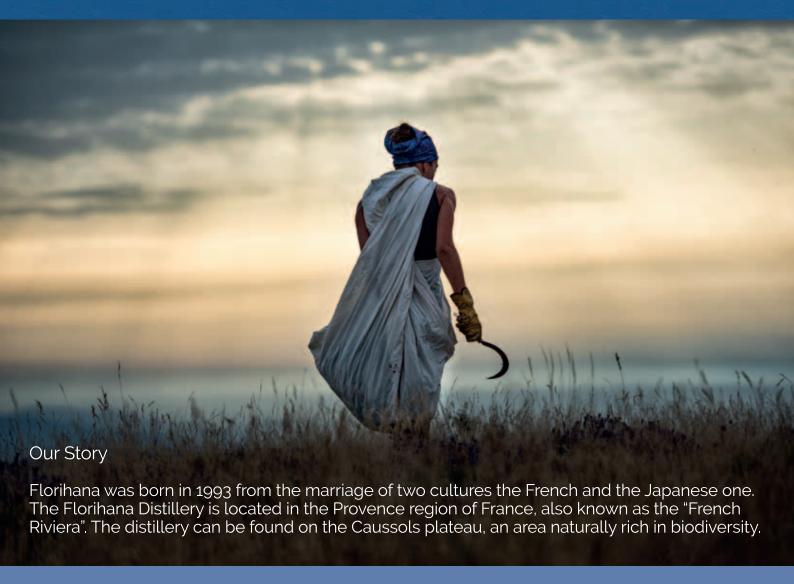
In Essence

Journal of the International Federation of Professional Aromatherapists

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In Essence welcomes editorial contributions which can be short items (news, letters, reviews) of 100–300 words or feature articles or case studies of 1000–3000 words.

Contributions can be sent by email to the following address: admin@ifparoma.org or typed clearly on A4 paper, double-spaced, and sent to the IFPA office (address below).

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Editor's letter Autumn/Winter 2019





or the IFPA this new season began with a members' networking day, at which one of speakers was Louise Crockart. Her engaging talk on Arvigo® therapy, which combines Western medical knowledge with ancient Maya healing tradition, attracted much interest. If you could not attend the IFPA event you can learn about this fascinating therapy in Louise's article on page 18.

On page 26 Emma Charlton brings back a breath of summer with her article on working as an aromatherapist at

a summer music festival. It can be challenging to take your practice to the great outdoors so, for those tempted to try it, she offers advice and tips.

Challenge is also a feature of our 'My practice' article (page 37) in which we talk to aromatherapist Sarah Bryan. Registered blind since birth, Sarah has built a successful career and has an aromatherapy practice and an essential oil product range to her credit. She talks about her enduring passion for essential oils, and her recent experience of a business mentorship scheme.

In a moving account, Shirley-Anne Foster describes her massage therapy practice for Momentum Children's Charity. She highlights the rewards of working with children and young people with life-challenging conditions, and with their families living under enormous stress (page 46).

Signposting the IFPAroma2020 Tokyo conference in March we have two articles on aromatherapy in Japan. David Wilson shares his delight at discovering Japanese essential oils (page 22), while Reiko Tomino, Principal of a successful IFPA-accredited school in Tokyo, introduces her school and its students (page 43).

Did you know that, in the 18th and 19th centuries, a corner of south west London was the 'lavender capital of the world'? On page 30 Louisa Alessandra Pini tells the story of this forgotten industry, and highlights a community venture that's reviving lavender and producing essential oil on an original lavender field.

Another essential oil in the spotlight is Atlas cedarwood, recently identified as endangered. Dr Kelly Ablard highlights the current threat and explores alternatives with similar therapeutic properties from less threatened essential oil-bearing plants (page 9).

We also have advice on promoting your business (page 54), looking after yourself as well as your clients (page 16) and ensuring that you only buy genuine essential oils (page 52).

Yat Herber

Pat Herbert Editor

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Photo: Picea mariana foliage and cones, Ouimet Canyon, Ontario – Author: clairity on Flickr – https://commons.wikimedia.org/ wiki/File:Picea_mariana_cones_Ontario.jpg

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Raise your business profile with tips from Fiona Minett

Letter from the IFPA Board

his autumn/winter season provides us with an opportunity to reflect upon and celebrate a period of dynamic progress for the IFPA.

Many members recently enjoyed a great Annual General Meeting/CPD day and we would like to thank you all for your positive feedback. We are pleased to announce that planning for a similar day next year is already underway.

Our next event is our 2020 International Conference in Tokyo. We have organised a stimulating programme of world-class presenters and trade stands, and an optional post-conference cultural tour (for details contact Samantha at InSide Asia Tours samantha.h@ insideasiatours.com).

The IFPA office receives many information requests from members, the general public, and external organisations. A recent example is a concern raised by a member about the use of undiluted essential oils shown in a hospital-based TV programme. We contacted midwifery professional bodies and, after consultation with the IFPA, the Association of Midwives featured an article in their professional journal on safe essential oil use.

Our educational standards are central to our work and we are very pleased to welcome a new IFPA school, the Shanghai University of Traditional Chinese Medicine. We are proud that recently accredited schools have chosen the IFPA, recognising our high professional standards.

We are delighted to announce that, after much hard work, an upgraded website is now live, with improved service and functionality. The Japanese section is now in place, with a Chinese section coming soon.

Our social media presence is greatly improved and members regularly tell us how much they appreciate the support offered in our Facebook members' group. Members have also welcomed our new series of IFPA webinars - there are more to come so do check them out on our new YouTube channel.

We are also pleased to report that registration and accreditation with the Professional Standards Authority is underway so that our members can take advantage of the social prescribing movement.

We are sad to lose the expertise and energy of Trustee and Education Chair Christine Courtney who stood down at the AGM. We wish her well and look forward to seeing her at future IFPA events. We are ever grateful for the hard work and commitment of Kerry, Julie and Emi, our office team.

IFPA Board members are volunteers. They serve to support IFPA members who inspire us in their work as aromatherapy practitioners and educators. We extend a warm welcome to all our new members and a heartfelt thank you to you all for your loyalty.

IFPA represented at CNHC meeting

IFPA Board member Emma Charlton attended a Complementary & Natural Healthcare Council (CNHC) meeting in London on 12 June (pictured in group session, third from left). Around 20 representatives of CNHC's Verifying Organisations heard updates on topics ranging from random sampling and core curricula, to the use of Patient Reported Outcome Measures (PROMs) and complaints. The CNHC reported that it had received great feedback

from the group session on the government initiative 'Making Every Contact Count'.



IFPA Board

The IFPA is delighted to announce the appointments of Ian Cambray-Smith as the new Chair of the IFPA Board and Julie Foster as Vice Chair.

Ian Cambray-Smith succeeds
Gabriel Mojay who stepped
down from the Chair's role at the
2019 Annual General Meeting in
September. The IFPA would like to
express its appreciation to Gabriel for
all his hard work and is delighted that
he will continue to support the Board
as a Trustee.

New Chair of the IFPA Board Ian Cambray-Smith said: "Many thanks for giving me the opportunity to chair the IFPA Board one more time, I am truly grateful. We are entering an important and exciting phase in the life of our organisation and I am looking forward to working with you to achieve the targets we set ourselves and to overcome the inevitable challenges".

Julie Foster, new Vice Chair, said: "It will be a privilege to work with you. Some serious challenges ahead but nothing that we cannot handle with teamwork".

The IFPA also extends a warm welcome to newly-elected Board members Eric Cheng, Sunita Teckchand and David Wilson. For more information on the IFPA Board see page 36 or visit https://ifparoma.org/about-ifpa/ifpa-council/

Funding success

Teresa Meekings, who is CNHC-registered for reflexology, reiki and massage therapy, has developed a fully-funded complementary therapy service with West London Clinical Commissioning Group and launched a social prescribing pilot programme with Kensington and Chelsea Council.

On CNHC's website you can find out how she used Patient Reported Outcome Measures (PROMs) and Patient Activation Measures (PAM) to provide evidence and put a cash value on the impact of the complementary therapy service. Visit www.cnhc.org.uk and search on News and Blog.

Botanica 2020

Botanica2020, the fifth in an international conference series organised by Rhiannon Lewis, director of Essential Oil Resource Consultants and editor of the *International Journal of Clinical Aromatherapy*, will be held 22-25 May 2020 in the lakeside resort of Bled, Slovenia.

As previous botanica conferences have so successfully done, the 2020 event will bring together researchers, aromatherapists, herbal medicine practitioners, allied health professionals, aromatic and medicinal plant growers, distillers and suppliers from around the world to showcase excellence in clinical aromatherapy and herbal therapeutics.

The conference focuses on three major themes:

- Efficacy: Presentations featuring clinical research and/or data from practitioner experience will explore the effectiveness of essential oils and other plant medicines for a range of conditions and demonstrate the scope and potential of botanical remedies
- Safety: Increasing public awareness of essential oils and



aromatherapy calls for urgent education on their use. Issues of safety, and professionals' collective responsibility to promote safe use of all plant medicines, will be discussed

 Sustainability: Huge worldwide demand for essential oils, and rising commercial interest in medicinal and aromatic plants and their extracts, raises serious concerns. These issues will be explored by experts in conservation, ethical practices and sustainability.

Botanica2020 is expected to welcome up to 500 delegates from over 40 countries. You can register your interest at http://botanica2020.com/ where you can find details about the event, venue, speakers, presentations, and workshops.

Essential oils calm dental patients

According to recent research, aromatherapy shows potential for calming dental anxiety in orthodontic patients. The researchers compared the effect on anxiety levels of lavender and rose essential oils, and a placebo.

Seventy-two patients (36 men and 36 women) attending a Department of Orthodontics in Madurai, India, were randomly allocated to one of three groups: lavender oil, rose oil, and placebo. The ambient odour of the oils and placebo was maintained with a candle warmer, and the patients waited in their respective rooms for 15 minutes. Participants' heart rate and blood pressure were measured and they also completed a questionnaire.

The results showed that both lavender and rose oils produced a significant reduction of dental anxiety among orthodontic patients, with lavender oil being the most effective. Free access to full report at www.ncbi. nlm.nih.gov/pmc/articles/PMC6773455/

Aromatherapy decreases pain and anxiety

A pilot study carried out in Virginia, USA investigated the impact of aromatherapy on pain and anxiety. The hypothesis was that aromatherapy will improve pain and anxiety scores when assessed within 30 to 60 minutes of administration.

Participants were recruited from a medical unit and a telemetry unit in a large hospital. Pain and anxiety levels were assessed before administration of a medication, within 60 minutes of receiving pain medication, and within 60 minutes of receiving aromatherapy. Both pain and anxiety improved after aromatherapy and 96 per cent of the participants said they would use it again and would recommend it to family and friends. See www.ncbi.nlm.nih.gov/pubmed/31609871

New IFPA School in Shanghai

The IFPA recently celebrated the opening of a new school at Shanghai University of Traditional Chinese Medicine. The new school will deliver the IFPA's Professional Aromatherapy Diploma course and relevant CPD courses to Chinese students and to applicants from the general public.

As an experienced Principal Tutor, Vice Chair of the IFPA Board Julie Foster supported the new school through the accreditation process alongside Ms Shen, Principal Tutor of the established Aromatime school in Shanghai.

Julie explained: "I was privileged to mentor the faculty staff through the process of accreditation and proud to be recognised as an honorary tutor. The warm welcome I received as a Principal and an IFPA board member was extraordinary and I would like to thank IFPA Board member Louise Carta who also contributed to this IFPA success".



Julie Foster (centre) with members of the teaching team at the new IFPA school in Shanghai

Secret garden

London's Chelsea Physic Garden, nestled behind walls and located very near to the River Thames, feels special and secret. As explained on the Garden's website, its origins lie back in 1673 when the Worshipful Society of Apothecaries chose the Chelsea village site for its proximity to the river. It gave them a base to moor their barge, allowing them to conduct plantfinding expeditions in surrounding areas and to teach their apprentices to identify plants, those that might cure and those that might kill.

The site has a south-facing aspect and good quality warm light soil, having previously been the site of a market garden. The river access allowed plants arriving from around the world to be introduced to Britain via the Garden. Its international reputation was established as a result of the global seed exchange scheme, known as *Index Seminum*, initiated in the 1700s and still continuing. For more information on Chelsea Physic Garden, its events and courses visit www.chelseaphysicgarden.co.uk

IFPA Tokyo conference to offer exciting programme of lectures and workshops

The IFPA's 2020 Conference, to be held 21-22 March at the National Center of Sciences in Central Tokyo, Japan, features expert speakers, workshops and a lively trade show.

Topics and speakers on the first conference day include:

- Master blending aromatherapeutics based on plant chemistry: Colleen Quinn (Ireland), creator of the LabAroma blending tool, explores chemical families and components
- The effect on the brain and body when essential oils are inhaled:
 Dr Tadaaki Satou (Japan) explains how scientists evaluate the impact of essential oils
- Exploring the benefits of reminiscence evoked by nostalgic smells: Dr Kentaro Oba (Japan), shares his research on the effects of odour perception on the brain
- Supporting children and young people's mental health with

- alternative therapies: Debra McAdam (UK) highlights young people's positive experiences of aromatherapy
- The role of aromatherapy treatment in patients suffering from physical and spiritual pain: Tomomi Nakamura identifies similarities between aromatherapy and Buddhism

On the second day, delegates can choose to participate in three of six interactive workshops led by international experts. Workshop speakers will either be bilingual or an interpreter will be on hand to translate

For full details on speakers, presentations and workshops, and to book, visit https://ifparoma.org/ifparoma-2020/

For those unable to travel to Japan the conference presentations can be viewed live online - see below for details.

Fundraising run



Congratulations to IFPA member Yoko Kijima, who finished the 2019 London Marathon in three hours and 59 minutes. Yoko ran the race in support of the Complementary Therapy Service at London's Royal Free Hospital and was successful in raising the target amount she had set herself.

Online access to conference presentations

Members who cannot attend the IFPA2020 conference in Tokyo can view the conference presentations (but not the workshops) online, in English and Japanese. The presentations can be viewed live as they happen, and will also be available to members during the following two weeks.

To access the IFPA2020 presentations online, go to the conference booking page on the IFPA website (www.ifparoma.org),

select Internet Viewing and choose English or Japanese. Two weeks before the conference you will receive via email a password and instructions for online access to the presentations. After the conference you will receive from the IFPA office a certificate of attendance carrying six CPD points. (Please note that you may not be able to access IFPA2020 online if you live in countries where there are restrictions on YouTube viewing.)

Inhalation aromatherapy improves sleep

Can inhaling a mixture of lavender, bergamot and ylang ylang oils improve sleep? A trial with 42 adult patients in a cardiac rehabilitation unit in Texas, USA found that it could. Cotton balls infused with the oil mixture or placebo were placed at subjects' bedsides for five nights. After a washout period,

patients changed intervention for five nights. The results, showing better sleep quality for the aromatherapy group, convinced researchers that aromatherapy can help improve sleep quality in cardiac rehabilitation patients. See www.ncbi.nlm.nih.gov/ pubmed/31556690

Around the regions

Regional groups offer supportive caring and sharing, says Janice Dorn who belongs to a successful London network

he certificates on my wall tell me that I became a qualified aromatherapist in 1994. That's 25 years although it certainly does not seem that long. Clearly, once you find what you really want to do with your life and you are happy in yourself, time just flies!

When I started to consider this article my initial thought was 'why join a support group in the first place?' The answer I gave myself was that, when you qualify, one of the first decisions you have to make is where you are going to work.

If you work in a 'clinic' there will hopefully be colleagues with whom you can 'share' any difficult situations which may arise. However, if you opt for working at home, which many of us do, you are a sole practitioner, and situations may arise in your practice where it is very helpful to have someone to 'bounce' things off.

With this in mind I joined the newly-formed West London Aromatherapy Network (WLAN) in 2003. Based in the Richmond/ Twickenham area, we have members from various disciplines who live and work in this part of town. Although our numbers have fluctuated over the years the original members are

still keeping together, supporting and encouraging each other. So often you notice that just 'sharing' one small piece of information can make a big difference to you and/or your practice.

Over the years we have spent many evenings in each other's homes discussing subjects including how to respond to difficult clients, how to deal with people who are late for appointments, or with clients who do not turn up at all and complain when you ask them to pay for the session.

Discussions and activities

We have also discussed which essential oils are our favourites and, importantly, why, and we often share information about training we have undertaken and hear from members who have shifted their focus. We all benefit from these experiences.

We also organise a variety of outings. Recent examples have included a trip to a lavender farm, a perfume workshop session where we developed our 'noses', a visit to a herbalist in her herb garden, a pomander-making session, a 'pelvic fix' course, a day with an apiarist, a visit to the Chelsea Physic Garden, and a talk on Ancient Maya spiritual traditions.



Yvonne Humphries demonstrates jaw tension release techniques to fellow group members

As members of professional bodies all these activities help to advance our knowledge and earn us valuable CPD points each year. This broadens our experience and ensures that we give the very best of ourselves to our clients, while not forgetting to look after each other and enjoy our practices to the full.

So if you do not currently belong to an IFPA group do consider forming one and enjoy helping and supporting each other to become even better therapists.

GROUP NAME / LOCATION	ORGANISER	TELEPHONE	EMAIL ADDRESS
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Atlas cedarwood: Exploring alternatives

Kelly Ablard highlights the threat to Atlas cedarwood essential oil and suggests alternative oils with the same therapeutic properties that can be sourced from less threatened essential oil-bearing plants.



he majority of essential oilbased literature published prior to 2013 includes a profile on Atlas cedarwood (*Cedrus* atlantica G. Manetti) essential oil. The conservation status of Atlas cedar (*C.* atlantica) is never noted in these profiles because there was no conservation

status for this species until 1998, when it was categorised by the International Union for Conservation of Nature (IUCN) as a species of Least Concern, meaning the risk of its extinction was low (IUCN, 2017).

Unfortunately, in 2013, just 15 years later, new data revealed that it is endangered (Thomas, 2013; IUCN, 2017). A species is deemed endangered when natural population numbers decrease ≥50 per cent over 10 years or three generations, assessments of wild and mature adults total less than 2500 and the numbers are declining, and there is a 20 per cent probability of its extinction within 20 years or five generations (IUCN, 2017).

To the best of my knowledge, much of the essential oil-based literature published after 2014 still includes a profile on Atlas cedarwood (*C. atlantica*). However, it is rarely acknowledged that Atlas cedar (*C. atlantica*) is now facing the threat of extinction. If it is mentioned, suggestions of essential oils which could be used in lieu of Atlas cedarwood (*C. atlantica*), that are not sourced from a threatened plant(s) and that have similar therapeutic properties and/or chemical compositions, are not made.

