *Manifesto for a New Medicine: Your Guide to Healing Partnerships and the Wise Use of Alternative Therapies*. Speaking at a conference sponsored by the National Center For Homeopathy, he encouraged health care consumers to continue their role in the revolution in medical care. He believes people have become frustrated by being told that their discomforts with their health are ‘all in your head’ or that they must learn to live with their chronic problems. Gordon believes that essential changes are

needed in the practice of medicine to bring the value of drugs and surgery into appropriate balance with less invasive healing traditions.

The first point Gordon makes is how the uniqueness of each individual has been lost in Western medicine. Ten individuals with the same diagnosis in Western medicine would be treated in various ways when looked at through a different grid of analysis. Using homeopathy, for example, it is likely they would be given ten different remedies.

Secondly, we are more than the sum of our physical parts. Our physical, emotional, mental, spiritual, familial, economic, ethnic, class, and gender are each important dimensions, which also impact on each other. When job dissatisfaction is at the top of the profile for patients who have heart attacks, is drug therapy the most reasonable treatment?

Improve Medical Education

Thirdly, Gordon emphasizes that primary care is self-care and that it is vital to teach people how to take care of themselves. To encourage this, he wants his medical students to:

1. be open to the healing systems of other cultures and learn about them well enough to refer patients to other treatment modalities;
2. understand that patients are the practitioners’ teachers and the lessons they teach are deeply spiritual;
3. have an experiential education, such as studying yoga, and combine it with anatomy;
4. not be taught by means of intimidation or by having a focus on developing a professional identity;
5. appreciate and be educated in the complex ways new practitioners are working with people; and
6. be taught with an emphasis on service and helping people.

Gordon tells of a situation where the hospital administrators and heads of departments also did manual labor and where patients went on rounds with the doctor. A physician’s arrogance was as much a subject for discussion as were the patient’s electrolytes. “We need to create an environment where

teaching is possible and mutual respect the norm.”

Gordon has created the non-profit Center for Mind-Body Medicine to serve as a prototype for this compassionate model of health care and education. The Center addresses social, spiritual, emotional, and mental issues as well as physical ones. The programs are grounded in the untapped capacity people have to understand themselves, to improve their own health, and to help one another.

Improve Research

Gordon also promotes the need to broaden methods of research. Some conventional methodologies can be used for holistic or unconventional approaches. In some cases, however, more appropriate methodologies need to be developed for each alternative approach.

Some of the research on natural therapies is beginning to show cost effectiveness, too. For example, for heart patients, group support, diet, exercise, cessation of smoking, relaxation, and meditation techniques are more effective than bypass surgery, which usually is needed again in five years and sometimes sooner. The cost of the alternative model is \$5,000-\$6,000 for the first year, while bypass surgery can cost \$30,000-\$60,000 during that period.

Also, premature babies with low birth-weight who are given ten minutes of Therapeutic Touch three times a day can leave the hospital considerably sooner, grow and develop faster, and cost \$3,000 less per baby than infants who are not given this program.

The Financial Drain of Malpractice

The best guard against lawsuits has been shown to be a good doctor/patient relationship. Medical tests do not prevent lawsuits. Gordon would like to see an independent, non-medical board which examines disagreements and hands out jail sentences to practitioners who are repeatedly destructive.

Dr. James Gordon, Director of the Center for Mind/Body Medicine, is on the Advisory Board of the Office of Alternative Medicine. Dr. Gordon can be reached at 202-537-6837

To learn more about the National Center for Homeopathy, call 703-548-7790. ☺

HEALTH RESOURCE

FOS: Functional Food That Aids Digestion

Nutritionist and author Robert Crayhon, M.S., C.N., describes functional foods as foods engineered to promote health. In his health guide, *The Health Benefits of FOS*, he describes fructooligosaccharides (FOS), which are a functional food consisting of carbohydrates ordinarily found naturally in many foods, including garlic, honey, bananas, artichokes, barley, soy, Jerusalem artichokes, and asparagus. He recommends them because they have two unique properties.

1. They provide fiber that moves through the intestinal tract without being broken down, just like the insoluble fiber recommended to encourage regular bowel movements.
2. They are a sugar that is eaten only by the ‘friendly’ bacteria of the lower intestines, which causes them to multiply rapidly.

Who Would Benefit and Why?

Almost any person with suboptimal digestion could benefit from FOS because they do not often provoke intolerant or allergic reactions. Signs of poor digestion include intestinal gas and bloating, irritable bowel syndrome, colitis, food intolerance, fatigue, and candida albicans overgrowth. FOS can help individuals who can’t eat wheat or other grains and who therefore cannot take in the amount of fiber needed for healthy bowel function.

There are about three pounds of bacteria living in the gastrointestinal tract where they are needed for nutritional absorption. Taking antibiotics can leave a patient short of good bacteria. Eating sugar and refined carbohydrates, such as white bread and pastries, and drinking chlorinated water does the same. FOS are a good way to support growth of healthy bacteria.

Studies of FOS have shown that they lower blood cholesterol and triglyceride levels, help lower blood sugar levels,¹¹ lower blood pressure,¹² decrease the risk of colon cancer, fight the formation of cavities, help digest lactose -- the sugar found in milk that many adults cannot digest, increase digestion of calcium, and

promote healthy bowel movements. One of the most common complaints as people age is digestive problems. Ralph Golan, M.D., author of *Optimal Wellness*, also recommends FOS because they can help increase beneficial bacteria quickly and lessen the need for lactobacilli supplementation. Most important, they do not promote 'unfriendly' bacteria or yeast.¹³

How To Take FOS

FOS are usually sold in capsule form in combination with beneficial intestinal microflora. If using the plain powder, however, begin with one gram or a quarter of a teaspoon each day for a week, increasing slowly up to as much as eight grams a day. Taking too much can cause diarrhea. FOS are mildly sweet and can be easily added to many foods or drinks. Ordinarily a person would have to eat large quantities of food to benefit from FOS, but with the ability to create them in the laboratory, they are available in this concentrated form.

Emerson Ecologics at 800-654-4432 and KAL Dietary Supplements carry plain FOS powder. Robert Crayhon, author of Robert Crayhon's Nutrition Made Simple, can be reached by faxing Keats Publishing at 203-972-3991.

Best wishes,

Barbara June Appelgren

Barbara June Appelgren, Editor


ENDNOTES

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