

THE ISRAELI FORUM OF REFLEXOLOGY

The First International Symposium on Reflexology and Cancer

29th – 31st October 2008

Report by Sarah Bain MBRA, MAoR

I have recently returned from Israel where I attended the above Symposium. It was a 3 day conference held at the Auditorium Hotel Kibbutz Shefayim Conference Centre, Israel. It was an amazing experience. Everyone was so welcoming and we were made to feel very at home and the food was wonderful. Israel had been praying for rain and the British brought it with them - for 2 solid days!! But we were pleased for the rain-starved Israelis and, having had a good soaking for 48 hours, the sun then shone.

I was particularly interested in attending this Symposium as I work as a volunteer Reflexologist at Epsom Hospital. They have a dedicated Unit, The Macmillan Butterfly Centre, where cancer patients and their family and carers are able to just drop in. The Unit offers support, counselling, information, group relaxation classes, complementary therapies and much more. I am currently attending a learning opportunity for Cancer Awareness run by The Macmillan Group – Learnzone. I highly recommend anyone to investigate the Macmillan website. They have much to offer and the courses are free to anyone involved with working or supporting cancer patients.

This event 'The First International Symposium on Reflexology and Cancer (ISRAC)' was the brainchild of *Mauricio (Moshe) Kruchik*, Founder and President of the Israeli Forum of Reflexology. His organisation and implementation of this conference was, for him, "*the fulfilment of a dream We sincerely hope that this will be a milestone in the history of Reflexology and in the treatment and care of cancer patients. It is all about hope. Let us talk about it.*"

It was a fantastic event, very intense, with many very interesting lecturers. I was awestruck by the two translators. What an incredible job they did as they constantly jumped in and out of Hebrew/English/Spanish/French throughout each of the 3 long days, with up to 7 lectures a day!

There were about 130 delegates who came from all over the world: 8 travelled from England, 6 from Denmark, 4 from Australia, 4 from Ireland, 3 from Slovenia, 3 from U.S.A., 2 from France, 2 from Spain, 2 from Scotland, 1 from Wales, 1 from Greece and 1 from Canada. The majority of the delegates were Israelis.

There were three Speakers from the U.K.:

- Beryl Crane - President of the International Council of Reflexologists
- Lynne Booth - Founder and Principal of VRT (Vertical Reflexology Therapy).
- Edwina Hodgkinson of the Christie Hospital NHS Foundation, Manchester. I am sure that many of us know of their work and achievements.

I am just going to share snippets with you from the Conference, and I hope I haven't lost too much in translation.

The aims of the Symposium were:

- To dispel the old myths about Reflexology and Cancer
- To enhance the status of evidence based on Reflexologists' collective experiences working with cancer patients
- To evaluate the effects and safety of Reflexology for cancer patients
- To discuss the role of education and training, methodologies and strategies appropriate to develop research in the field of Reflexology and Cancer.

There was much discussion about exploring the possibilities of how to successfully implement Reflexology into an Integrated Health System bringing complementary (alternative) therapies side by side. There seemed to be a lot more questions than there were solutions.

We heard the following words from Dr. Opher Caspi, Director of Complementary Medicine Unit for Oncology, Davidov Medical Centre, Israel.

- "What is Integrative Medicine? Is it the merging between conventional medicine and alternative medicine?"
- How did society decide on the terminology "alternative" medicine?
- How do we evaluate competency?
- What is worthy or unworthy?

Dr Caspi told us that each of us as reflexologists need to denounce charlatanism; we need to tell the public what is trustworthy. Therefore regulation for Reflexologists is necessary. However, the argument against regulation is that it can be like castration to the artisan. If you put splints onto a champion

tennis player so that he holds his tennis racket in the "correct" manner, he will lose his expertise and ability.

We were told that there are two methods of regulation:

1. Sovereign and State
2. Independent Statutory Law

Self-Regulation cannot be done within the area of health. Therefore the recommendation is:

- Reflexology - making it an academic subject
- Certificate - e.g. teacher's certificate

We listened to the experiences of *Dr Bibiana Carrasco, Paediatric Surgeon, Sant Joan de Deu Hospital, Barcelona, Spain*. Since the spring of 2004 she has been performing weekly Reflexology treatments on the Children in the Haematology-Oncology Unit in Sant Joan de Deu.

At another of the Spanish hospitals at which Dr Carrasco worked, she started giving Reflexology treatment to a girl with leukaemia, requested by the family and with the permission of her oncologist. After the second session, the Head of Department found out and forbade her therapeutic activity in the unit, thus discrediting her and the oncologist.