Consequently, to explore alternatives to Atlas cedarwood (*C. atlantica*) essential oil which meet these criteria, this article highlights differences and similarities among the conservation statuses, chemical profiles, physical-therapeutic properties, and contraindications/ hazards of eight cedars and their wood/leaf essential oils.

The eight cedars are: **Atlas cedar** (*C. atlantica*); **Himalayan cedar** (*C. deodara* Roxb. Ex D. Don; **Port Orford cedar** (*Chamaecyparis lawsoniana* (Andr. Murray) Parl.); **Chinese cedar** (*C. funebris* (Endl.) Franco); **Texas cedar** (*Juniperus ashei* [syn. mexicana] Buchholz); **Virginian**

cedar (*J. virginiana*); Western red cedar (*Thuja plicata* Donn); and Eastern white cedar (*T. occidentalis* L.).

When it comes to cedar, Latin names are key to quickly and correctly differentiating between them. This is because, unlike a Latin name, there are multiple common names per cedar which are easy to confuse with common names of different cedar species. For example, Virginian cedar is also known as red cedar and eastern red cedar, Thuja is also known as eastern white cedar, and Pacific thuja is also known as western red cedar, yet their Latin names are simply *J. virginiana*, *T. occidentalis*, and *T. plicata*, respectively (see Table 1 below).

Table 1: The Latin name and cedar trees. Common names throughout this article. © Dr	in bold text are the ones used
Latin name	Common names
Cedrus atlantica	Atlas cedar; Atlantic cedar; Moroccan cedar; Lebanon cedar
Cedrus deodara	Himalayan cedar; Deodar cedar
Chamaecyparis lawsoniana	Port Orford cedar; Rose of cedar; Oregon cedar; Lawson's cypress; ginger pine; Port-Orford white cedar; Port-Orford cypress
Chamaecyparis funebris	Chinese cedar; Chinese weeping cypress; Chinese swamp cypress; mourning cypress
Juniperus virginiana	Virginian cedar; Red cedar; eastern red cedar; Virginian juniper; eastern juniper; red juniper; pencil cedar; aromatic cedar
Juniperus ashei	Texas cedar; Mexican cedar; ashe juniper; Ozark white cedar; Mexican juniper; mountain cedar; post cedar; rock cedar
Thuja plicata	Western red cedar; Pacific thuja; canoe cedar; giant cedar; giant arbor-vitae; Pacific red cedar; shinglewood; western arborvitae
Thuja occidentalis	Eastern white cedar; Thuja; arbor-vitae; cedar leaf; white cedar; eastern arborvitae; swamp cedar

Conservation statuses (IUCN, 2017)

Atlas cedar (*C. atlantica*) is distributed in Morocco and Algeria, and is categorised as 'Endangered' as a result of increased exploitation over the last 60 years or so, in part for its essential oil (see Table 2 below). Unfortunately, drought, overgrazing, fire, pests, and diseases have exacerbated this serious problem (as cited in IUCN, 2017). Essential oils sourced from threatened species should be avoided unless you are certain they are ethically sourced and legally traded.

Port Orford cedar (*C. lawsoniana*) is distributed along the west coast of California and Oregon, and is categorised as 'Near Threatened' (see Table 2). Near Threatened species are close to being classified as a threatened species if not for ongoing conservation programmes. Port Orford cedarwood has fluctuated in demand throughout the USA and Japan for nearly a century. It is used for constructing many things such as houses, furniture, boats, airplanes, silos, and toys. Japan prefers the wood for their homes and temples as a substitute to their native and also near-threatened hinoki (*C. obtusa*) tree (cited in IUCN, 2017). Essential oils sourced from Near Threatened species should be avoided if possible.

Five of these species are classified as 'Least Concern' (Table 2). They are 1) Himalayan cedar (*C. deodara*), distributed in Afghanistan, Pakistan, China, Kashmir, and Nepal; 2) Texas cedar (*J. ashei*), distributed in central USA and Mexico; 3) Virginian cedar (*J. virginiana*), distributed in central and eastern USA; 4) Western red cedar (*T. plicata*), distributed in western USA and Canada; and 5) Eastern white cedar (*T. occidentalis*) distributed in eastern USA and Canada. Species that are categorised by the IUCN as Least Concern have a very low risk of extinction, but should still be sustainably managed. Speaking from a conservation standpoint, I recommend using oils and extracts from these plants whenever possible.

Chinese cedar (*C. funebris*), distributed in southwestern and central China, is categorised as 'Not Evaluated' (Table 2). Not Evaluated means that these species have not yet been evaluated against the IUCN criteria. Caution should be taken when purchasing essential oils sourced from this species until an assessment on population numbers has been accepted by the IUCN.

And finally, although adulteration of essential oils from threatened plants is common, most cedarwood oils are adulterated, regardless of their conservation status. This is because of their similar chemical profiles and low cost to acquire. Adulteration is rarely done with synthetic oils, but rather with a blend of multiple cedarwood/leaf oils (Lis-Balchin, 2006). For example, Virginian cedarwood (*J. virginiana*) and Texas cedarwood (*J. ashei*) essential oils may be adulterated with the addition of Chinese cedarwood (*C. funebris*) oil (Tisserand & Young, 2014).

Family Pinaceae

Two of the eight species listed in Table 2 belong to the family Pinaceae: Atlas cedar (*C. atlantica*) (see image below), and Himalayan cedar (*C. deodara*) (see image opposite). Interestingly, the genus name *Cedrus* is derived from the word 'kedron', which translates to 'power' in Arabic (Mojay, 1997). The genus name, Mojay explains, is in alignment with the fortifying and strengthening properties of these essential oils.

Atlas cedar (*Cedrus atlantica* G. Manetti): Atlas cedarwood (*C. atlantica*) essential oil is steam or hydro distilled from wood chips, preferably from the heartwood. Key chemical constituents include β-Himachalene, α-Himachalene, (E)-α-Atlantone, and γ-Himachalene (Aberchane & Fechtal, 2004) (see Table 3 page 12); the himachalenes and their derivatives are heavily sought after by the pharmaceutical and perfume industries.

Further, *C. atlantica* essential oil has insecticide properties, and many therapeutic properties such as: antiseptic, antiseborrheic, astringent, antiacne, diuretic, lipolytic, pectoral, restorative, tonic, decongestant,



Atlas cedar (Cedrus atlantica)

Table 2: Cedar common name, family, genus, and conservation status (ie Endangered, Near Threatened, Least Cond	ern, and Not
Evaluated) of eight cedar trees. An (x) in red indicates a recommendation to avoid purchasing its essential oil. © D	r Kelly Ablard

Cedar	Family	Genus	Endangered	Near Threatened	Least concern	Not evaluated
Atlas	Pinaceae	Cedrus	Х			
Himalayan	Pinaceae	Cedrus			Х	
Port Orford	Cupressaceae	Chamaecyparis		X		
Chinese	Cupressaceae	Chamaecyparis				X
Texas	Cupressaceae	Juniperus			Х	
Virginian	Cupressaceae	Juniperus			Х	
Western red	Cupressaceae	Thuja			Х	
Eastern white	Cupressaceae	Thuja			Х	



Himalayan cedar (Cedrus deodara Roxb. Ex D. Don)

depurative, expectorant, sedative, antibacterial, antiinflammatory, antifungal, and anticatarrhal (see Table 4 page 13) (Mojay, 1997; von Marksfeld-Fuhrherr, 2004; Gray, 2006; Lis-Balchin, 2006; Farrer-Halls 2009; Guba, 2012; Price et al, 2012; Martins et al, 2015; Worwood, 2016; Orchard & van Vuuren, 2017). Contraindications and hazards: none (Tisserand & Young, 2014).

Himalayan cedarwood (*C. deodara***)** essential oil is steam distilled from the wood. Similar to *C. atlantica* essential oil, its key chemical constituents are β-Himachalene, α-Himachalene, and γ-Himachalene (Gupta *et al* (2011); as cited in Tisserand & Young, 2014, p238) (see Table 3 page 12).

However, amounts of the same key constituents vary between reports by Gupta *et al*, and Lawrence; this variation could be because of climate and soil conditions, and/or the distillation method, which are known to affect the chemical composition of its close relative *C. atlantica* (Aberchane & Fechtal, 2004).

Himachalenes and atlantones are the major constituents likely linked to its insecticide properties which are active against the termite (*Odontotermes obesus*) (Chaudhar *et al*, 2011; Gupta *et al*, 2011). Therefore, one could posit that these constituents also play a role in the insecticide properties of *C. atlantica* essential oil.

Also similar to *C. atlantica* essential oil, *C. deodara* has grounding properties (Mojay, 1997; Price *et al*, 2012). Contraindications and hazards: none and mildly toxic, respectively (Tisserand & Young, 2014).

Family Cupressaceae

Six of the eight species listed in Table 2 belong to the family Cupressaceae including Port Orford cedar (*Chamaecyparis lawsoniana* (Andr. Murray) Parl.) (see image above), Chinese cedar (*C. funebris* (Endl.) Franco), Texas cedar (*Juniperus ashei* Buchholz), and Virginian cedar (*J. virginiana*) (see image page 13).



Port Orford cedar (Chamaecyparis lawsoniana)

The genus *Juniperus*, has approximately 68 species worldwide, of which many are recognised for their medicinal properties, but only two species *J. ashei* and *J. virginiana* are the primary sources of cedarwood essential oil for North America (Adams *et al*, 1988; Tumen *et al*, 2013). In addition to therapeutic value, their essential oils have strong repellent and larvicidal properties known to affect many mosquito species (Giatropoulos *et al*, 2013).

Port Orford cedar (Chamaecyparis lawsoniana (Andr. Murray) Parl.): Port Orford cedarwood (*C. lawsoniana*) essential oil is steam distilled from the wood. Key chemical constituents are α-Terpineol, δ-Cadinene, α-pinene, Camphor, and α-Fenchol (as cited in Tisserand & Young, 2014, p239) (see Table 3 page 12). It is active against the mosquito *Aedes aegypti* (L.), and against the Asian tiger mosquito (*A. albopictus*), which has been coined one of the most invasive mosquito species in the world because it is a vector of 22 arboviruses including Dengue virus (Dolan *et al*, 2007; Enserink, 2008; Giatropoulos *et al*, 2012). Interestingly, essential oil extracts from the cones inhibit the growth of the fungi *Aspergillus niger* and *Trichoderma* spp (Sivrikaya *et al*, 2014). Contraindications and hazards:

Chinese cedar (Chamaecyparis funebris (Endl.)

none (Tisserand & Young, 2014).

Franco): Chinese cedarwood (*C. funebris*) essential oil is steam distilled from the wood. Key chemical constituents are Iso-α-cedrene, Thujopsene, Cedrenol, Cuparene, and Longifolene (as cited in Tisserand and Young, 2014, p. 238) (Table 3). Contradictory to Adam's findings, (1991) Chinese cedarwood (*C. funebris*) oil is not almost identical in composition to the essential oils of Virginia cedarwood (*J. virginiana*) and Texas cedarwood (*J. ashei*) (Table 3 page 12). Contraindications and hazards: none (Tisserand & Young, 2014).

Texas cedar (*Juniperus ashei* **Buchholz):** Texas cedarwood (*J. ashei*) essential oil is steam distilled from the wood. Key chemical constituents are Thujopsene, α -Cedrene, Cedrol, and β -cedrene (as cited in Tisserand & Young, 2014, p239) (see Table 3 page 12). Texas cedarwood (J. ashei) oil is frequently used in perfumery and has many therapeutic properties. Its antibacterial properties inhibit Gram-positive and Gram-negative strains. Additional properties include antifungal, astringent, emmenagogue,

Table 3: Percentages of key chemical constituents of each cedarwood/leaf essential oil. Although all chemical constituents play an important role in the activity of the oil, only those ≥ 2 per cent were included, with exceptions made to highlight further similarities between chemical profiles. The essential oil source is denoted within () under the common name of each cedar. Constituents highlighted in green are cedars in family Pinaceae, and those in orange are in family Cupressaceae.
¹Gupta et al, 2011. © Dr Kelly Ablard

Chemical constituent	Atlas (Wood)	Himalayan (Wood)	Port Orford (Wood)	Chinese (Wood)	Texas (Wood)	Virginian (Wood)	Western red (Needles)	Eastern white (Needles/ branches)
β-Himachalene	30.8-40.4	8.0-13.0 1(43.9)			1.1-1.4	2.1		-
α-Himachalene	10.3-16.4	20.0-30.0 ¹(16.9)						
(E)-α-Atlantone	5.2-13.4	5.0-7.0						
γ-Himachalene	6.7-9.7	¹ (11.3)						
Deodarone	1.2-6.7	4.0-6.0						
lso-α-cedrene				32				
Thujopsene				21.6	25.0-46.8	21.3-23.4		
Cedrenol				6.1				
Cuparene				4.9				
Longifolene				4.2				
α-Cedrene		12.0-16.0		2.1	22.6-30.7	21.1-38.0		
α-Terpineol			14.3					
δ-Cadinene	0.5-2.6		8.2					
α -pinene			6.5				0.5-2.9	
Camphor			5.9					2.2-2.5
α -Fenchol			5.5					
Cedrol					12.2-19.1	12.3-22.2		
β-cedrene					5.5	8.2-9.2		
α -Cadinol			5.3					
(E)-γ-Atlantone	1.2-3.9							
Himachalol	1.7-3.7							
Isocedranol	1.2-3.1							
(Z)-α-Atlantone	1.0-2.8	2.0-3.0						
1- <i>epi</i> -Cubenol	1.1-2.5							
(Z)-trans-α- Bergamotol	0-2.0							
Fenchone			4.7					12.2-12.8
α-Muurolene			4.2					
T-Cadinol			3.4					
β-Terpineol			3.3					
(+)-Limonene			2.7					
T-Muurolol			2.7					
Citronellol			2.3					
α-Selinene					0-1.5	3		
Widdrol					1.1-1.6	1.9-2.3		
α-Thujone							63.5-84.0	48.7-51.5
β-Thujone							4.9-15.2	7.9-9.9
Sabinene							1.1-8.8	1.8-4.4
Bornyl acetate								2.3-3.2
Terpinen-4-ol							1.4-4.6	1.5-2.5
β-Myrcene							0.5-3.3	1.8-2.1
Geranyl acetate							0.1-3.9	
Rimuene							0.1-2.6	
γ-Terpinene							0.3-2.0	

Table 4: Most common therapeutic properties for Atlas cedarwood, Virginian cedarwood and Texas cedarwood essential oils. 'X' indicates properties are present. Red font indicates an endangered species. © Dr Kelly Ablard

Cedarwood					
Therapeutic properties	Atlas	Texas	Virginian		
Antiacne	Х		X		
Antibacterial	Х	Х	X		
Anticatarrhal	Х		X		
Antifungal	Х	Х	X		
Antiinflammatory	Х				
Antiseborrheic	Х		X		
Antiseptic	Х		X		
Astringent	Х	Х	×		
Depurative	Х		×		
Diuretic	Х		×		
Emmenagogue		Х	X		
Expectorant	Х	Х	×		
Lipolytic	Х		X		
Decongestant	Х		X		
Pectoral	Х		X		
Restorative	Х				
Sedative	Х		×		
Tonic	Х		×		
Additional properties					
Insecticide	Х	Х	Х		

and expectorant (von Marksfeld-Fuhrherr, 2004; Lis-Balchin, 2006; Wanner et al, 2010) (Table 4).

Virginian cedar (Juniperus virginiana): Virginian cedarwood (*J. virginiana*) essential oil is steam distilled from the wood. Key chemical constituents are the same as those found in Texas cedarwood (*J. ashei*) essential oil which are Thujopsene, α -Cedrene, Cedrol, and β -cedrene (as cited in Tisserand & Young, 2014, p240) (see Table 3).

Although Virginian cedarwood (*J. virginiana*) and Texas cedarwood (*J. ashei*) oil have many of the same therapeutic properties, literature shows that Virginian

cedarwood (*J. virginiana*) oil shares more therapeutic properties with Atlas cedarwood (*C. atlantica*) than with Texan cedarwood (*J. ashei*) essential oil. Said properties are antiseptic, antiseborrheic, astringent, decongestant, antiacne, diuretic, lipolytic, pectoral, tonic, depurative, expectorant, sedative, antibacterial, and anticatarrhal (see Table 4) (Mojay, 1997; Bowles, 2003; von Marksfeld-Fuhrherr, 2004; Gray, 2006; Lis-Balchin, 2006; Farrer-Halls 2009; Guba, 2012; Price *et al*, 2012; Martins *et al*, 2015; Worwood, 2016; Orchard & van Vuuren 2017).

Further, compared to Virginian cedarwood (*J. virginiana*), Texas cedarwood (*J. ashei*), Himalayan cedarwood (*C. deodara*), and Atlas cedarwood (*C. atlantica*) essential oils also have insecticide properties (Gawde, 2009) (Table 4). Contraindications and hazards: none (Tisserand & Young, 2014).

None of the cedars should be confused with the remaining two species in this family – Western cedar (*Thuja plicata*) and Eastern white cedar (*T. occidentalis*). Although the essential oils from these cedars are incredibly therapeutic and have multiple applications, they are used with caution in aromatherapy. This is because, if they are not used properly, they may have a neurotoxic effect, caused by the chemical constituent thujone (Lis-Balchin, 2006; Tisserand & Young, 2014). Please refer to (Tisserand & Young, 2014) for dermal use levels and additional safety advice when using these therapeutic oils.

Thujone is a common name for two naturally occurring monoterpene diastereomeric ketones (-)- α -thujone and (+)- β -thujone. Although *T. plicata* and *T. occidentalis* essential oils are rarely used by certified aromatherapy practitioners, (Price *et al*, 2012), they are frequently utilised and studied by other professionals including medical doctors, nurses, pharmacists, naturopaths, herbalists, chemists, and biologists.

Further, they are included in this article to reiterate the importance of relying on Latin names for cedarwood/ leaf identification, as some of their common names can be misleading and confusing. And it never hurts to stress the potential side-effects of thujone, even though they are well documented, in both medical and historical contexts. >



Virginian cedar (Juniperus virginiana)



Western red cedar (Thuja plicata)





Used cautiously in aromatherapy are two cedars containing thujone. Thujone is present in absinthe (aka the Green Fairy, see left), a hazardous drink popular with early 20th-century artists and writers such as Toulouse-Lautrec (right)

For example, thujone is the chemical in the spirit absinthe, notable for its toxic, and potential psychoactive and hallucinogenic effects. Absinthe, also known as the Green Fairy (see left above) was the popular drink of choice among many of the artists and writers of the early 20th century. Pablo Picasso, Vincent van Gogh, Henri de Toulouse-Lautrec (shown right above), Edgar Allen Poe, and Marcel Proust were some of the Green Fairy's addicted admirers and, unfortunately, are believed to have suffered greatly as a result.

Western red cedar (*Thuja plicata*): Western red cedarleaf (*T. plicata*) (see image p. 13) essential oil is steam distilled from its needles. Key chemical constituents are α -Thujone, β -Thujone, Sabinene, and Terpinen-4-ol (as cited in Tisserand and Young, 2014, p468) (Table 3). The essential oil is active against Gram-(-)-bacterium *Proteus vulgaris* and Gram-(-)-bacterium *Pseudomonas aeruginosa* (Jirovetz *et al*, 2006). Contraindications (all routes): pregnancy, breastfeeding, and should not be taken orally. Hazards: "Expected to be neurotoxic based on thujone content" (Tisserand & Young, 2014).

Eastern white cedar (*Thuja occidentalis***):** Eastern white cedarleaf/wood (*T. occidentalis*) essential oil is steam distilled from its needles and branches. Key chemical constituents of the leaf (needle) oil are Fenchone, α -Thujone, β -Thujone, and Sabinene (as cited in Tisserand & Young, 2014, p448) (see Table 3).

Like *T. plicata, T. occidentalis* has antibacterial properties; it is active against Gram-(+)-bacterium *Staphyllococcus aureus* and bacterium *Enterococcus faecalis*. It also strongly inhibits *Agrobacterium tumefaciens* and *Erwinia carotovora* var. *carotovora*, and is mildly active against the fungus *Fusarium solani* (Badawy & Abdelgaleil, 2014). Extracts are reported to increase circulation, stimulate hormone, enzyme, and

gastric secretions, and to affect parasites (Cummings *et al*, 1991). There is also evidence that it can be used for the treatment of polycystic ovary syndrome (POS) (Akkol *et al*, 2015). Contraindications (all routes): pregnancy, breastfeeding, and should not be taken orally. Hazards: Neurotoxicity

EXPLORING ALTERNATIVES

Although the essential oil of Himalayan cedar (*C. deodara*) is chemically more similar to Atlas cedar (*C. atlantica*) than to Virginian cedar (*J. virginiana*) or to Texas cedar (*J. ashei*), Virginian cedarwood (*J. virginiana*) essential oil is reported to have numerous, and Texas cedarwood oil to a lesser amount, therapeutic properties that mirror those of Atlas cedarwood (*C. atlantica*) essential oil.

Further, therapeutic uses of Virginian cedarwood (*J. virginiana*) and Atlas cedarwood (*C. atlantica*) essential oils are uniquely similar. Consequently, Virginian cedarwood (*J. virginiana*) essential oil would be a candidate alternative to Atlas cedarwood (*C. atlantica*) essential oil. Texas cedarwood (*J. ashei*) essential oil might also be worth further exploring given its similar chemical composition to Virginian cedarwood (*J. virginiana*) essential oil.

Using Virginian cedarwood (*J. virginiana*) essential oil in lieu of Atlas cedarwood (*C. atlantica*) oil would likely support healing in a similar way, positively impact the preservation and protection of Atlas cedar (*C. atlantica*), and help to control the Virginian cedar (*J. virginiana*) population numbers. According to Tumen *et al* (2013) Virginian cedar (*J. virginiana*) [and Texas (*J. ashei*)] cedar are so abundant, they are considered pest species, which is one reason the IUCN has categorised them as 'Least Concern'. An additional benefit is that, also similar to Atlas cedarwood (*C. atlantica*) essential oil, both Virginian cedarwood (*J. virginiana*) and Texan cedarwood (*J. ashei*) essential oils have no contraindications or hazards.

And from a chemical, rather than a therapeutic standpoint, Himalayan cedarwood (C. deodara) essential oil could be a promising alternative to Atlas cedarwood (C. atlantica) essential oil. These essential oils are significantly and similarly unique in their chemical composition compared to cedars in the family Cupressaceae. This is predominantly because of the himachalenes and atlantones (ie β -Himachalene, α -Himachalene, γ -Himachalene, and (E)- α -Atlantone), which likely are linked to insecticide properties. However, more research is needed on the therapeutic and non-therapeutic properties of Himalayan cedarwood (C. deodara). Further, Himalayan cedar (C. deodara) is classified as 'Least Concern'.

If Viriginian cedarwood (*J. virginiana*), Texas cedarwood (*J. ashei*), and/or Himalayan cedarwood (*C. deodara*) essential oils are not ideal alternatives to Atlas cedarwood (*C. atlantica*) essential oils for you to explore, there are plenty of other essential oils with the same therapeutic properties, therapeutic uses, and maybe similar chemical profiles, that are sourced from non-threatened or non-near threatened essential oil-bearing plants.

Alternatives to Port Orford cedarwood (*Chamaecyparis lawsoniana*) and Chinese cedarwood (*C. funebris*) essential oils are still being investigated. This is because there is only a modicum of research and literature available on the therapeutic properties and uses of these essential oils, which is likely one reason they are not used as frequently in aromatherapy. Regardless, it is important to be aware of their conservation statuses, which are Near Threatened (Port Orford cedar), and Not Evaluated (Chinese cedar). Purchasing these essential oils should be avoided if possible.

I encourage you to share, and integrate into literature, presentations, and curricula, this information as one way to bring awareness to the conservation status of Atlas cedar (*C. atlantica*). Contributions of this nature will help to protect and preserve this endangered species. And if you choose to continue to use Atlas cedarwood (*C. atlantica*) essential oil, please do so responsibly by ensuring that your oil is ethically sourced, but do keep in mind that there is always a 'greener' alternative.

Prayer of the woods (author unknown): "I am the heart of your hearth on the cold winter nights, the friendly shade screening you from the summer sun, and my fruits are refreshing draughts quenching your thirst as you journey on. I am the beam that holds your house, the board of your table, the bed on which you lie, and the timber that builds your boat. I am the handle of your hoe, the door of your homestead, the wood of your cradle, and the shell of your coffin. I am the bread of kindness and the flower of beauty. Ye who pass by, listen to my prayer: Harm me not."

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Kelly currently conducts research in Peru with the Shipibo and Quechua Indigenous peoples into their near-threatened and threatened aromatic medicinal plants. She served a decade on the Board of the British Columbia Alliance of Aromatherapy, and currently serves on the Board of the United Plant Savers, is Co-Chair of the International Committee on Sustainability of Aromatic Plants used in Aromatherapy and Natural Perfumery, and is co-owner of Essence of Thyme College of Holistic Studies. See Facebook:@theairmidinstitute; www.kellyablard.com

Look after yourself

How many aromatherapists take the time to care for themselves? Caren Benstead suggests ways to protect your own emotional and physical health as well as caring for your clients



e lead such busy lives racing from one meeting to another, to a school pickup, then to a longscheduled date with friends, or perhaps to do some ironing. And it all starts again the next morning!

As a business owner, the list of tasks

is endless and in addition to everything else - marketing manager, accounts department, secretary and cleaner - you know there's always something else. It becomes so easy to rush out of bed in the morning and drop everything to tackle the growing to-do list without making time for your mind and body to register that it is a new day. In this scramble we often don't make opportunities to clarify what it is we'd like to achieve this day, this week, this month.

We live in a time of ever-increasing demands: our clients have access to us 24 hours a day, seven days a week by telephone, email and social media. No longer is our work confined to the hours of 9am and 5pm. Our treatment rooms are an oasis for our clients during those hours and we go to great lengths to make them so. But the reality is that, when those happy clients are homeward bound the therapist becomes the administrator, the social media expert, the accounts clerk, the cleaner, and the laundry manager!

However, all these 'hats' ensure that our clients refer us to their friends, our accountants don't charge us through the roof for hours of bookkeeping, we don't need to employ an assistant, and we can guarantee our businesses continue to flourish and sustain us. But how do we make time to care for ourselves?

Our emotional and physical health is reliant on the way we care for ourselves, and our ability to cope with the daily demands of business ownership is dependent on our emotional and physical health. In this article I would like to invite you to consider whether we can manage the start of our day better, before we become someone's parent, therapist, spouse, mother, child or mentor.

Get out of bed

It is so tempting to stay nestled beneath the covers, especially as the mornings become darker. Do you hit that snooze button, three, four, five times to squeeze in just one more warm, cosy moment?

Sacrificing that cosy moment to get out of bed to carry out a self-care routine will be difficult, but it may also halt that flustered, panic-stricken feeling when you're assessing that to-do list.

Set the alarm 30 minutes or an hour earlier than you usually would and make sure the alarm is out of your reach so that you have to get out of bed and be on your feet to stop the intrusion.

For this routine to be effective, it needs to be filled with things that you look forward to - do you have a favourite morning drink? Do you like movement? Do you like to be still? Do you like to listen, read or watch?

Your plan is going to be unique to you, so what would constitute your perfect morning?

The smell of freshly ground coffee, a TED talk (see www.ted.com/talks) and a Youtube yoga class, or a walk outside and silent meditation?

Setting that alarm a little earlier and hauling yourself out of bed as soon as it peeps will take some getting used to but establishing a morning self-care routine is the start of a successful and productive day. If you stick with it, I guarantee you'll become fiercely protective of this time.

Awaken the body

Whatever you decide to do, exercise should be a vital part of your morning routine. It will release any buildup of lactic acid accumulated in the body overnight, and encourage a regular breathing pattern that will calm the nervous system. This will combat any stress or anxiety that may be knocking at your door waiting to take up room in your day.

Some of us like to bounce out of bed, throw on our workout clothes and head out for the nearest gym or go for a run before the day's responsibilities invade. Others choose to pull out a mat and set off for a Pilates class or start a yoga practice.

Perhaps you like to pop the coffee machine on, unload the dishwasher, load the washing machine while you wait, and then walk the dog to get some fresh air and enjoy the world before it's filled with people rushing through their to-do lists.





Make exercise part of your morning routine. Go to the gym, take a Pilates class or just walk the dog - whatever you enjoy

It is entirely up to you; the aim is to create a morning self-care routine that tells the body it's morning and allows the brain to calmly begin calculating the most efficient ways of completing the day's tasks.

Harness the mind

Once the body is awake and the brain is firing off excellence in every direction, we need to give it guidance and focus.

"We are what we repeatedly do. Excellence, then, is not an act, but a habit."

Aristotle

Meditation is one of the most effective ways to direct the immense power of our minds – take a few moments to go through a guided breathing meditation before the ideas and thoughts of the day take hold.

Perhaps you could add a writing exercise – scribble everything down and then work through the list, picking out things you can achieve or would like to tackle during that one day.

Visualisation is a practice often adopted to help us 'see' our day pan out. Motivational speaker Jack Canfield, co-author of the *Chicken Soup for the Soul* series, suggests that it takes 10 minutes a day to "harness the power of your subconscious mind. It is very straightforward - you just need to find a quiet space and imagine yourself going about your day, imagine each task completed, don't worry too much about the steps to getting them completed as your wonderful mind will handle that bit but specifically think about how you feel, calm, serene and productive."

Health experts report that positive thinking can improve our health and manage stress; if you're feeling crafty, you could create affirmations that help ease you

into your day, this is great way of 'speaking' positively to your mind. There are many affirmations available online – have a look at Pinterest or affirmation flash cards on Amazon - do some research and find affirmations that resonate with you before you make time to read them out or digest them.

As a practising aromatherapist, it would be a great pity to establish a self-care routine without including your precious essential oils. Why not spoil yourself with a newly-blended synergy of oils to support this new habit of caring for you. You could put the oil in a diffuser while you meditate quietly, wear it as you write your to-do list or, if you make the time, start the day with an indulgent salt-infused bath!

Avoid the screen

We use our phones as alarms, to listen to podcasts, guided meditations, or TED talks and to watch YouTube movement classes or seek out affirmations. But scrolling through your emails, social media platforms and Trello boards will not add to a self-care routine.

So, ideally, wherever possible, avoid the screen – if you are going to use it to support your self-care routine, try to prepare the clips in advance, download the images and message them to yourself but avoid scrolling and making choices before you've cared for yourself.

Daily self-care benefits

Following a daily routine can help you identify your priorities, limit procrastination, help you to set and track goals and, importantly, improve your emotional and physical health. As American entrepreneur, author and motivational speaker Jim Rohn once said: "Either you run the day or the day runs you."

Caren Benstead is Principal of The Well School of Aromatherapy and founder of the Well Retreat, a wellbeing studio on the Oxfordshire/Northamptonshire border. She currently serves on the IFPA Board.

Going with the flow

Louise Crockart highlights an ancient healing tradition that can help improve digestive health and fertility, and explains how to flow it into our modern lives



he term Maya refers to both a modern-day people who can be found all over the world, and to their ancestors who built an ancient civilization stretching throughout much of Central America. Over centuries, the Maya have continuously inhabited a vast area from modern-day Yucatan, Tabasco and Quintana Roo in Mexico, to

Guatemala, Belize, El Salvador and Honduras. Their highly sophisticated culture has long practised a healing tradition that encompasses massage, healing and herbs.

This vibrant and ancient tradition acknowledges that it is impossible to separate the physical and the emotional. The Maya understand that, by addressing the health of the abdomen, you are physically supporting general circulation, digestion, reproductive organs and sexual function. I think you will agree that these cover most of our related emotional issues too.

We know that vital life force circulates through the human body using five channels of flow - arteries, veins, lymph, nerves and energy. The integrated flow of these forces is called *homeostasis* or *balance within*. Our bodies are created to be self-regulating, self-healing and self-repairing. However, this active state of health is dependent upon the unobstructed, unrestricted flow of these five essential channels. When blocked or restricted, the result can be inflammation, pain or disease.

Ancient healing and Western medicine

Arvigo[®] therapy is an effective combination of ancient Maya folk healing traditions and modern Western medical understanding. It was created by Chicago-born herbalist and naprapath (similar to an osteopath) Dr Rosita Arvigo after she met and was apprenticed to Don Elijio Panti, an important Maya *shaman* in Belize, Central America in the early 1980s.

At that time the use of traditional folk healing in Belize was declining, with few people interested in learning the traditional ways. Panti, then already in his 80s, had finally accepted that he could not find an apprentice when a chance meeting brought these two inspirational people together.

At first Panti was reluctant to teach Dr Arvigo since she was a *gringa* (a foreign woman). However, she proved





Above: Rosita Arvigo with her mentor Don Elijio Panti Below: Don Elijio with a client in his community

her dedication by spending a year joining him on daylong treks deep into the Belizean rainforest to help him collect and prepare medicinal herbs. After that year Panti had a dream-vision telling him he had finally found the apprentice he had been looking for.

Dr Arvigo spent the next 13 years, until Panti's death, learning by his side, observing and assisting with his treatments and spiritual ceremonies as well as learning to identify, collect and prepare sacred traditional herbal medicines. Don Elijio Panti was eager for this ancient form of healing from his ancestors not be lost, so his dying wish was for Dr Arvigo to dedicate her life, as he had devoted his, to be the healer to his community and to pass on these healing traditions for future generations.

During this time Dr Arvigo also worked alongside traditional Maya midwives learning the unbroken ancient Maya traditions of supporting women through pregnancy, childbirth and early motherhood. She blended her western knowledge of the body, its structures and functions with traditional Maya folk medicine, developing them into the Arvigo® techniques of Maya abdominal therapy.

Therapeutic action

Based on the essential premise of good flow, and optimising vital life force, structures and functions with traditional Maya folk medicine, Arvigo[®] therapy is much more than a belly rub. Comprising massage techniques to the diaphragm, abdomen, lower back, hips, sacrum and coccyx, it engages with muscle and fascia, helping to soften, heal and strengthen deeply positioned ligaments that support the digestive tract, pelvic organs and structures.

These techniques stimulate circulation to the diaphragm, all the digestive organs, ovaries, uterus,



Rosita Arvigo and Don Elijio collecting medicinal herbs



Rosita Arvigo teaching Arvigo® techniques to a group of midwives in Guatemala, Central America



The uterus suit (red/white) used in Arvigo[®] training to illustrate how ligaments suspend the uterus/ovaries within the pelvis

prostate, bladder, bowel and pelvic floor muscles. When congested lymph nodes in the groin and solar plexus are stimulated they are able to help move toxins towards the liver, which will expel them.

When the diaphragm is softened, breath is encouraged to be expansive, reducing the stress response and cortisol levels; oxygenated blood can flow freely to supply vital nutrients to pelvic organs efficiently, and the venous return is unimpeded as it smoothly travels back up the body. When all these five channels are flowing there is reduced inflammation and congestion of tissues, helping nerve function and encouraging robust energy flow or, as the Mayans call it, *Chu'lel*.

People seek Arvigo[®] therapy to support issues with, for example, irritable bowel syndrome (IBS), unexplained abdominal pain, poor digestion and elimination, every kind of menstrual pain or irregularity, subfertility, varicose veins, hormonal imbalances, and emotional stress-related conditions.

Don Elijio Panti would often say that "The uterus is the woman's core, if it is out of balance, her whole life is out of balance - physically, emotionally, mentally and spiritually." Centrally located deep within the pelvis, the uterus is suspended by many hammock-like ligaments.

If the uterus becomes displaced, perhaps because of strain or damage to these ligaments (possibly caused by childbirth experiences, accidents, scaring or trauma), then the flow of blood, lymph fluids and nerve impulses may become blocked, leading to poor circulation in the pelvic bowl and legs. These ligaments need to be robust

as it is essential that their support for the uterus enables it to move, accommodating the functions of the colon and bladder as they fill and empty as well supporting her during her menstrual cycle.

A non-menstruating uterus is about the weight and size of an upside down avocado, doubling in size and increasing in weight leading up to menstruation. If the uterus is out of its optimal position, menstrual blood that would normally be released easily during menstruation may pool, causing painful cramping during menstruation as the uterus contorts to empty itself. If left, this blood will sit and harden on the lining of the womb or endometrium until the next menstrual cycle, affecting how clearly the uterus and the brain communicate via hormones known as the brain uterus axis feedback loop.

If this communication breaks down, a whole raft of hormonally-related issues may occur from menstrual disruption, endometriosis, polycystic ovaries and subfertility. An example of the kind of problem that can occur is illustrated by Case Study 1 below.

Case study 1

Sue, a 29-year-old client, had been diagnosed with endometriosis after suffering many years of debilitating menstrual pain which affected every aspect of her life. It impaired her ability to sleep and she regularly had to call in to work sick. Although she had had two laser laparoscopy operations to burn away and break up the adhesions caused by the endometriosis, the relief only lasted six months or so before she felt she was back to square one.