The Spanish Association of Families and Friends of Children with Cancer (AFANOC) has been helping families with children suffering from cancer for the last 20 years. This charity provides economic, social, psychological, emotional support and play activities, both in hospital and at home.

The first step for Dr Bibiana Carrasco was to present her project to the AFANOC which was aimed at providing Reflexology treatment to children with cancer, to improve as much as possible their physical and emotional state. The AFANOC Management agreed to this because it was an opportunity to widen their field of action. Also, her own position as a physician/surgeon gave an image of responsibility and professionalism to the project.

Reflexology is still not very well known or accepted in Spain and the only hospital that would accept Dr Bibiana's "integrated" way of treating her young patients was Sant Joan de Deu Hospital, Barcelona. Dr Carrasco showed us photographs of her giving Reflexology in her outpatient clinic to a child sitting on its mother's lap, whilst discussing the child's condition. There were other photos of children in bed being talked to and soothed during a Reflexology session.

Dr Martine Faure-Alderson (France) told us about her ongoing International Research Study: Reflexology Pilot Study on Cancer Patients in Hospitals or Outpatient Centres. These 5 centres are

in Paris - France, Michigan State University U.S.A., Reykjavik - Iceland and in both Perth and Sydney - Australia. An expected outcome of this project is the recognition of the benefits of Reflexology in a domain where natural therapies is often a foreign concept.

Dr Faure-Alderson told us that the body cleanses itself from inside to outside, top to bottom and present to past. She is emphatic in her belief that **"IN ORDER TO TREAT THE CAUSE OF CANCER, LIKE ANY OTHER DISEASE, WE MUST REACH THE INITIAL STRESSOR."** She tells us that Reflexology works on the somato-emotional approach to disease and therefore has its place in the treatment before, during, and after cancer. The goals of her Research Study are to prove relief of symptoms in cancer patients and find positive results in reduction of anxiety, depression and pain, nausea, fear, needle phobia, tumour markers, and enhance calmness.

We listened to at least 17 speakers over the 3 days with the opportunity of attending 4 or 5 workshops too, so you can imagine our heads were spinning at the end of each day, and my head is spinning now trying to write this article!

A gathering of Reflexologists from around the world gives a great boost to confidence and morale. It is very disappointing to hear so much resistance in the medical world accepting "alternative" therapies into their domain, therefore denying the status of "complementary" and "integral" medicine. It was blatantly obvious that only scientific research is acceptable.

Dr Dorit Gamus, Director of Complementary Medicine Department, Tel Aviv, Israel, said that she had been approached several times with a question of how to design good clinical research in Complementary and Alternative Medicine (CAM) that would integrate the requirements and the needs of both the complementary and conventional medicine.

- Is the aim of the Reflexology study to assess the effect of particular pressure points?
- Is the aim to evaluate the effect of treatments on a particular condition/patient?
- Is it safe?
- Does it help in a particular condition and to what extent?
- Is it cost-effective - does it save money to the patient and/or to the health system?

Beryl Crane, President of the International Council of Reflexologists, told us: "Relieve the stress levels and everything seems to improve in

repair of the body. If you can't use the feet or the hands for treatment, go to the ears". Beryl followed this up later in the evening with very interesting workshops demonstrating some ear reflexes.

She said many people question how Reflexology works and that to date the research is very limited. She told us that China has amassed a vast amount of research which has been printed in the Research Analysis Document published by the International Council of Reflexologists which outlines many case studies including cancer.

Beryl went on to say that recently, at the British Associations Festival of Science held in Liverpool, U.K. research has shown that nerve fibres are activated when cuddled or stroked and they are said to block pain messages to the brain. She added - "Can you imagine how wonderful a Reflexology treatment is - just stroking and caressing the feet or hand or ears by a competent reflexologist will aid the body."

Lynne Booth from the UK spoke about the development, practice and benefits of Vertical Reflex Therapy (VRT) and its role in palliative care. She stated that VRT is a profound technique where the hands and feet are briefly treated in a weight-bearing position, suggesting that this increases the response of the reflexes. She explained that even the frailest of people can safely receive VRT. Lynne has conducted her own medically-approved studies on the chronically sick and geriatric clients with high percentage results of physical improvement and mobility. If the client's feet were too swollen to treat the feet, she would gently help them to press their palm down on a table or book, and apply VRT even though they were sitting or lying down.