Sue's goal was to have a baby but she was worried that the build-up of endometrial scar tissue and repeated intervention procedures would affect her chances of conception. We agreed a six-month therapy treatment plan, to include monthly Arvigo® treatments, daily self-care abdominal massage, weekly castor oil packs and perineum steams as well as dietary improvements. By the third month, Sue felt rejuvenated and in much less pain. This enabled her to become more active, taking up regular yoga and swimming sessions. By the end of six months she was virtually pain free, had lost two stone, was more active, and she was pregnant.

Men can benefit too

While Arvigo[®] therapy is effective for many pelvic conditions for women of all ages, boys and men can benefit from it too. The prostate, which lies deep within a man's pelvis behind the bladder and in front of the bowel, is essential for creating the nutrient-rich fluid which helps to transport fertile sperm. Energetically, it acts as the male seat of creative energy, similar to the uterus for women.

With much less space in the male pelvis naturally, any reduction in the five channels of flow can quickly lead to congestion, a build-up of toxins, swelling of the prostate, and impeded blood, nerve and urinary function, often leading to impotence. Many lifestyle choices may lead to this disruption such as sitting for long periods in cars, at laptops and screens, tight clothing, lack of/or excessive exercise and poor diet. Case study 2 below illustrates a typical problem.

Case study 2

40-year-old John had a poor sperm count, so low that he had been told he was infertile. This had caused him immense emotional pain and had resulted in the breakdown of his marriage. He was now in a new relationship and, together with his partner, came to see me to find out whether Arvigo® therapy could help them conceive.

Both partners received regular Arvigo® therapy treatments. John was a keen cyclist, cycling to work as well as at weekends, often for three-four hours a day. His diet was good but his alcohol consumption was high. He came for therapy twice a week for two months, then monthly for six sessions. He regularly applied castor oil packs to his sacrum and pelvis and performed his daily self-care massage routine, also implementing some lifestyle and dietary changes. He added padding to his bicycle seat, cut back on the number of hours he cycled each week, and greatly reduced his drinking.

Over the course of six months, John reported that he felt more relaxed, his abdomen and lower back had softened, and his breathing had deepened. He also began to speak of how he had 'buttoned up' his emotions in the past, but felt that he was now able to open up to his partner about his feelings.

He enjoyed his daily self-care routine, stating that it gave him time to tune into how he was feeling, which he had never done before. This had helped him to make healthier life choices and break some unhealthy habits. After six months his sperm count was registered within the normal ranges and 18 months later his partner gave birth to a healthy son with no need for assisted fertility treatments.

Empowerment

One of the major reasons that physical and emotional symptoms respond so well with this work is that a great emphasis is placed on empowerment through education. During the initial Arvigo® therapy treatment, clients will be taught about the five systems of flow and how these may become restricted. Through this new understanding of their body they are supported in making healthier choices in their lives, and taught how to perform daily self-care Arvigo® techniques of abdominal massage.

The self-care techniques are like a form of moving meditation, encompassing breath and massage techniques, allowing an opportunity to check in with how an individual's body is responding to situations and events. Other supportive modalities that may also be suggested are castor oil packs, perineum steams, nutrition, and lifestyle advice and herbal support where appropriate. Clients are often advised to receive a monthly treatment for three or more months to gain and maintain positive changes. During this time the client is supported as they adopt and adapt to a new way of thinking about their health.

Worldwide practice

For the past three decades Dr Rosita Arvigo has been true to her promise to Panti, making her home in Belize, treating those who come searching for healing at her clinic, and setting up summer bush camps where Belizean children come to reconnect to their heritage by learning their traditional Maya methods of healing.

She developed the foundations of a training programme that has since grown and been developed into the Arvigo Institute, based in New Hampshire, USA. The therapy is now practised across the world from the United States, Australia and Asia to Europe, with over 600 therapists working in many communities and professions such as medical, birthing, herbalists, naturopaths, osteopaths and massage therapists.

For those wishing to embrace this effective healing tool, there is now a comprehensive training programme offering massage training and traditional Maya healing in classes throughout the world. This training will be offered in the UK in early 2020. To find out more about Arvigo[®] therapy and to locate a practitioner and/or training, please visit www.arvigotherapy.com.

Louise Crockart qualified as an aromatherapist with the Tisserand Institute 20 years ago and has continued to develop her skills and knowledge through training with inspirational teachers specialising in women's wellness all over the world. She is passionate about educating and empowering others to support their own healing through her treatments and as an advanced Arvigo®therapy teacher. She runs a busy practice in South West London as well as travelling internationally as a speaker and teacher of Arvigo® Therapy. Louise was a speaker at the IFPA Annual General Meeting and CPD day on 21 September 2019.

A journey of aromatic discovery

On a recent visit to Japan **David Wilson** discovered new essential oils, and a culture that embraces and respects aromatherapy and its practitioners



arlier this year
I had the good
fortune to make
a trip to Japan.
I have travelled to this
wonderful country
several times, but it had
been a decade since my

last visit and over those ten years much had changed in my life. Most importantly, during that decade I had trained and qualified as an aromatherapist.

Arriving in my destination city of Kanazawa on the country's north west coast, I was able to put my essential oil knowledge to the test, while being tantalised with the discovery of new essential oils. Although I did not go to Japan with the intention of seeking out essential oils or looking at aromatherapy in the country, as it turned out, it was as if the oils, aromatherapy clinics and stockists found me.



The Higashi Chaya-gai district of Kanasawa is a beautifully preserved historical area with many traditional wooden buildings

Aromatic revelation

On my first full day in Kanazawa, while waiting for a friend, I wandered around town and stumbled across an essential oil supplier with the most amazingly diverse range of essential oils. My Japanese language skills are rusty, to say the least, but all those years of studying botanical plant names paid off big time! I was able to identify so many oils, and marvel at the slick and stylish Japanese packaging and labelling.

The quality of the oils was first rate as I could tell from inhaling the aromas of familiar Patchouli, Geranium and Frankincense - a few classic oils that I use regularly. However, there was an abundance of oils that I could not place and botanical names that were new to me. Some of the botanical families were familiar but the oils themselves were a new discovery.

Looking around that essential oil supplier, discovered by chance, I was like a kid in a candy store, trying to contain my excitement as I rummaged through the oil selection on offer. I was welcomed there by a very friendly and helpful sales assistant called Konatsu and she was intrigued to find out a) why was I visiting Kanazawa (it was the end of winter and foreign tourists were few and far between) and b) why I was interested in essential oils?

Konatsu's English was really good and we had a discussion about all things essential oil and aromatherapy. But it was not until she introduced me to the Japanese range of essential oils that my curiosity and excitement rose to record levels! The Japanese-specific oils were colour-coded with green packaging, so they stood out amongst the selection within the display. A new world of undiscovered oils opened up to me.



The evergreen Hiba tree (Thujopsis dolabrata) from which a woody, refreshing essential oil is produced

New favourite

I am sure I am not the only therapist in the world who has formed a strong bond with an oil. During my studies I formed strong connections with Sweet marjoram, Clary sage, Tea tree and Cedarwood, for example. But my main muse has always been Vetiver: this is my go-to oil for skin care, anxiety, and for post sports workout massage blends. Just its aroma alone always draws me in.

But, amongst the dozen or so newly discovered Japanese oils one stood out from the rest. Inhaling its strongly woody aroma, reminiscent of Cedarwood, I was immediately addicted. Sorry Vetiver, you have a new contender vying for my attention now! The oil, called Hiba, is a pale yellow liquid that flows easily from the bottle and has a woody, refreshing, forest aroma.

I spent much more time with Konatsu exploring the oils than I had meant to and was embarrassed that I showed up late to meet my friend, Nana. After I told her what I had been doing she giggled, saying she thought it very unusual for a western man to get excited by new essential oil discoveries.

But, after showing her the bottle of Hiba, she told me that she and her family use it at home. They put a few drops onto a warm, wet flannel and put it over their head while relaxing in the bath. The oil warms up from the heat of the flannel and the steam in the bathroom, creating a

lovely relaxing aroma. Then, towards at end of bathing, the flannel is rubbed over the body, extracting the essence of the oil onto the skin. Nana also told me that her family use the oil as an insect repellent via a diffuser to help fend off mosquitos and moths during the steamy, humid spring and summer months in Kanazawa.

Later that evening, back at my Airbnb, I followed Nana's instructions on bathing with Hiba. I diluted half a dozen drops into some soy milk I had in the fridge and added it to the bath. Then I put four drops onto a flannel and began to sink into the warm fragrant bath water. The steam vapours rose up from the bath, producing a calming yet cleansing effect. Woody aroma filled the bathroom. The air felt clean and refreshing, and I was in a state of complete relaxation.

Learning about Hiba

After bathing for longer than usual, I did some online research. I found out that the Hiba tree is a conifer belonging to the cypress family (Cupressaceae). It is native to Japan where it is known both as asunaro and also by its scientific name *Thujopsis dolabrata*. Valued for its aroma and its attractive appearance, Hiba is a popular ornamental tree in gardens and temples across Japan.

A medium to large evergreen, Hiba grows up to 40m high and has a red brown bark and glossy green leaves



Aromatherapy stores throughout Japan sell a wide range of essential oils and aromatherapy products



Hiba essential oil has an energising forest fragrance

arranged in decussate pairs. When fresh, the brown seed cones have a violet-white wax bloom. To produce Hiba essential oil wood chips from the tree are dried and the oil produced through steam extraction from these chips.

I discovered that Hiba essential oil is non-toxic, and non-irritant, as Konatsu had informed me before I tried using it. However, I did find one caution online advising that it should be avoided in pregnancy (Healthy Focus 2018).

One of Hiba's major constituents is hinokitiol (β -thujaplicin), known to have anti-fungal, antibacterial, anti-viral and anti-inflammatory effects. The oil can be safely used diluted in a base oil or cream for the treatment of eczema and psoriasis as well as inflamed musculoskeletal conditions such as arthritis. (Healthy Focus 2018). It has been shown to reduce anxiety and stress too (Matsuura T et al 2014).

I also discovered that research has been undertaken in Japan on using Hiba essential oil with people with cancer. Tests have also been conducted on the oil's potential for use with people with gastric cancer, with results showing its effect in reducing tumours (Nagata T, Fujino Y et al 2016).

A new world of oils

After using the oils for a few nights at my Airbnb, I returned to the shop where Konatsu, knowing that I planned to return to investigate Japanese oils further, had grouped them all together into one section on display, just for me!

My travels to Kanazawa opened my eyes to a world of new oils. After this encounter, everywhere I visited on my travels around Japan I discovered aromatherapy stores selling a wide range of essential oils and aromatherapy products, and in Kyoto and Osaka there were aromatherapy massage clinics. More importantly, in Japan I found a culture that embraces aromatherapy and essential oils openly and the profession is highly regarded. I came back home with a newfound confidence in my profession.

Although I did not set out to discover so much aromatherapy on this trip I think it found me for a reason. Along with Hiba, I purchased other Japanese specialty essential oils and base oils, made new discoveries, and made a new friends along the way.

This experience has opened my eyes to possibilities for a new approach to my travels in the future. I am not only looking at where I might visit next but thinking about whether the country has an aromatherapy culture. Are there special oils grown locally and distilled there? It has added to my love of travelling and also made me a more rounded and enthusiastic aromatherapist.

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IFPAroma2020, Tokyo

The IFPAroma2020 conference, which takes place in Tokyo, Japan on 21-22 March next year, will include a trade show featuring aromatherapy and herb-related products, including local Japanese essential oils. For more information on the conference please turn to page 7.

David Wilson qualified in aromatherapy at Neal's Yard School of Aromatherapy and Clinical Sciences in Covent Garden, London in 2016. On graduating he worked as an aromatherapist and massage therapist on the Isle of Wight and now works in London. He also currently assists with teaching on a wide range of Neal's Yard Remedies' short courses and their diploma course.

Since qualifying in aromatherapy David has trained in Deep Tissue Massage, Massage for Cancer, and qualified as a Restorative Yoga Teacher. He is continually on the lookout for new and exotic oils to incorporate into new blends for his clients.

Research notes

Anticancer activity of essential oils

Over the past 15 years a number of aromatic plant extracts of Greek origin have been studied for their bioactivities, including their antiproliferative potential against different types of cancer. However, no information has been gathered on explicitly Greek species. A recent review summarised existing data on the antiproliferative activity of extracts isolated from Greek aromatic plants and discussed their molecular mode(s) of action, where available, to identify promising extracts for future research and to link chemical constituents responsible for their activity. Free access to full report at www.mdpi.com/2076-3921/8/8/290/htm

Reducing levels of stress

According to a Japanese study, the inhalation of lavender and grapefruit oils can reduce stress by acting on the immune and autonomic nervous systems in healthy volunteers. The participants inhaled the oils at bedtime for six weeks, and changes in the salivary level of secretory immunoglobulin A were measured (s-lgA). The results showed that the aromatherapy intervention significantly increased the salivary s-lgA level. The researchers recommended that further studies be carried out with patients with higher stress levels. Free access to full report at www.ncbi.nlm.nih.gov/pmc/articles/PMC6693249/

Aromatherapy massage for osteoarthritis

According to a recent study, aromatherapy massage can reduce pain, and improve functional status and quality of life for elderly patients with knee osteoarthritis. In the study 90 participants were assigned to groups for aromatherapy, massage, and control. The aromatherapy and massage groups received 15-20 minutes' leg massage twice weekly for three weeks; for the aromatherapy group, ginger and rosemary essential oils were added to the black seed massage oil. The results showed that aromatherapy was effective and had more favourable and longer-lasting effects than massage. See www.ncbi.nlm.nih.gov/pubmed/31144450

Essential oils relieve fatigue

An investigation into the potential of lavender and orange essential oils to reduce fatigue in haemodialysis patients assigned 90 patients to one of three groups: aromatherapy with lavender essential oil, aromatherapy with orange essential oil, or control. In the experimental groups, subjects inhaled five drops of lavender or orange essential oils. Data on fatigue levels before and after the intervention showed statistically significant differences in each experimental group, and the researchers concluded that aromatherapy with lavender or orange essential oils could reduce fatigue in haemodialysis patients. See www. sciencedirect.com/science/article/pii/S1744388118306194

Boxing clever

A study investigated how four recovery methods - static rest, massage, aromatherapy, and acupoint acupressure -

affected levels of fatigue substances and stress hormones in female adolescent boxers after four sparring sessions. After each session they experienced a different recovery method, followed by seven days' rest. All methods significantly decreased lactic acid levels. Aromatherapy and acupoint acupressure reduced creatine phosphokinase levels; massage, aromatherapy and acupoint acupressure reduced lactate dehydrogenase levels; and aromatherapy decreased cortisol and adrenocorticotropic hormone levels. It was concluded that massage and aromatherapy can improve athletes' physical and psychological stabilities and performance. Free access to full report at www.ncbi.nlm. nih.gov/pmc/articles/PMC6509461/

Antispasmodic effects

Antispasmodic drugs used to treat cramping and discomfort affecting smooth muscles of the gastrointestinal, biliary or genitourinary tracts can cause unpleasant side effects. Finding alternatives is therefore a priority for the pharmaceutical industry. A Romanian review recently investigated the antispasmodic effect of essential oils from 39 plant species belonging to 12 families. The data clearly demonstrated the antispasmodic effect of essential oils from the aromatic plant species studied. Free access to the full report and all details at www.ncbi.nlm.nih.gov/pmc/articles/PMC6539827/

Neroli calms anxiety

Can inhalation aromatherapy with *Citrus aurantium* (neroli essential oil) reduce anxiety in acute coronary syndrome (ACS) patients? In a double-blind, placebo-controlled randomised trial, 140 ACS patients were randomly assigned to aroma or placebo groups. Starting two days after hospitalisation, the aroma group inhaled 30 per cent neroli essential oil in paraffin three times daily, while the placebo group inhaled only paraffin. Anxiety rates were measured at baseline and after intervention. The results showed that mean anxiety scores in the two groups were significantly different and the researchers concluded that aromatherapy with neroli was an effective way to reduce anxiety in ACS patients. See www.ncbi.nlm.nih.gov/pubmed/31211612

Anticandidal activity

Italian researchers evaluated the chemical composition/ antimicrobial activity of *Helichrysum microphyllum* subsp. *tyrrhenicum* essential oils, collected in four locations in South-Western Sardinia. Tests using gas chromatography and gas chromatography/mass spectrometry revealed that one oil contained significant neryl acetate content; two further oils contained γ -curcumene; and the fourth oil contained γ -curcumene and linalool but no neryl acetate. The curcumene-rich oils showed anticandidal activity. The results suggest that *Helichrysum microphyllum* subsp. *tyrrhenicumoil* could be a therapeutic alternative to treat *Candida* opportunistic infections. Free access to full report at www.ncbi.nlm.nih.gov/pubmed/31303817

Festival healing

Tempted to take your therapy skills to the great outdoors? **Emma Charlton**, who has worked as an aromatherapist at many summer festivals, shares her enthusiasm for al fresco practice



t's hot. Very hot. My clinic room is a canvas bell tent where the temperature has soared past 30 degrees. Someone outside is shouting "I'm next to a tent which says aromatherapy".

The sounds of throbbing base in the distance filter between melodies from

a folk quartet which has launched into an impromptu gig from a nearby Indian chai stall. A small bundle of my client's grubby clothes lie on the floor, beside a discarded unicorn horn. There's glitter everywhere. Lots of glitter. Suddenly the sun disappears behind a cloud, rain begins to fall and the temperature inside my canvas structure plummets. Where am I? Glastonbury Festival, of course. And I love it!

Working at festivals is not everyone's cup of tea (or pint of real ale, depending on the event). It's a totally different experience to working at a high street clinic or your home treatment room, and thus requires a very different approach.

I've worked as an aromatherapist at festivals for many years, notably the world-famous Glastonbury Festival (known simply as Pilton to regulars and locals) and, more frequently, the much smaller and more intimate Buddhafield Festival, where I helped co-ordinate the healing area for many years. Add that to the occasional smaller festival and many community fairs, it is fair to say that I've chalked up a fair bit of time massaging in fields and parks over the years.

Personally, I am not a big fan of the term 'healing area', but it is the descriptive term commonly used by festival organisers to describe the part of the field where you'll find an eclectic collection of complementary practitioners from a wealth of disciplines. Zero Balancing? Check. Tibetan Singing Bowl healing? Check. Inner Child workshops? Check. One of the things I love about festival work is the chance to experience treatments not commonly found in high street clinics and to learn from others practising a range of interesting modalities. Over the years many of these practitioners have become close friends. It's wonderful to connect with my 'field friends' each summer and spend time with like-minded practitioners in these supportive, outdoor communities.



Emma's tent, with medicinal plants around the door, is decorated with flowers and bunting

Healing areas tend to be places of calm and tranquillity in the midst of events which can be loud and frantic, although you may need to adapt your concept of tranquillity! They can also be beautiful. Glastonbury's Healing Fields, for example, sit in the heart of the Green Fields part of the festival, populated by vegan cafes, solar-powered stages and a large permaculture garden.

The Healing Fields themselves are huge, housing nearly 300 practitioners working within a series of elemental themed gardens. White canvas structures are preferred for their visual beauty. On entering the Healing Fields you will find yourself in a sea of circular bell tents, geodesic domes, tipi tents and yurts complete with painted wooden doors. I have often heard cries of "Rivendell!" from surprised festivalgoers who think they have wandered onto a set from *Lord of the Rings*.

At Buddhafield we host a much smaller group of about 50 healers whose structures are sited in circles around a beautiful central garden. Festival gardens may look permanent to the novice eye but they are built by hardworking crews in the weeks leading up to the event and

dismantled once the festival goers have packed up their tents and left. For a few days these spaces offer people places to rest and relax, surrounded by natural beauty.

Many festivals now contract the management of their healing areas to external, specialist organisations, so the overall ethos, organisation, costs and 'feel' can vary widely from event to event. What remains true to all though is that healing areas have a vital role to play in supporting the physical and emotional health of music lovers, party animals, self-fulfilment and inner-peace seekers from within the joyful chaos of the festival scene.

My top tips

Seven is a magic number. If festival work intrigues you here are my seven top tips:

1. Work at festivals you like. This may sound obvious but if you hate loud music or big crowds then Glastonbury or Latitude are probably not the right fields for you. Saying that, many practitioners choose not to spend time outside the healing areas. Personally, I like to experience the wider festival in the evenings, hence I work at events I enjoy.

You might also want to consider night-time noise. Of my two regular festivals one is generally quiet at night but Pilton (Glastonbury) is famously loud 24 hours a day. Music festivals were a big part of my adolescence and young adulthood, where I honed the art of sleeping

- deeply in the vicinity of sound systems. If you are not blessed with that ability then a small, quiet festival or excellent earplugs are a must!
- **2.**Research how the healing area of your chosen festival is run. Many charge pitch fees, which can be quite high. This means you will need to charge accordingly for your treatments to ensure that you recover your costs and hopefully earn some extra.

A few festivals, including Glastonbury, still do not charge a pitch fee. However, you will be expected to work for donations, not fixed prices (often offered at a much lower rate than your usual charges). You will then be asked to donate a proportion of your earnings to the festival. This is important to help protect the festival against pitch fees being introduced in the future. The beauty of working for donations is that you get to treat people who would never normally book a massage or other complementary therapy treatment.

3.Complete your application on time and be prepared to submit copies of your qualifications, current public liability insurance and possibly a risk assessment. The days of healing areas allowing unqualified and uninsured practitioners to work are long gone. Festivals rightly expect us to provide correct paperwork in advance, without which you will not be offered a space.





In the Glastonbury Festival Healing Field (left) around 300 practitioners work within elemental themed gardens, while at the smaller Buddhafield Festival (right) around 50 healers work around a beautiful central garden

Application details should be on your chosen festival's website. You may need to apply several months in advance. January/February is a good time to start enquiring, so start your research now.

4. Choose your structure carefully. Many festivals offer space in communal marquees, which can be a great introduction to festival work. Some communal marquees operate central booking systems, which can be useful if you find it difficult to say no to demanding clients – see point 6! I love my circular bell tent, but it does have the challenge of a central pole, which halves the internal working space. Four-metre bell tents are simply not big enough for comfortable couch-based work, while some festivals now ban five-metre bells unless you share with another practitioner, as they occupy a lot of space.

Geodesic domes, yurts and tipis are the dream structures of many practitioners but they are expensive and generally require large vehicles to transport them. Old-style canvas frame tents may not win beauty competitions but can be spacious and practical working structures. Nylon tents, however large, are horrible to work in and remarkably unattractive – some healing areas will not allow them due to their appearance. Finally, do not consider working from a gazebo! They let in the rain and I have had to help prevent several gazebos from literally taking off during storms; they come with serious bad weather risks.

- **5.**Bring decorations and a big sign that states what you do. Regular festival healing folk take pride in making their structures beautiful. My packing list includes rugs, lanterns, sari-silks, bunting and medicinal plants for outside my door. You will probably need a vehicle to transport all your equipment. Festival healers rarely travel light!
- **6.**If you are managing your own bookings, consider in advance how people will sign up. Rain cleans chalk boards and destroys paper booking forms. I am yet to discover the perfect outdoor booking system for bad weather. Also, be prepared to say no! I've had people add their names to my booking sheet at the end of the day. Others have crossed out 'break' and written their name instead, and then been disgruntled when I've refused to treat them.

A minority of people can be very demanding and inevitably some (depending on the festival) arrive for treatments high on drugs or alcohol. I personally feel comfortable at refusing treatments when needed but, if the thought of that makes you nervous, then consider an event where the bookings are centrally managed. Also be prepared to say yes to the occasional punter who has lost their wallet, or crew members who deserve a complimentary treatment in return for the many days of free labour they have devoted to putting on the festival. These people often benefit from treatments the most – your generosity will be repaid in unexpected ways.

7. Finally, flexibility is essential! Forget playing music from your phone (and then spending half your takings on mobile charging facilities). Instead, enjoy the background music of whatever sounds filter through your canvas. Packing clean towels for five massage-packed days is unrealistic. Invest in light micro-fleece towels or Haman sheets and accept that your couch laundry provision will be different to that in your home practice. Couch roll is very useful at festivals.

You may also need to pare down your selection of essential and base oils. I still blend individually for clients (rather than rely on generic blends as some practitioners do at events), but I work with a reduced selection.

Be prepared for rapidly rising and then plummeting temperatures inside your tent – have both blankets and cooling hydrolats handy. Toilets and communal hand wash facilities may not be close by so schedule appropriately timed toilet breaks and organise your own hand-cleansing (alcohol gels are useful although I prefer a washing-up bowl of soapy water behind my tent).

Folk seek healing practitioners for a wide variety of reasons. At the start of the week 'rucksack shoulders' and 'camping back' are common complaints. However, the final days often bring people who are physically and/or emotionally exhausted to my tent, where a different focus is required. A joyful willingness to treat a wide range of needs is a must for festival work, and incredibly rewarding. Oh, and be prepared for the occasional unicorn and for lots of glitter.

Glastonbury 2017. I'm walking from the world-famous Pyramid stage to the Healing Fields, after a day filled with massage and an evening of brilliant music. It's the day of the European referendum result and I pass a couple dressed as giraffes, deep in serious conversation. A woman in a tight, electric-blue jumpsuit and glittery wig stops to tell me I look amazing. Drumming from the Stone Circle and the sounds of techno lull me to sleep.

Buddhafield 2019. I receive some bad news from home. Over the next few days friend after friend seeks me out to say they have heard that I have had some sad news, and they want to give me a hug and see how I am. I have never felt so supported.

On top of that I have spent five days giving treatments in the best clinic room in the world! As I gaze up at the Milky Way before zipping up my tent for the night I feel very blessed to be part of this beautiful, healing, festival world.

Emma Charlton is a clinical aromatherapist, body worker and long-term festival lover. She is Vice Principal and a lead tutor at the Institute of Traditional Herbal Medicine and Aromatherapy (ITHMA) and runs a private aromatherapy and bodywork practice from her home in Twickenham, South West London. She currently serves on the IFPA Board.

Blue is the colour...

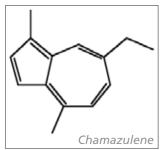
What gives 'blue' essential oils their characteristic colour? Ian Cambray-Smith explains the chemistry



he so-called 'blue' essential oils are: German (blue) chamomile (Matricaria recutita), Yarrow (Achillea millefolium), Great mugwort (Artemisia arborescens), Blue tansy (Tanacetum annuum) and Northern (Australian) blue cypress (Callitris intratropica).

Their distinctive blue colour is due

to the presence of chamazulene (the name said to derive from Spanish *azul*, meaning blue). Chamazulene is a bicyclic



polyalkene with the systemic name of 1,4-dimethyl-7ethylbicyclo[0.3.5]deca-1,3,5,7,9-pentaene: Unlike almost all the

other chemicals that make up essential oils, chamazulene is not created in the plants but formed during steam distillation by the breakdown of matricin (sometimes written as matricine):

CH₃C H CH₃

OHHHO Matricin

Matricin is a sesquiterpene, the same class of compound as beta-caryophyllene, alphabisabolene and farnesene, all of which are found in essential oils. The difference is that they are stable during the extraction process whereas matricin is not.

Structurally speaking, chamazulene does not belong to the sesquiterpenes but, historically, it is included with them.

Interestingly, chamazulene is also formed from matricin in the gut of rats by the action of gastric acid following oral administration (Jakovlev et al 1983). Obviously, this has nothing to do with essential oils, but it demonstrates that chemicals found in plants can also be identified in animals.

Chamazulene has a long history as an effective antiinflammatory and powerful antioxidant (Rekka *et al* 1996, Safayhi *et al* 1994). It has demonstrated an anti-inflammatory activity when tested on the skin (Della Loggia 1993) and is reported as blocking the chemical peroxidation of arachidonic acid (Mills & Bone 2000). Chamazulene is also thought to inhibit histamine release (Mann & Staba 1986).

So, what of the blue oils? The colour is so characteristic that it leaves them open to adulteration so a reliable supplier is essential. Typical chamazulene levels are (Tisserand & Young 2014):

		% chamazulene	
German (blue) chamomile	Matricaria recutita	3.4-23.4	
Yarrow	Achillea millefolium	19.7	
Great mugwert	Artemisia	22.4	
Great mugwort	arborescens	22.4	
Blue tansy	Tanacetum annuum	17.0-38.3	
Northern (Australian) blue	Callitric intratronica	5.6	
cypress	Callitris intratropica	5.0	

Some points to note:

- German chamomile: Recent research has indicated that alpha-bisabolol, also present in German chamomile, is an effective anti-inflammatory (Kamatou & Viljoen 2009)
- Blue tansy: Not to be confused with tansy essential oil (Tanacetum vulgare) which is a potential neurotoxin and should not be used in aromatherapy. There have been attempts to pass off Tanacetum vulgare essential oil, dyed blue, as 'blue tansy'. Tanacetum vulgare essential oil is never naturally blue as it does not contain any chamazulene
- Northern (Australian) blue cypress: This oil also contains guaiazulene, another azulene derivative. Tisserand and Young contraindicate it in pregnancy and lactation.

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Ian Cambray-Smith FIFPA, MSCS, BSc, MSc, PGCE worked as a research chemist and materials scientist before training in aromatherapy in 1994. An IFPA founding co-chair, he has served several terms on the IFPA Board and is currently Chair. He is an experienced teacher of aromatherapy and essential oil science, has provided consultancy services to companies/organisations supplying/using essential oils and, as Fragrant Earth's Technical Director, is concerned with technical data on essential oils, product quality, new product development and evaluation of new fragrance materials.

For love of lavender

Thanks to a community project, an area of London once known as the 'lavender capital of the world' is seeing a lavender revival. **Louisa Alessandra Pini** explains



t is hard to believe that the suburbs of London, namely Mitcham, Hackbridge, Beddington, Wallington, Carshalton and Sutton, used to be a sea of lavender.

The earliest record of lavender growing in the area dates back to 1301 (Heales 1898) but it was not until the 18th and 19th centuries that these areas

of south west London emerged as leading suppliers of lavender products.

The Potter and Moore company, founded in 1749 by Ephraim Potter and William Moore, signalled the beginning of the golden age of lavender. The partners set up a distillery in Eveline Road, Mitcham, overlooking a green area now called Figges Marsh, where they produced Mitcham Lavender water and also extracted lavender essential oil.

The business grew and flourished, achieving worldwide renown, especially under the leadership of James Moore, William's grandson. He bought up much of the surrounding land so that, by the end of the 19th century, he owned more than 500 acres of land growing lavender and peppermint, which at that time was the larger crop. He also grew roses, and herbs such as chamomile, spearmint and pennyroyal.

In the mid-1800s landowner William Sprules owned lavender fields spanning the areas of Cheam, Sutton, and Beddington, and distilled lavender essential oil at Hackbridge Mill, near Sutton. His daughter Sarah, who took over the business, was, by special appointment, 'Purveyor of Lavender Essence to the Queen' (Miller & Miller 1908), and is remembered walking through her fields with Queen Victoria.

Lavender essential oil is often associated with France so it's amazing to discover the thriving industry that took place so close to the city of London. According to Sally Festing, who has written extensively about lavender, "during the 19th century English Lavender commanded a much higher price: 'as much shillings an ounce as the French oil is worth per pound" (Festing 1989) which equates to sixteen times the value.

Lavender has always been popular with English royalty. Queen Victoria was a huge fan, "The royal residences are strongly impregnated with the refreshing



This cart, a replica of those used by 18th and 19th century lavender sellers, welcomes visitors to the Carshalton field

odour of this old-fashioned flower" (McDonald 1894). Queen Elizabeth I demanded fresh lavender flowers every day and is said to have used it to help quell her headaches. The popularity of lavender at the time may also have increased due to its strong perfume which would help mask unpleasant smells caused by the lack of a sewage system.

In my aromatherapy training I learned that 'Lavender' comes from the Latin word *lavare*, meaning to wash. It derives from a Latin word because the Romans used lavender in their baths in the belief that it would restore their skin.

Interestingly, 16th century herbalist William Turner has a slightly different explanation in his book A New Herball, published in 1551. He suggests it was "because wyse men founde by experience that it was good to washe mennis heades with, which had anye deceses there in".

Sally Festing, in her fascinating book A Story of Lavender, comments that "an early Victorian doctor argued that its earliest spelt form was livendula, which was more likely to be connected with the Latin *livere* – to be livid or bluish".

Nevertheless, lavender has always been associated with cleanliness. Aside from its uses in perfumery and

cleansing, many herbalists have recorded its multiple therapeutic properties.



Volunteers hard at work on the lavender harvest. Photo: A Duncan

Species and properties

All lavenders belong to the genus Lavandula in the family Lamiaceae and there are over 20 different lavender species. Common lavenders are all believed to derive from two species: Lavandula angustifolia (True Lavender) and Lavandula latifolia (Spike Lavender).

Many of the therapeutic properties of these two lavender genera overlap but there is one distinct difference. Spike Lavender contains the ketone camphor, making it an excellent mucolytic, ideal to help treat catarrh and chesty coughs. However, it is advisable to avoid its use during pregnancy or for those with epilepsy, due to the ketone content.

The hybrid Lavandula x intermedia, known as Lavandin, is the result of combining the above two genera.

Lavandin inherits a balance of the therapeutic properties of Lavandula angustifolia and Lavandula latifolia. Its scent falls in between the sweetness of True Lavender and the slightly more camphorous Spike Lavender.

There was never one single variety of "Carshalton Lavender' or 'Mitcham Lavender'. There were probably many and these have no doubt changed over time due to cross pollination" (Festing 1989 & Vickers 1991).

Lavender revival

By 1910 there was just one lavender grower left in Mitcham, a Mr Henry Fowler of Bond Road Nursery. In the 1920s the last lavender fields of Carshalton were sold to the London County Council for housing.

Fast forward over seventy years and you will be pleased to hear that Victorian lavender is once more alive and growing in Carshalton on one of the original lavender fields.

In 1996, the Local Lavender Scheme was established

on the site by local environmental charity BioRegional, with the London Borough of Sutton, Downview Prison and sponsorship from several sources. The scheme aimed to restore the world-famous lavender industry of Carshalton and Mitcham.

Three acres of disused land were identified for planting with Lavandula x intermedia. Research was undertaken and cuttings collected from the gardens of local residents. These cuttings are believed to be lavender from the original fields in the area. The cuttings were grown on through a horticulture project within HMP Downview. After two to three years, the lavender was



After 80 years lavender is once again harvested, using traditional methods, on an original lavender field. Photo: Photocraft Camera Club, Wallington





Top: Lavender essential oil distilled from the Carshalton crop. Below: The product range includes lavender essential oil, lavender hydrosol and dried lavender sachets

ready for planting. Low-risk prisoners on day-release worked with staff from BioRegional to clear the site and plant the lavender.

In 1997, the field was initially planted with 8902 young lavender cuttings. After patiently waiting and nurturing the cuttings the first lavender harvest in 80 years, using traditional hand harvesting methods, took place on Friday, 9 July 1999. Lavender bunches were sold locally and the remaining lavender was sent elsewhere to be distilled. Proceeds from the sale of lavender bunches and oil were re-invested in the scheme to keep it going.

In 2001, an engineering team from Cranfield University led by Dr James Brighton, consultant engineer to Channel 4's Scrapheap Challenge and Junkyard Wars, created the Heritage Harvester from secondhand agricultural machines, a rotator and a quad bike. This made it easier to harvest narrow rows of lavender without damaging the plants. The Heritage Harvester was used at the one of the scheme's first community harvests.

In 2003 the scheme came to be known as Carshalton Lavender and has continued to be run under that name by a team of volunteers ever since.

In 2009 the project received a grant from the Thames Community Foundation which enabled them to purchase

a still so that the essential oil and hydrosol could be distilled on site.

Annual harvest

The annual harvest that takes place on last weekend of July every year has continued to grow in popularity. It's become one of South London's best-kept secrets and the only Pick Your Own Lavender harvest in the area. Visitors can walk among the lavender and cut and pick as much as they wish. Scissors and buckets are provided. Any lavender picked is paid for on exit and all proceeds from the harvest weekend are used to fund the project.

Visitors have the rare opportunity to watch lavender being harvested with a Japanese tea cutter – this turned out to be a lighter and easier option than the Heritage Harvester. They can also see oil distillation demonstrations and, of course, they have an opportunity to purchase Carshalton Heritage Lavender essential oil and hydrosol, and dried lavender sachets.

This year Carshalton Lavender celebrated its 20th annual community Pick Your Own Harvest and the event was opened by well-known horticulturalist, Jim Buttress.

As a not-for-profit project Carshalton Lavender relies solely on volunteers to manage the field throughout the year. The project welcomes groups of volunteers which include company volunteering days or a group of young people supported by the National Citizen Service.

Volunteering sessions open to everyone take place regularly every Saturday morning from 10.15am until 12.30pm throughout the year. Volunteers tackle a variety of seasonal tasks involved in managing the field including taking cuttings, planting lavender, pruning, weeding, harvesting, drying lavender, fostering cuttings at home and returning them to the field for planting - to name just a few! Carshalton Lavender welcomes new volunteers.