Lynne described and demonstrated to us her new and effective technique on VRT Nail-Working. She explains that initially she identified the 5 Ingham full body zones on the thumb nails (Ingham places them on the thumb and toe pads). As the brain and part of the central nervous system reflexes are situated under the nails Lynne has extended these techniques to encompass any malfunction in the body. The nails should be worked precisely but lightly, nail-on-nail, as if mapping out a tiny grid system. For the very poorly cancer patient, carers and their clients can learn simple self-help VRT techniques on their hands to aid sleep and assist in relaxation and possible pain control. Lynne followed up her presentation later in the evening with fascinating workshops.

Ayelet Dor, Reflexology Specialist, Complementary Medicine Unit for Cancer Patients, Davidov Medical Centre, Israel. Ayelet Dor described to us

the meaning of Integrative Medicine:

- Seeing health and healing rather than focusing on disease and treatment
- Treating the patient as a complete human composed also of soul and spirituality
- Addressing lifestyle factors such as nutrition, physical activity, rest, and sleep
- Combining Western medicine and alternative medicine = integrated medicine, the medicine of the future
- Fundamental change in health, sickness, and lifestyle perception

Ayelet told us that in Israel, hospitals are now called Medical Centres. She came to work at the Davidov Medical Centre Oncology Unit after 7 years in Reflexology. She says she arrived there with a feeling of great fear and trepidation, yet also ready for a great challenge having lots of ambition. She said the first thing she learnt in Alternative Medicine School in Israel was not to touch cancer patients due to the assumed potential of spreading the illness. She learnt that this contraindication is of course the result of ignorance. She learnt that in the past few years there have been several studies on Reflexology and other touch treatments in cancer patients and it appears that touch treatments contribute to cancer patients' quality of life and have a positive effect on the patients' healing process.

Ayelet told us that it is necessary for Reflexologists to:

- understand the process of the cancer
- what the illness is
- to know the different types of cancer
- types of treatments
- how chemotherapy and other treatments work
- what their side-effects might be, and so on.

She says that one of the most important things about working in the Oncology Unit is the cooperation between conventional medicine and alternative medicine. "We live in the same building, I am in touch with the treating oncologists, and we are all attentive to any physiological or emotional change experienced by the patient. That is why I view Reflexology, and touch treatments in general, as an integral part of patient care".

Ayelet concluded that Reflexology treatment performed safely, in a controlled environment together with conventional medicine, is crucial for cancer patients. It significantly reduces side effects. It is emotionally vital, and it is pleasant and safe. Alternative medicine treatment should generally be an inseparable part of conventional care, and once a patient combines chemical treatments with alternative treatments, the chances of recovery are

better and the quality of life improves. During this three day seminar it kept coming back to the fact that "proper" research has to be done to achieve National and International Integrated Medicine. It was acknowledged that research can be lengthy, boring, expensive and often disappointing.

Susan Berenson, Registered Nurse, Reflexologist Specialist, Memorial Sloan Kettering Hospital for Cancer Care, New York, USA. Susan has 30 years experience with oncology at the Memorial Sloane Kettering Hospital for Cancer Care as a specialist Nurse. She has been including Reflexology for the past 9 years. She says "Technology has intervened to such an extent that there is no time for nurses to do the "touch" healing, body washes are hurried, with the patient often having to do it themselves, and there is certainly no time for massage or body rubs." She went on to say "I believe it is the most meaningful thing to do, to offer touch alongside medical treatment. Those children undergoing treatment who are tied down in their cribs do not develop well, as with the elderly who are so often left for long periods of time. If we don't get touched there is a failure to thrive".

Susan is doing a lot to promote "Integrated Medicine" and practises Reflexology at a Comprehensive Cancer Centre. At the hospital the in-patients are treated with Reflexology free of charge. They can be referred by their nurse, family, physician or themselves.

Susan has been involved with several Clinical Trials and Case Studies that have shown a marked improvement. The patient is asked to rate their symptoms on a scale from 0 - 10 before and after Reflexology.

The headings for the symptoms are:

- Pain
- Nausea
- Anxiety
- Depression
- Others: Fatigue, neuropathy, shortness of breath, insomnia, constipation

Susan told us that they are working closely with Medical Directors in the U.S. and want to bring Integrative Medicine into all hospitals in the Oncology Departments. "We want a joint working partnership with the General Practitioners to prescribe Integrative Treatments to cancer patients".

Leila Eriksen, Reflexologist and CAM Consultant (Complementary and Alternative Medicine), Denmark. Leila Eriksen has for the past 23 years worked with Reflexology research. She works together with National and International Associations. She has become the most respected

point of reference for reflexology Research around the world. Denmark is ahead of data collection/documentation in the world concerning Reflexology. She stressed that research must be scientific, not necessarily complicated. She informed us that there is an increasing interest in CAM (Complementary and Alternative Medicine) from CAM providers and their organizations as well as research institution politicians and the general public. Many countries now have official CAM research programmes.