To find out more about the revival of Carshalton Lavender and its unique essential oil and hydrosol visit www.carshaltonlavender.org or Facebook: CarshaltonLavender. It is also worth mentioning that there are two lavender fields in the area and the other one is a commercial enterprise. Carshalton Lavender is tucked away within the Stanley Road allotments and you access it via Oaks Way, Carshalton, Surrey, SM5 4NQ.

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Louisa Alessandra Pini is a Member-Director of Carshalton Lavender and has been involved in the project for seven years. She is also an awardwinning clinical aromatherapist who has practised aromatherapy and range of other holistic therapies for over 13 years at her clinic in Beddington, Surrey.

Bookshelf,

Women's Health Aromatherapy

Author: Pam Conrad

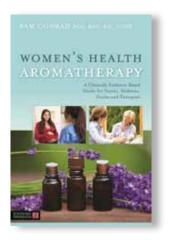
Publisher: Singing Dragon 2019

Paperback

Price: £13.36 Kindle edition also

available

ISBN number: 978-1-84819-425-0



This comprehensive book covers all aspects of a women's hormonal journey from pregnancy to menopause and, since this is an area that I am drawn to both professionally and personally, I was delighted to be asked to review it for In Essence.

What a great little textbook. It is divided into two main chapters: Obstetrics and Gynaecology, with an introduction covering What is Clinical Aromatherapy? and Methods and Safety. The book is sub-headed A Clinically Evidence-based Guide for Nurses, Midwives, Doulas and Therapists. So, for anyone working in this field and wanting to use essential oils, I would recommend having a copy.

Pam Conrad, who practises in Indiana, USA, is a registered nurse and certified clinical aromatherapist, educator and researcher with over 20 years' experience. She began her career in women's health by studying at the Indiana University Medical Centre. After relocating to the UK in 2001 she furthered her studies with Denise Tiran and consulted with the fabulous midwives at the John

Radcliffe Hospital in Oxford who are still undertaking research into using essential oils for labour and postnatal care.

When Pam returned to the US she developed a Women's Health Clinical Aromatherapy course for nurses and midwives. Down to her hard work and enthusiasm hundreds of midwives and nurses now safely practise clinically evidence-based aromatherapy with their patients.

And that's exactly what she has given us - a book focusing solely on evidence-based outcomes - ethically approved research studies conducted on consenting women, through pregnancy and menopause, by nurses, doctors and scientists in a clinical setting.

In the Methods and Safety chapter she covers applications (all external) including inhalations, massage, baths etc. What I am most pleased about (and I must say this does seem to go across our profession, where in other areas there is differing opinion) is that she states a one per cent blend for pregnancy. For non-practising aromatherapists she also sets out comprehensive safety guidelines, covering issues such as storage and disposal. In the Obstetrics chapter the author covers Pregnancy and prenatal, labour and post-natal care.

Pam Conrad does not recommend the use of any essential oils except lemon for the first trimester. This is because there are no published research papers covering this period. We would have to look to fertility assistance using aromatherapy. This is not the forum in which to comment on Pam's opinion but I do find this sweeping exclusion a shame when there is very good work being done with essential oils and fertility.

The Gynaecology chapters cover Menstrual Discomforts, PMS and Menopause. So even if you are not interested in pregnancy care there is still so much to take from this book.



Each oil is profiled and beautifully referenced with the research paper that backs its use. This is a fantastic resource and must have taken considerable time to put together. Each oil covered has a paragraph on Therapeutic properties, Safety, Method of application followed by the research. At the end of each chapter is a quick reference table for ease of use and quick decision-making.

The book concludes with an appendix of information on useful organisations and suppliers, and references.

I have already seen a few colleagues talking about this book on social media. They all seem delighted with it and I am too! It's an easy read but I don't mean that disparagingly it is carefully set out, easy to navigate and jam-packed with useful and helpful researched information.

Jo Kellett

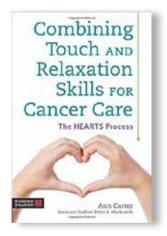
Combining Touch and Relaxation Skills for Cancer Care - The HEARTS Process

Author: Ann Carter

Publisher: Singing Dragon 2019

Price: £19.99 **Paperback**

ISBN: 9781848193529



It was a pleasure to read this book and a privilege to review, especially since it offers many beautiful insights that helped me reflect on my own practice within cancer care. Ann Carter has structured the book in a way that gently guides the reader through the HEARTS process from its creation, components and evaluation.

Part 1 begins with basic information about the HEARTS Process and its use in practice. I found the interview with Ann particularly helpful if you are unfamiliar with the concept. It is a beautifully written account that takes you through the evolution of an acronym that turned into a therapeutic approach encompassing techniques that can be easily practised. Ann talks through the importance of the role of touch, and explains that in HEARTS, the skin, metaphorically, is a "canvas on which we paint our art".

Part 2 explores each of the six HEARTS components -Hands on, Empathy, Aromas, Relaxation, Textures and Sound - explaining their use and benefit as a treatment within cancer care. Each chapter begins with the historical application, together with present challenges, practical recommendations and case studies.

I found the way Ann brings theory into practice - for example, the experience of touch through the ages (babies to the elderly) really engaging, giving me practical techniques that can be applied straightaway. I thought the chapter on 'Empathy' was particularly helpful as she discussed the difference between empathy, sympathy and compassion - skills not often taught during training or even reviewed as an experienced practitioner.

Also in this section, Ann tactfully explores the importance of using appropriate language when helping patients to enter a state of relaxation – this really resonated with me as I reflected on the common mistakes made as a therapist when directing and encouraging patients to relax.

In Part 3, the book's final section, Ann provides an evaluation of the practice of HEARTS from the

perspectives of carers, health professionals and trained complementary therapists. This is done in a practical way with exercises and opportunities for reflection and, as I read, I found myself reflecting on situations where I had encountered scenarios within all of the HEARTS elements.

Ann extends the therapeutic approach to other settings such as palliative care, working with people who have dementia and memory loss in the context of cancer care in a way that is heart-warming and practical.

She gives helpful suggestions for further reading and online resources, and encourages the reader to explore their own areas of particular interest. I have certainly taken away ideas from this valuable, well-written book on how I can implement elements of the HEARTS process within my work setting and how I might consider developing my skills more formally.

Priya Ganatra

Essential oils for women's health

Aromatherapy has been shown to be effective for various aspects of women's health, as the studies below demonstrate.

Aromatherapy helps to reduce pain

A recent literature review confirmed the benefit of aromatherapy for primary dysmenorrhea pain. Eleven databases were searched for randomised controlled trials testing aromatherapy for pain reduction for this condition. All the trials identified reported superior effects for aromatherapy, used in various ways, compared to placebo. The reviewers say their findings provide a moderate level of evidence on the superiority of aromatherapy for pain reduction over placebo in primary dysmenorrhea. Free access to full report at www.ncbi.nlm.nih.gov/pmc/articles/PMC6262530/

Lavender improves quality of life

A recent Iranian trial investigated the effect of lavender aromatherapy on the quality of life (QOL) of 62 postmenopausal women. The women were allocated to either an intervention group (inhaled two per cent lavender essential oil for 20 minutes nightly at bedtime for a month) and a control group (received a distilled water placebo in the same way). The results showed that inhaling lavender essential oil can improve postmenopausal women's QOL

and reduce the severity of complications and physical-psychological symptoms. Free access to full report at www. sciencedirect.com/science/article/pii/S1744388118303244

Geranium essential oil helps PMS

Can aromatherapy massage with geranium essential oil relieve premenstrual syndrome (PMS)? A recent eightweek trial concluded that it could. The participants - 120 female students with PMS - were divided into control, aromatherapy massage, and massage groups. In the aromatherapy massage and massage groups two per cent geranium essential oil was used. The results indicated that aromatherapy massage and massage reduced physical and mental symptoms, but the effect was more marked in the aromatherapy massage group. Free access to full report at www.ncbi.nlm.nih.gov/pmc/articles/PMC6238350/

Reducing hypothyroidism fatigue

An American study found that aromatherapy could reduce fatigue in women with hypothyroidism. The participants (aged 18-55) with a hypothyroidism diagnosis, were randomly allocated to an aromatherapy group (inhaled a peppermint-based essential oil blend every afternoon for two hours), or a control group (treated with an odourless vegetable oil blend). More information on the study at https://fsihs.org/essential-oils-for-hypothyroidism/

Community spirit

At the 2019 Annual General Meeting, which was combined with four training sessions, the Board of Trustees reported that IFPA is now in a strong, stable position for further development

nergising, exciting, dynamic, informative - just a few of the words members used ■ to describe the IFPA's highly successful one-day event held at the Holiday Inn Central hotel in Milton Keynes, Buckinghamshire, on Saturday, 21 September 2019.

Since it is not always easy to attract members to the IFPA Annual General Meeting (AGM) when it is a stand-alone event, the IFPA Board decided that this year it should be combined with educational training sessions (eligible for CPD points). This decision was rewarded with the attendance of around 80 members. both from the UK and abroad; the atmosphere of the event was lively, warm and collegiate, and there was a real sense of a community of practitioners enthusiastic to deepen their knowledge of essential oils and aromatherapy practice.

Business meeting

At the AGM, held in the afternoon, IFPA members heard how the Board has carried out its duties over the past year. On behalf of the Board of Trustees Chair Gabriel Mojay reported on achievements and performance:

- Processes and systems: Work has continued on improvements to internal processes and systems, upskilling staff and Trustees, and buying in outside professional expertise only when absolutely necessary.
- Website: A priority task for the Board of Trustees this year has been a major overhaul of the IFPA website, which has now

been completed. The functionality has been hugely improved and the site is now ready to host future educational content such as webinars. Much improvement work has also been carried out on the Japanese section of the site, and work on the Chinese section is planned. The next stage of website improvements will focus on

- improvements to the user interface and experience for English-, Japanese- and Chinese-speaking users.
- Outreach: Improved financial stability has enabled IFPA Trustees to start looking outward, promoting outreach to the Federation's different audiences. With a much improved social media





Top: At the well-attended Annual General Meeting the IFPA Board reported on achievements over the past year. Below: The four CPD training sessions stimulated much interest and lively discussion





Left: Retiring Chair of the Board Gabriel Mojay received affectionate thanks for his major contribution to the success of the IFPA. Right: CPD sessions provided valuable information for members to take back to their practices

presence, work is now in progress to support the growth of online IFPA communities via Facebook and a programme of short webinars. Recent external activities have included representation at a Verifying Organisations meeting hosted by the Complementary and Natural Healthcare Council, and exhibiting at Botanica2018

 Conferences: IFPAroma2018 in Edinburgh was highly successful and well-attended and a Case Study conference, supported by IFPA and also well attended, was held in Osaka, Japan in March 2019. Looking forward, the Trustees plan to hold a major conference every two years (the next conference takes place in Tokyo in March 2020) with smaller events organised around the Annual General Meeting every other year

The Trustees' report concluded: "IFPA's professional standing and the maintenance of professional standards remains our primary focus and our school and tutor accreditation programmes in particular are held under constant review with the aim of better supporting both constuencies towards the application of IFPA professional standards."

Following elections, the Board of Trustees now comprises: Caren Benstead, Ian Cambray-Smith, Louise Carta, Eric Cheng, Emma Charlton, Julie Foster, Kazue Gill, Gabriel Mojay, Sunita Teckchand, and David Wilson. Also at the business meeting members agreed to pass a resolution to reduce from 30 to 10 the number of full IFPA

members required to attend an AGM for it to be quorate.

At the close of the meeting Ian Cambray-Smith gave special thanks to Gabriel Mojay, a founding co-Chair of the IFPA and a long-serving Trustee, who stepped down from the post of Chair of the IFPA Board at the AGM. "His great strength has been to move things forward and to realise that the IFPA has had to change. Our thanks to Gabriel for everything he has contributed to the success and development of our organisation," he said.

Learning and sharing

After a warm welcome from the IFPA Board, the CPD sessions began with a lively and engaging introduction to Arvigo® Therapy by Louise Crockart. In her workshop, 'Making Connections', she explained how women have been rediscovering this form of ancient body work and why the message is also relevant to men and to children. (You can read more on this fascinating topic in Louise's article on page 18.)

Next, aromatherapist Jo Kellett, who has focused on women's health throughout her career, opened an energetic, interactive conversation on menopause. Now passionate about supporting her clients through this transitional stage in their lives, she highlighted the benefits of aromatherapy and identified helpful essential oils for menopause. She encouraged aromatherapy professionals to share their knowledge to empower themselves and their clients.

How do aromatherapists, often working alone, develop successful businesses and look after themselves? In a dynamic and amusing workshop Christine Courtney offered encouraging advice to help practitioners meet the demands of their clients and colleagues, and nurture their own needs. She explored a range of issues including time management, networking, CPD training and using the IFPA as a resource.

In the final session practitioner/ aromatherapy teacher Emma Charlton introduced fascia, the new bodywork buzzword and a relatively new area of anatomical study. In an informative talk she explored what fascia is, considered theories about its structure and key function in the human body, and explained its relevance to everyone working with the human form, particularly massage therapists and other bodyworkers.

The theme for this highly successful IFPA event was 'Connections, Communications and Conversations' and throughout the day (and at an IFPA networking dinner the night before) members were enthusiastically connecting, communicating and talking to their fellow members - catching up with news, sharing experience and information, and offering support. Valuable learning experiences combined with an insight into the management and objectives of the IFPA, and a comfortable and accessible venue, made for a stimulating and enjoyable day.

My practice

We talk to Sarah Bryan about career challenges, her lifelong passion for aromatherapy, and her confidence in the power of essential oils to relieve pain



Clinical aromatherapist Sarah Bryan PhD has a special interest in using aromatherapy in conjunction with sports and remedial massage

techniques. Three years ago she launched a range of essential oil blends designed for use by massage and bodywork therapists to help clients recover faster from pain and injury. Registered blind since birth, Sarah has faced many challenges in her career but her passion for essential oils has been a constant theme.

IFPA: Could you tell us about your background?

SB: I was born into a medical family so medicine has always surrounded me. I have a rare genetic condition and needed regular hospital checkups as a child, so my curiosity was awakened from the age of about three. Rather than being scared, I was curious and wanted to know what it was all about.

I knew early on that I wanted to work in a mainstream medical field when I grew up but there was just one problem: I have been registered blind since birth. If you have a strong sense of vocation that you cannot realise you have to think around it and when, at the age of about 10, I first encountered aromatherapy, I started to lean towards complementary therapies. However, my family, wanting me to have the best chance of career success despite

my disability, steered me towards a more conventional route.

In 2002 I began training as a speech and language therapist in Sheffield but by my second year things had started to go wrong and it became clear that you need to be able to see what's going on when working with small children! So I side-stepped into speech therapy academia, where I worked for 10 years, before completing a PhD in 2012.

The subject matter was fascinating and I initially enjoyed academic life but I seemed to be interacting more with computers than with people and this solitary, competitive existence affected my mental health. In 2009, I began to study aromatherapy as an antidote to academic life and rekindled my childhood interest in essential oils. I went on to study massage at the Sheffield Centre for Massage Training, graduating just months before completing my PhD thesis. Looking back, I don't know how I managed it all but it was worth it.

IFPA: What sparked your interest in studying aromatherapy?

SB: On a day trip with my boarding school there were various activities on offer including hand massages being done by a woman with some gorgeous-smelling oils. I went for that and I'd love to be able to tell her that her 10-minute treatment sparked my passion for complementary medicine. One of my house parents realised that the experience had affected me so she bought some massage oil and started massaging our hands herself. When one or two of us wanted to learn how to do it, she taught us

the strokes she had observed the aromatherapist using.

Over the next seven years at boarding school, I was often asked for "that relaxing hand massage". Then something special happened. At school we wrote using manual Perkins braille machines - clunky machines that exert constant pressure on your hands and wrists. One or two girls developed RSI and asked me to massage their hands and wrists for pain relief. Even with no training, I could sense when a joint felt swollen or tendons too lax. I knew no musculoskeletal anatomy, but seemed to know instinctively what to do. I would have liked to study more at that time but GCSEs and A-levels had to take priority.

A school friend used to diffuse essential oils in a bowl of hot water and this prompted my request for a diffuser, much to the horror of the house parents! One Christmas, I received my first diffuser and three essential oils in a bag. Within a year, the bag was full to bursting! My friends and I used a variety of essential oils - lavender and geranium for relaxation after a busy day, for example, or clary sage for period pains and general teenage misery. Of course, I made mistakes: lemon oil in a bath without a carrier turned out to be a very bad idea!

Then university life took over and my interest in aromatherapy lay dormant for some years, ironically when I probably could have benefited from it most. It was rekindled when I took a distance learning course in aromatherapy in 2009-2010. Realising this was just the first step I went on to qualify in holistic massage in 2012, holistic sports and remedial

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massage in 2013, and completed the IFPA Diploma with the Penny Price Academy of Aromatherapy in 2014. These days I'm very much a bodyworker, having completed the Advanced Clinical Diploma in Integrated Myofascial Therapy last year. I am really grateful to my inspirational tutors on all these courses and can't thank them enough.

IFPA: How has your aromatherapy career developed?

SB: I started treating case study clients in 2009 and kept my practice going as I added further training and skills to my toolkit. I officially started trading in 2012 and practised in a variety of settings treating staff, service users and family members while working at the Sheffield Royal Society for the Blind. This was a challenging working environment since many clients had complex health conditions.

This gave me a rich clinical experience and this, alongside my natural interest in medical matters, means that, rather than being scared to touch a client with a complex medical history, I enthusiastically research their conditions before they come.

I worked in various environments at that time, each presenting its own challenges - in a treatment room attached to a holistic shop/café, in a physiotherapy clinic, a chiropractic clinic, and in a large law firm where I had a massive room all to myself and treated 10 sporty, stressed and often injured professionals each day. The firm treated me very well - I miss that job!

My husband's job move to Exeter in 2016 was a huge blow because my business in Sheffield was becoming very successful. Although I worked in a lovely clinic in the centre of Exeter I didn't come to terms with the relocation and this manifested in debilitating physical health issues. I was just settling there when my husband's job moved us again! But, through this experience, I learned a lot about the value of thinking positively and building positive business relationships. So now we're in sunny Bracknell and I'm looking for somewhere new to work. The people are welcoming and the future seems bright. I am optimistic of greater business success.

IFPA: Do you have a particular interest or specialism?

SB: I am especially interested in using essential oils for relieving pain and helping injuries to heal. Sports/ remedial massage and aromatherapy meet so well here. Since most people are sports massage therapists, but not aromatherapists, this seems to be a sadly underestimated area of work. In my practice, I typically work with professional women, aged 38-48 years, who struggle with long-term, work-related shoulder pain. I help them to get out of pain permanently, so they can work confidently, sleep comfortably and return to the hobbies they love.

IFPA: Why and how did you develop your product range?

SB: The SB Holistic Magic product range was not born overnight. I started by experimenting with oil blends for some of my sporty clients, who kept finding new ways to injure themselves! I found what worked well in specific circumstances and realised that this knowledge was worth sharing. The five SB Holistic Magic products are designed for massage and bodywork therapists to help clients to recover from pain and injury faster, without needing to do extra training.

For therapists who like the idea of using essential oils but do not wish to train as aromatherapists these products bridge the gap between massage and aromatherapy. Massage therapists often believe they can't use essential oils because they are not insured to do so but, although it is true that they can't blend them, they can certainly use pre-prepared blends. Equally, even qualified aromatherapists sometimes need an easy go-to blend and I use these myself in clinic, as well as blending my own oils.

Whereas most blends on the market focus on a general emotional need, such as balancing or relaxing, my products have each been designed with a specific clinical purpose in mind, giving the tissue what it needs at the right time in order to heal. As there are only five products, it is easy for massage and bodywork therapists to learn what to use and when.

IFPA: What do you find especially rewarding in your work?

SB: I love to see my clients achieve results they didn't imagine possible. It's a great privilege to journey with them and help them regain their quality of life. I don't really mind what the goal is as long as it is meaningful to that person. One 40-year-old man I treated thought he would never be able to run again; we had him back running within a couple of months, once he learned the value of following our advice! And an elderly woman client of mine was tickled pink that after treatment she could stand up for long enough to bake a batch of scones!

I also love to hear other therapists telling me how my products have made a huge difference to their clients. It feels as if I am helping my fellow therapists to do even more good work.

IFPA: Could you share one or two case studies with us?

SB: One of my recent clients, a 70-year-old woman who had suffered with low back pain for over 35 years, had tried just about everything. After a course of treatment with me, she was out of pain, doing the Moon Walk and had much more energy for spending time with her family. We also put practical strategies in place to help her manage her difficulties around caring for her disabled husband. She was initially adamant that she only wanted to address the physical, not the emotional, pain but after I pointed out that she had only addressed the physical pain before and it had not worked, she was eventually won round.

I've also recently worked with a male client with severe shoulder pain and nerve impingement, originating from extensive scarring in his abdomen. After a six-week course of treatment, his alignment had changed beyond recognition and he was able to drive, and play with his children without pain.

IFPA: What are your favourite essential oils?

SB: There aren't many I don't like! They all have such different characteristics and uses that it's like having a diverse

bunch of friends, each ready to help you out in their own way. I would distinguish between personal and clinical favourites. My personal favourite is probably neroli which suits me quite well; I struggle with anxiety at times and this manifests in the gut, making neroli a good option. In clinic, I definitely use some more than others and it's no accident that my clinical favourites became part of the Magic range: lavender, rosemary, lemongrass, plai, marjoram, black pepper, geranium, peppermint, eucalyptus staigeriana, German chamomile and sweet birch. The only oil I have trouble working with is dill; I love it, but it makes me ravenously hungry and my stomach starts rumbling audibly, even if I've just eaten!

IFPA: Has your involvement in a mentorship programme improved your business?

SB: Hugely! I'd been in practice for over six years and, despite all my training and qualifications, I was failing miserably to make any profit. I was earning money, but investing it all in the business. I promised myself that, come November 2018, it was make or break time. If I couldn't make it work, I would have to pack it in.

My one chance was with a company called 'Passion to Profit for Practitioners' (P to P), run by health practitioners Chris and Karene Lambert-Gorwyn. They now run multi-million pound businesses but, before they took advice from business mentors, were in a similar situation to me. I came across them a couple of years ago when they sent me some free webinars.

I've attended many marketing workshops over the years but these guys were different and what they said about offline marketing and building relationships made sense. It was a far cry from the popular hype about social media, but it was music to my ears, because, like most therapists I know, I hate computers and love people. I also loved what they said about providing heart-centred service, then charging appropriately for it. This was certainly about money, but it was about good ethics too.

I decided against doing the full training at that time, determined to fix things on my own. When I told Chris he replied "by all means and we can talk again in six months, but you'll be in exactly the same place as you are now". That was in April 2017, and he was right. By October 2018, things were no better so I attended a three-day P to P introductory workshop. It revolutionised my thinking and gave me the building blocks to start increasing both my service and my prices.

I took full mentorship with P to P and, in seven months, have finally turned my business into a profitable enterprise. I brought in £12,800 in just five months, which has almost doubled my income. This means that I can pull my weight financially, give to my preferred charities and don't need to rely on my husband for support. My confidence, self-esteem and attitude to money have been transformed.

More importantly, I'm working with clients in an in-depth way not previously possible. For example, the work on putting strategies in place for the client mentioned above was done outside of the treatment session. That was OK because I was being paid appropriately and I could willingly give the extra time needed to help her move forward.

IFPA: Do you have any business tips from your mentorship experience?

SB: Yes: don't struggle on your own trying to run a profitable business when you don't know how. If friends and colleagues tell you it's impossible to make a good living as a therapist because you do it for love, they are mistaken. It is more than possible to do what you love and make ample money for your own needs and your preferred charitable causes, but you need training, just as you needed training to be a therapist.

When you trained in your chosen modality, you focused on the therapies and probably had a smattering of business training. Imagine if it had been the other way around: you had done a business course with a smattering of aromatherapy. Would you feel confident to go out and practise aromatherapy based on that? No, of course not. Equally, most therapists

don't have a clue about how to run a business - we expect to muddle through and figure this part out on our own. If we had to figure the aromatherapy part out on our own, we'd never get insurance to practise! Running a business needs as much input and training as does each therapy we practise.

IFPA: How do you look after your spiritual and emotional needs?

SB: I have a morning routine based on 'The Miracle Morning' by Hal Elrod which involves prayer/ meditation, positive affirmation, visualisation, yoga and cycling. I also take a few minutes most days to read a personal development book. I attend church and regular networking meetings, because I gain considerable nourishment from being around people, and I get out into nature with my dog when I can. I love classical singing too and have sung in several choirs over the last 25 years. I find great relaxation from listening to classical and folk music, as well as practising for my next concert.

IFPA: What inspires and sustains your interest in aromatherapy?

SB: As a scientist, the chemical complexity of essential oils wows me and we are still learning what they are capable of. We learn more about the oils we know and new, exotic oils are becoming more mainstream. I dream of a day when the average person knows that aromatherapy isn't just about nice-smelling oils, and when the medics turn back to nature in their quest to fight the latest superbug and make new advances in medicine.

I also dream of a time when complementary therapists and mainstream medics are singing from the same hymn sheet in terms of research credibility and integrative health for our clients. With the development of social prescribing and greater awareness of integrative health, that day may not be so far away.

To find out more about SB Holistic Magic, or to book a free strategy call with P to P, contact Sarah Bryan now on sarah@sbholistic.co.uk, tel: 01344 566312.

ONLINE RESOURCES

Articles and news items in *In Essence* regularly refer to organisations and services, many of which are good sources of online information or interest. Here's a round-up of websites you may find useful.

CNHC

www.cnhc.org.uk

The Complementary & Natural Healthcare Council (CNHC) website provides a wide range of information, from details about registration to a monthly newsletter, from job vacancies to a regular blog. The blog features a variety of interesting personal perspective stories from a range of complementary practitioners on aspects of their work.

IUCN Red List

www.iucn.org

The International Union for Conservation of Nature (IUCN) Red List of Threatened Species™ is the world's most comprehensive inventory of the global conservation status of plant and animal species. With its strong scientific base, the IUCN Red List is recognised as the most authoritative guide to the status of biological diversity.

Component database

https://components.aromahead.com/

From the Aromahead Institute, this is a reference database

of medicinal actions, therapeutic behaviours and research for essential oil components. A subscription gives access to exclusive datasheets compiled by Andrea Butje and Robert Tisserand, each including a molecular structure illustration, chemical family, therapeutic properties, medical actions, safety concerns, notes and detailed references.

Circle H Institute

https://circlehinstitute.com/research-titles/

The Circle H Institute, set up by Ann Harman, works to further research, education and promotion of hydrosols. Through this website Ann shares nearly 15 years of analyses, experiments and research paper titles. Access to the information on this website is free of charge.

The Sacred Science

www.thesacredscience.com

A few years ago a film about shamans and plant medicine in the Peruvian Amazon made by The Sacred Science attracted much interest. Following up on this response Sacred Science set up this informative website for people interested in natural healing, plant medicine, and general wisdom from ancient cultures. It features information on the film and on five main subject areas: Shamanism, Herbalism, Energy Medicine, Wise Woman, Prayers and Blessings. Also includes a blog with a wealth of information on eg herbs, healing, and recipes.







*In Essence*Spring/Summer 2020

Do you have a story to share with your fellow IFPA members? We would love to hear from UK and international IFPA members/student members who would like to share their love of aromatherapy.

You may have your own practice, or work from a clinic, a hospital or a hospice. Perhaps you work with children, practise aromatherapy as a volunteer, or combine it with another modality? Whatever your aromatic interests or experience, we would like to hear from you. Please contact the Editorial Team via admin@ifparoma.org



Practice notes

Amanda Deards explores further aspects of an important report on integrated healthcare, highlighting the implications of its recommendations both for individual aromatherapists and for their professional associations



n the last edition I looked at some of the implications for aromatherapists of Integrated healthcare; Putting the pieces

together, a report published by the All-Party Parliamentary Group for Integrated Healthcare (PGIH) in December 2018. This urged the NHS to embrace complementary, traditional and natural medicine to ease the mounting burden on service provision.

This article highlights more recommendations of the report and their impact on practising aromatherapists and their professional bodies. Once again, I would like to make it clear that the comments in this column express my own personal take on the implications - for myself and other therapists like me - of the issues raised.

Working together

Let's start with a look at the recommendations under the heading 'Working Together' which highlight the urgent need for the existing disparate band of complementary therapy associations to work together and establish a formal collaborative to move forward collectively. I couldn't agree more: our existing professional associations should be at the forefront of shaping a new approach to a fully integrated system of healthcare.

However, this did raise a red flag for me. Would the smaller professional associations such as our own get lost in the shuffle? And would we end up creating another layer of expensive bureaucracy?

Following on from this, I am about to make a point from my own personal perspective which I recognise will be considered controversial by some. But let's face it, controversy promotes discussion which, in turn, can lead to a balanced consensus.

Raising standards

One of the report's other recommendations, under the heading 'Raising Standards', talks about providing the public with a greater degree of assurance when seeking a complementary therapy practitioner. It suggests this could be done by encouraging widespread access to the Professional Standards Authority (PSA) Accredited Registers (AR) scheme, through active political support and by publicising the scheme.

Here is how the PSA defines its role in relation to Accredited Reaisters:

"The Professional Standards Authority is here to protect the public and help ensure their health and wellbeing. We assess organisations that register health and social care practitioners who are not regulated by law so that you can choose a practitioner to meet your needs with confidence."

Take a look at the PSA's Accredited Register and search Aromatherapist (I also searched the terms Complementary Therapist, Massage Therapist, Reflexologist and so on) and you will find only two accredited registers - the Complementary & Natural Healthcare Council (CNHC) and the Federation of Holistic Therapists (FHT). For an area within a 20-mile radius of my postcode only a single therapist is currently included in the category of Aromatherapy (Body & Sports Massage 10, Reflexology 5) on the CNHC register, so not a very popular option so far.

The alternative is through membership of the accredited register of your professional association. For example, on the FHT register for the same area there are 26 Aromatherapists listed (Body & Sports Massage 52, Reflexology 46). You do the math. I appreciate that my sample selection method is somewhat flawed, but you have to start somewhere.

For me this raises two important questions. Why is there only one professional complementary therapy association with an Accredited Register? And why are so few aromatherapists registering with the CNHC?

Clearly there are cost issues for individual therapists if they wish to retain membership of their own professional body and its benefits, and also register with the CNHC.

There are cost implications too for professional associations wishing to set up an accredited register. They are required to pay a substantial non-refundable fee plus an additional 10p per member for annual renewals. Furthermore, there is a rigorous and lengthy application process to undergo.

It should be noted that the FHT, which has set up an accredited register, is considerably larger than other complementary therapy associations: it is currently the UK's largest professional association for complementary, holistic beauty and sports therapists, representing 16,000 members a year.

In their recommendations the PGIH emphasises the importance of ensuring that smaller organisations wishing to join the AR scheme are advised on and supported through the process, and that they are not excluded on cost grounds. So is the AR scheme only for the big boys? It remains to be seen how many smaller complementary therapy organisations are successful in their applications for accreditation of their registers.

The PSA AR scheme has the potential to offer significant benefits to therapists like us and to smaller professional organisations, preferably on more favourable terms, as long as it receives active political support and is more widely publicised. It also needs to demonstrate that it is capable of delivering material benefits to registrant organisations.

What those benefits should be requires further discussion - perhaps the ability to make direct referrals as per the PSA/ Royal Society for Public Health (RPSH) Report Untapped Resources: Accredited Registers in the Wider Workforce. This states that: "Accredited Registers offer a way for GPs to provide patients with a more holistic service, either by referral or signposting patients toward them' – a point made by the General Medical Council (GMC) in their Delegation and referral guide on Good Medical Practice".

So do I want to appear on an Accredited Register? Yes, if it gives me the potential to be part of a more holistic service for the general public where GPs can refer or signpost their patients towards me. And, when a potential client googles 'Find an

Aromatherapist' I want to be part of the top result. Currently, if they go on to the PSA website's practitioner search page they are advised: "We recommend you only choose practitioners who are regulated or on an Accredited Register."

Evidence base and research

The PGIH report also looks at how the effectiveness of complementary therapies should be assessed. If they are to be provided through the NHS, then the National Institute for Health & Care Excellence (NICE) will take the lead in assessing their efficacy. The PGIH Report has identified that NICE guidelines are currently too narrow and do not fit well with models of care such as complementary therapies. They have recommended that they should be expanded to incorporate qualitative evidence and patient outcomes measures as well as Randomised Controlled Trial (RCT) evidence.

However, this is not a one-way street. The report states that, if the complementary therapy community wants additional weight to be given to these types of evidence, then it needs to be more efficient in monitoring cases, record keeping and collecting and analysing evidence. The report calls on our professional associations to take steps to educate and advise their members on the use of MYMOP*.

I have no doubt that, like me, many IFPA members are using Patient Reported Outcome Measures (PROMS), which may include not only MYMOP* but also MYCAW*, WEMWBS* and the more recently developed WHHQ*, as part of their best practice. But equally many will not - it rather depends on the nature of your work.

The 2019 FHT Member Survey showed that 15 per cent of FHT members are already using PROMs to monitor client or patient progress. Many of these therapists work in hospices, hospitals and other healthcare settings, where PROMs are often used to evaluate a complementary therapy service and hopefully demonstrate its value to those accessing treatment.

So you are probably asking yourself the same questions I did.

How will all this data be collected and by whom? A start has been made with by the Research Council for Complementary Medicine which is currently in discussion with the PGIH regarding independently collating and analysing PROMs data gathered from members of complementary therapy associations such as the IFPA. This will be used to identify the conditions for which patients are seeking treatment from complementary practitioners, and with what outcomes.

The PGIH report contains challenges and opportunities for our professional associations in almost equal part. So make sure you show up to support them and help shape the future of integrated healthcare in the UK.

Further information

Integrated Healthcare: Putting the Pieces Together was published by the All-Party Parliamentary Group for Integrated Healthcare (PGIH) in December 2018.

You can access the full report on the home page of the IFPA website at https://ifparoma.org/

*MYMOP Measure Yourself Medical Outcome Profile and *MYCAW Measure Yourself Concerns & Wellbeing – see www.bris.ac.uk/ primaryhealthcare/resources/mymop/ sisters/

*WEMWBS Warwick Edinburgh Mental Wellbeing Scale - see https:// warwick.ac.uk/fac/sci/med/research/ platform/wemwbs/about/ *WHHQ Warwick Holistic Health Questionnaire - see www.balens.

Questionnaire – see www.balens. co.uk/cpd/cpd-videos-2017/nicolabrough-warwick-holistic-healthquestionnaire-whhq.aspx

Note

The IFPA recognises the importance of professional standards and the potential benefits that registration with the Professional Standards Authority (PSA) would offer members, particularly with regard to improved links with the NHS. The Board of Trustees is pleased to report that the IFPA's PSA application is underway. It is a massive project but with the Board's hard work it is progressing well. We will update members regularly.

Japanese perspectives

Reiko Tomino, Principal of a long-established IFPA-accredited school in Tokyo, reports on aromatherapy in Japan, her own aromatic journey, and her school's pride in its students and graduates



romatherapy was introduced into Japan when *The Art of Aromatherapy* by Robert Tisserand was translated into Japanese and published in Japan in 1985.

The Aromatherapy Association of Japan (AAJ) was established in 1996

and, at around that time, many aromatherapy schools or associations were established. In 2005 the AAJ became the Aroma Environment Association of Japan (AEAJ) (www. aromakankyo.or.jp/english/aeaj.html).

The term 'aromatherapy' is currently well recognised throughout Japan and, as of March 2019, the AEAJ has 54,426 members and 265 corporate members. This means that many people in Japan are learning aromatherapy and making use of it in their lives.

Although no precise statistics are available, there are many professional aromatherapists currently working in my country. Some run their own private practices, others work in settings such as hotels, spas, or sports clubs, while some work in a medical environment in fields such as palliative or maternity care, or integrated medicine.

However, professional aromatherapists in Japan are not confident that aromatherapy is properly understood by the majority of the population. When people go shopping they see many products with the term 'aroma' in their names – one example is a fabric softener that, in fact, contains chemical fragrance. Also, products such as 'aroma oils', that are not real essential oils, are sold in general stores. This situation confuses people and gives the wrong impression about aromatherapy.

My aromatherapy journey

I majored in Vietnamese Language at university and in 1992 I made my first visit to Vietnam. There I encountered people who lived a very simple life - without electricity, gas or water supply. The most fascinating thing for me was that, in rural areas where people had no access to western medicine, they were treating patients using herbs and some kind of massage techniques. It seemed to me that these people were much more energetic and vigorous than people I encountered in the cities.

This experience changed my life completely. Before then, I usually took medicine when I was ill without thinking deeply about it. But meeting Vietnamese people in the early 1990s sparked my passion for natural therapies, including a passion for the pharmacological action of herbs and massage.

Later, I came to know about 'aromatherapy' when I was working in Tokyo. I was so excited and thought: "This might be the treatment using herbs that Vietnamese people were using. This is what I have wanted to study!"