Leila informed us of NAFKAM, (The National Research Centre in Complementary and Alternative Medicine). It is organized as a centre at The Faculty of Medicine, University of Tromsø, Norway. It is funded by the Norwegian Ministry of Health and Care Services.

International Reflexology Associations and Networks like NRN (Nordic Reflexology Network), RIEN (Reflexology in Europe Network), and ICR (International Council of Reflexology), CAM and NAFKAM can have great benefit of sharing knowledge, and hopefully achieve great things.

Leila said one has to face the reality: Reflexologists have to be:

- Well educated
- Co-operate between associates, specialists, clients
- Focus on high ethics

Edwina Hodkinson, Deputy Clinical Leader for Complementary Therapies, Christie Cancer Hospital, Manchester, U.K. - "Adapting Reflexology for the Cancer Journey". Edwina Hodkinson emphasised how much care needs to be given when working with patients undergoing chemotherapy. They have low platelet counts and bruise easily, and especially patients with haematological cancers. The Reflexology treatment needs to be very gentle using light touch techniques. Edwina told us of the anxieties of cancer patients often bearing a whole myriad of emotions and worries; that we need to be consciously aware to adapt our Reflexology treatments accordingly.

Many factors would influence this such as:

- changes in mobility
- pain, inability to get comfortable
- poor skin viability and poor tissue tone
- breathlessness and fatigue
- lymphoedema, oedema and weight changes
- infections, etc.

Edwina says that when using reflexology in a cancer care setting it is important to the therapist to be able to be creative and flexible in giving a treatment in

order to work with all patients on the cancer journey, knowing that no-one is excluded from treatment just because they have cancer.

Ruti Springer, Reflexologist Specialist, Hemato-Oncology Department for Children, Tel-Aviv, Israel. "The Reflexology Treatment as Palliative Care". Ruti Springer stressed that the Reflexology therapists dealing with cancer patients should have a good understanding of the disease. She says there are many terms such as: biopsy, oncology, metastasis, port, chemotherapy, radiotherapy, neutropenia, intravenous canula, remission, and many many more. It is necessary that when we set out to work with cancer patients that we should read, learn and understand these terms, and it is important to understand what cancer is and how the patient responds.

She has worked with children whose parents don't want to let the child know they have cancer. There are families who may want to cling to their loved one, others who show premature distancing, escaping, and farewells. In Ruti's experience, the patient almost always knows when their time has arrived. They know when to gather their loved ones close to say goodbye.

And the soul? - The soul leaves the feet first. It is hard to say what you're seeing exactly, but anyone with Reflexology experience will notice the change in the soles of the feet, which become empty, pale, light. And then you know that it is only a matter of hours before they pass over."

Mauricio (Moshe) Kruchi, Founder and Principal of The Israeli Forum of Reflexology, wrapped up the Conference to a great applause. He talked to us about 'The Future of Reflexology'. He sees a transition period, a change and went on to state:- "...People are now aware of self-help therapies. People start to challenge the rules, enjoying the new dictates of freedom. People are free to choose between a wide range of therapies that enhance and support the natural reserves of the body to heal itself

and that are able to empower a healthy body mind response which facilitates healing. What has made the change that caused the people would seek the help of alternative and complementary medicine? The answer is that people want the freedom to be able to choose!"

"This Conference has been a demonstration of this theory. When at the beginning of this process we were trying to promote a dialogue between Reflexology and Traditional Medicine, one of the doctors said: 'We never thought that Reflexologists would be able to raise an event of this kind'."

"When I heard this comment, coming from a very kind professional who was impressed about our work and willing to help, I was shocked. I didn't know how to interpret his comment. I had two choices; I could either view his statement as arrogance, but I preferred to interpret his statement as a compliment. This was a demonstration that Reflexology can go far beyond what people think it is able to do. We often complain that modern medicine doesn't believe what we, as Reflexologists are able to do. No, this statement proves to be wrong time after time. Modern medicine doesn't know about our achievements!!!"

"Reflexology quietly grows during this time. Reflexology proves to be effective, safe, natural and friendly. We are not a science and probably we never will be Our tools as Reflexologists are different. We can promote harmony. And harmony can promote good health."

Look out for - 'First World Conference on Maternity Reflexology' in Israel (October 11th-13th 2009) by clicking on www.isreflexology.com/en.

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The photograph above shows a large number of the delegates in attendance, Sarah is on the back row, 5th from the right.