But at aromatherapy schools in Japan at that time, treating people for medical conditions was not recommended, and cautions and contraindications about aromatherapy were emphasised more than its beneficial pharmacological actions.

So I decided to study aromatherapy in UK, the best place to study natural therapy. I trained with Gabriel Mojay at the Institute of Traditional Herbal Medicine and Aromatherapy (ITHMA) in London and, on qualifying, I joined the Register of Qualified Aromatherapists (RQA), one of the IFPA's predecessor organisations.

When I returned to Japan from the UK I started working as a therapist at a small café in Tokyo. Unfortunately, the owner of the café decided to close it and I applied for a new job at an aromatherapy and reflexology salon which was attached to an aromatherapy school called Japan Natural Therapy College.

The school principal asked me to do some teaching because a teacher with experience of learning aromatherapy in the UK was very rare at the time. I really wanted to decline her offer as I was too shy to speak in front of people, but she insisted that I should share my knowledge about aromatherapy in the UK with Japanese people. Since then, teaching has always been my passion, alongside treating clients.





The International Medical Spa Institute (shown above) is located in Shibuya-ku, a major commercial and business district of central Tokyo which is also a fashion centre

Our school

Our school, based in Tokyo, is called the International Medical Spa Institute (IMSI) and has its origins in the Japan Aroma College (later known as the Japan Natural Therapy College), established in Kobe in 1994 after the founder returned from studying aromatherapy in the UK.

In 1999 this college became the first ISPA-accredited school in Japan. ISPA (International Society of Professional Aromatherapists) was another of the IFPA's founding organisations when the Federation was established in 2002.

In 2001 the Japan Natural Therapy College moved to Tokyo and I joined it that year. At that time it had just started running the ISPA aromatherapy course in Tokyo. When three associations merged to form the IFPA in 2002, we became an IFPA-accredited school and changed our name to IMSI.

Our greatest mission has always been to teach aromatherapy in the way it is taught and practised in the

UK. To accomplish that mission, we not only run the IFPA diploma course, but also regularly organise seminars by prominent lecturers from UK. For example, we have run a regular workshop led by Gabriel Mojay (ITHMA) since 2010, and one led by Keith Hunt (formerly of London's Royal Free Hospital) since 2014.

School development

A major school policy is that we never stop learning after we become lecturers. In light of that policy, I studied therapeutic reflexology in South Africa, where reflexology is one of the national qualifications. I also studied Dien Chan

facial reflexology in Vietnam. Our Vice Principal, Yoshiko Saga, who trained with me at ITHMA and worked for spas in London for a few years, learned Brain Gym in the USA.

Although our school was founded on aromatherapy we now offer a comprehensive range of natural therapies. These include various respected international natural therapies courses such as therapeutic-reflexology from South Africa, Vietnamese facial reflexology, and Brain Gym. Over the years we have welcomed some notable lecturers from around 10 countries.

The IFPA diploma course has always been our main course: we run four IFPA diploma courses per year and have around 30 IFPA diploma students yearly. At present, this is taught by three aromatherapy instructors, each with a different area of expertise.

Yoshiko Saga is a Brain Gym instructor and also a specialist in primitive reflexes and other movement-base-techniques that make good use of brain. Aki Yokoyama is a researcher into aromatherapy and the autonomic nervous system, and an experienced sports trainer who takes care of many major athletes including an Olympic gold medallist. I specialise in oriental medicine and, inspired by my experience in Vietnam and by Gabriel Mojay, I qualified as an acupuncturist.

Our aromatherapy school has a 25-year history but all the teachers and staff are very active and never stop learning. I think that kind of attitude attracts and motivates students to learn with us.

Our graduates

After graduation, our students take many different directions in their careers. Some start working at spas or in the aromatherapy industry, others set up their own practices. There are also some graduates who, after training with us, use aromatherapy in their original profession (such as medical doctor, nurse, physiotherapist, occupational

therapist, acupuncturist, teacher, and so on). Of course, some of our graduates do not take up work as therapists straightaway but still enjoy treating their family members or doing some volunteer work.

Challenges and rewards

Our school does not have large premises and we have only small number of staff so we face many challenges. But we also have many rewards. We are very happy when we hear from graduates about their aromatic life or success in their work.

Twice a year we hold a kind of 'school festival' to promote natural therapies to the general public and when students and graduates join us as volunteers to help organise this festival, we think that is also our important mission. Having good relationships with our students, graduates or business partners is the most precious thing for us.



Learning about steam distillation is integral to IMSI's IFPA course

Welcome to Japan

We are very much looking forward to the IFPA 2020 conference, the first IFPA event to be held in two languages, being held in Tokyo next March. I am a member of the IFPA working group for the conference so I am excited about welcoming many guests as a host. I am sure that this conference will benefit both overseas and Japanese guests and that all participants will enjoy an academic but enjoyable and relaxing two days.

London, returning to Japan to practise and to teach

News in brief

Allergic reactions

A retrospective database review on contact allergy and allergic contact dermatitis (ACD) caused by lavender was carried out with patients attending clinics at the Skin & Cancer Foundation, Victoria, Australia from 1993 to 2017. Over this period 2178 patients were patch tested with lavender: 58 positive reactions were recorded in 49 individuals and 27 patients were diagnosed with ACD. The most common sources of lavender exposure were personal care products and essential oils. See www. ncbi.nlm.nih.gov/pubmed/30779160

Short courses

Members living in or near Edinburgh may like to know that the Royal Botanic Garden Edinburgh is running several short courses of interest over the coming months. These include: Millefleure Herbal Soaps and Salts,

Medicine from Trees, Herbal Medicine for Men, Herbs of the Highlands, Knowing and Understanding Healing Plants. The Science and Art of Plant Medicines, and Remedies from the Physic Garden. For full details download Short Course brochure at ww.rbge.org.uk

Essential oil combinations combat foot odour

Essential oils have a potential role in treating foot odour (bromodosis) caused by *Brevibacterium* species bacteria. This was demonstrated by a South African study investigating the antimicrobial activity of 119 essential oil combinations against odour-causing bacteria. The study identified many oil combinations with synergistic interactions against the bacteria. The combination of Juniperus virginiana and Styrax benzoin demonstrated synergy

against all three Brevibacterium spp tested, and *J. virginiana* essential oil was responsible for most of the synergistic interactions. See www. ncbi.nlm.nih.gov/pubmed/29579744

Relaxing lavender

Can lavender improve sleep quality, sexual desire, and vasomotor, psychological and physical symptoms in menopausal and elderly women? To find out, five electronic databases were searched for relevant trials. Three trials, in which lavender was used in capsule form or as aromatherapy, showed that it could significantly improve sleep, sexual function, depression, anxiety, and physical symptoms. A significant percentage of subjects reported feelings of relaxation, happiness, and cleanliness after lavender treatment. Free access to full report at www.ncbi. nlm.nih.gov/pmc/articles/PMC6718645/

Making a difference

Massage therapist **Shirley-Anne Foster** practises in five London hospitals for a charity supporting children with cancer and life-challenging conditions. She describes her work with young patients in this rewarding role



feel privileged to have been able to work as a massage therapist for Momentum Children's Charity for the past two years. The charity supports children with cancer and life-challenging conditions, and their families, who live in South West London, Surrey and West Sussex.

The aims of the charity are to help the whole family come to terms with the diagnosis, to improve their ability to cope with the challenges they face, to support every family member's emotional and mental wellbeing, and to help keep the family unit together.

Momentum achieves this by partnering with local hospitals who refer families to the charity's Family Support Team when their child is diagnosed with a serious illness.

Trained family support workers then offer tailored practical and emotional help to the entire family through a unique support programme both at home and in hospital. This programme includes therapy services (not just massage but also music, play and art therapy), counselling, respite holidays, support groups and workshops, and special treats and experiences. At any one time they support around 200 families with a child in active treatment and 75 bereaved families.

I am fortunate to work at five London hospitals for seven half-days a month, alongside the most incredible, professional, kind and caring people. I am part of a team comprising nurses, play specialists, ward receptionists, clinical nurse specialists, and consultants. As an aromatherapist I am very warmly welcomed and accepted as part of that team. Working closely with the multidisciplinary team, and feeding back relevant information about patients, can open the door to help from other departments and professionals.

The warm welcome and acceptance that I receive in all the paediatric wards I work in makes me feel very humble as we are all doing our best to help make each patient's stay in hospital as bearable as possible. I am just one cog in a very big wheel trying to make a difference to so many young lives.

As a massage therapist working in five different

hospitals I see a wide range of patients and a diversity of conditions. In this article I describe my experience of working with just four of these patients and their families, beginning with some notes on my approach to choosing and using essential oils in this context.

Essential oils for children and parents

My choice of essential oils is restricted owing to the nature of the working environment, the patient's illness, the condition of their skin and their age. I realised early on that making up an individual blend for each recipient was not going to work during a busy session, so I pre-blend a selection of essential oils in two different massage media that are safe to use in a hospital environment as well as being therapeutic for the patient.

For use on children, I blend to a 0.5 per cent dilution. I use a blend of *Lavandula latifolia* and *Citrus bergamia* to help treat muscular tension and neuropathic pain, and a blend of *Citrus reticulata* and *Citrus bergamia* to help relieve anxiety and stress. For parents and carers I blend to a two per cent dilution, or sometimes I just use the same blends that I use with the children.

Examples of the blends I use are:

- Lavandula angustifolia/Aniba rosaeodora for emotional support, anxiety and stress
- Pelargonium graveolens/Citrus limon to support emotional balance, particularly in mothers
- Lavandula latifolia/Origanum marjoram to help alleviate muscular aches and pains
- Boswellia carterilCitrus limon to calm the mind, deepen the breath and help lift emotions

Calming effects for mother and son

One morning in March this year I arrived at one of the hospitals I regularly work in and, having discussed the patients on the ward with the nurse in charge and prioritised them in terms of need, I washed my hands and put on a protective apron in an outer room. Then I gently knocked on the door to a darkened private inner room in which James, an 18-month-old boy recently diagnosed with lymphoma, was lying in bed surrounded by all manner of medical equipment.





Left: Shirley-Anne preparing to give a young hospital patient a relaxing massage. Right: Shirley-Anne with colleagues from the multidisciplinary team with whom she works closely.

I had been told that his mother was very quiet and withdrawn and, although very polite to staff, was not very communicative. I have learnt that it is important for me to evaluate the situation in the first few moments of entering the room and, mostly using gut-feel, decide on how I'm going to play it. It's vital that I gain the trust of the parent in a very short space of time and allay any fears the child may have that I'm there to perform a medical procedure.

Clearly, families in these situations are simultaneously going through a whole gamut of emotions, and having to come to terms with a range of entirely (up until this point in their lives) unfamiliar medical terms, medical advice, information and all-consuming stress.

Parents and carers are naturally focusing all their energies on their child and are reticent to accept any help for themselves. I approached James's mother who was sitting at the side of his bed looking tired, wrungout but still strong and stoic. I explained that I was from Momentum Children's Charity, employed as a massage therapist and offered her a massage. Not unexpectedly, she refused. She looked so sad.

I perched on a nearby chair and commented on how tidy she kept the room and from a couple of items she had by her, asked about her home country. My neighbour is from the same country so felt I could talk with some confidence about the cultural importance of strong family ties and support. She started to talk and I offered her a hand massage, gently moving my chair closer. I was with her for about 45 minutes, much longer than planned, and

she talked freely about the stress of coping with the recent diagnosis whilst her little one slept.

After the massage she commented: "I cannot believe I originally said no to a massage when you walked in, I am so pleased I said yes. It has been very draining over the past few weeks and very stressful. I feel so relaxed and so much happier in myself. Just more calm. The massage has helped more than I thought it would. I feel as though I have connected with myself again. Thank you. What a wonderful charity to offer this to parents."

One month later I was back on the ward. Running through the list of patients with the nurse in charge, I noticed that James was still on the ward. I felt sad that he was still in hospital but pleased that I would be able to see his mother. The nurse asked me if I could try to massage James because he would not let anyone go near him. At such a young age, you cannot explain to him why so much intervention is necessary and his reaction to being touched is not uncommon.

This time his aunt was with him, not his mother. She explained that the family had dispatched her sister back home for a rest as she was exhausted. First, I massaged his aunt's hands while James watched. We engaged him in choosing which blend he would prefer (he chose Mandarin and Bergamot) and he allowed me to massage his hands and arms. His little face said a thousand words. He was so trusting and calm allowing me to massage him. The Ward Sister later commented that the change in him was a miracle.



Momentum offers families a wide range of support including complementary, music, play and art therapies.

Breaking down barriers

Working for Momentum Children's Charity means that I work with patients of all ages, from babies to adolescents. One such adolescent was Jess, a 15-year-old girl who had self-harmed and been admitted to hospital.

She had already been in hospital for several days when I met her and was waiting for a meeting to take place between her head teacher, medical staff, her mother and the child-and-adolescent mental health team to decide on the best course of action to help her. The nurses felt that a massage might help her relax, although they were not convinced she would cooperate since she had chosen not to communicate verbally at all with anyone since her admission.

After introducing myself, I sat down next to the bed and chatted very openly to her. Jess communicated by writing everything down on an A4 pad she had open by her side. I offered her a hand massage and was surprised she agreed. Since her arms were still sore but no longer open wounds, we decided lavender would be a good choice of essential oil and I blended it to a 0.5 per cent dilution in organic sunflower oil. We talked about all sorts of things including the colour of her hair which reminded me of sweets I had as a child. As she was constantly writing it meant she only received massage on one hand and arm.

She showed interest in what I was doing and asked about essential oils and how they work, as well as asking me questions about what I did. I spent nearly an hour with Jess during which time she had written several sides of A4

paper. On the last piece, she thanked me for listening and for giving her a massage. The last thing she wrote was "Can I give you a hug?"

Relaxing muscles

On another occasion I had the rewarding experience of working with Emma, a four-year-old who had a condition whereby the muscles in her arms and legs were constantly in a tight spasm. I asked her father to choose the essential oil that he thought Emma would prefer. Most children like citrus smells so we settled on the mandarin blend. I massaged first her hands and arms and then her legs.

At the end of the treatment her father was crying. He told me: "I am not just saying this, she has not been so relaxed the whole time we have been in hospital. She is always so agitated. This is amazing, I just cannot believe it! Her muscles have never been this relaxed, look we can open her hands!" And then: "How amazing that Momentum Children's Charity offers this service to parents and their children. It helps us all to relax." I stayed a little longer and showed him how to massage her legs. He was very grateful for this because now he felt he was able to do something positive for his daughter.

Alleviating stress and anxiety

Another young girl who made an impact on me was nine-year-old Poppy who was very anxious about all the medical intervention she was having to endure. To enable the nursing staff to carry out their duties they needed to give Poppy Entonox (gas and air) to help her cope. On a number of visits I was able to massage her while the nurses carried out their routine cares, and continue to massage her afterwards.

The Clinical Nurse Specialist commented recently: "the influence your massage sessions had on Poppy was incredible. The times when your visits coincided with her treatments allowed us to significantly reduce the use of Entonox, and afterwards she was in a significantly more relaxed place. It meant she was being listened to and accommodated."

Poppy's mother said to me: "From a parental point of view, even the mention that Poppy would be able to benefit from a massage whilst having treatment alleviated her stress and anxiety about attending hospital. This meant that, rather than having tears and emotional fits the night before, as well as fitful sleep (often punctuated with nightmares about treatment scenarios), Poppy would be much calmer and more in control of her emotions. She would then have a more restful sleep and be less stressed and resigned to the treatment the following day.

"It allowed her to be more reflective and even simple things like being able to eat that morning became achievable. Please don't underestimate the power of this therapy. I have seen a significant and positive change in Poppy during the times that you have been able to work with her."

Massage for parents and carers

I have become very aware of the stress, anxiety and guilt parents feel when they have a child in hospital. Many of them have other children at home who also need care and attention. They feel pulled in so many different directions and feel guilty for taking time out to have massage. Accepting what they perceive as a treat for them is hard to do under the circumstances. However, for me it is the difference in perception between a treat and therapy that is more relevant.

It is usual for parents to decline an offer of massage at the first asking. For those who say no, my approach is very gentle, kind and understanding. I try to encourage them to talk and open up a bit and explain why it is important that they have some time out for themselves. Fortunately, it is rare for them not to accept after I have been able to spend a few minutes with them.

In most oncology cases, the patient is in their own room and if it is large enough, I can use a portable couch to massage a parent who is unable or unwilling to leave their child. Even where there isn't a specific room to massage, a seated back, neck and shoulder massage is always achievable.

However, where possible, I always try to encourage a parent to leave the bedside while I massage them – in three of the hospitals I work in a room is allocated with a massage couch that helps me achieve this. Healthcare professionals are pivotal in helping some parents leave the bedside and will look after the child while I give a treatment. They too recognise that parents are better able to cope if they have had even a few minutes to

themselves to recharge the batteries. For some, this may be the only break they have had in weeks or months.

Everyone is so incredibly grateful and appreciative of receiving massage and I feel it is the least we can offer to help them cope with their journey. Parents often feel emotional following a treatment, allowing themselves to let go, possibly for the first time.

We have collated so many wonderful quotes from these amazingly strong parents - here is a small selection.

"The whole time you have been massaging me I have been thinking about the healing power of touch. My life is in turmoil at the moment and I have very little support from my family. You have listened and massaged me and I cannot believe how different I feel. I feel so calm and feel stronger. Touch is incredible. Thank you"

"I have never had an aromatherapy massage before and cannot believe how it makes you so calm! I feel less worried and able to cope, I had not realised how uptight I was until now. I feel so relaxed"

"I am so very grateful for the aromatherapy massage. Thank you so much. Our lives have been turned upside down. My neck and shoulders fell less tense and I feel cared for and listened to. At times I have felt ignored. I am so pleased that we have met people from Momentum Children's Charity today. What an incredible charity. We feel supported and held".

"I am not used to having anything special for me. I have just told my husband you gave me an aromatherapy massage and he thought I was joking. My shoulders have been up around my ears since she was diagnosed and it is hard to relax. Thank you so much, not just for the massage but for the chance to talk too"

This article describes just a small selection of the patients I have worked with and the experiences I have had during my time working for Momentum Children's Charity. It has been an incredibly rewarding journey so far and is only made possible in a hospital setting through the active help and support of all the healthcare professionals I have had the pleasure to work with in the NHS.

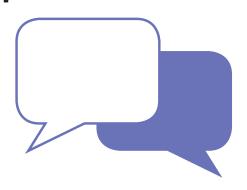
Allowing charities such as Momentum into their place of work says much about their dedication to improving the lives of all in their care and the fact that they are always open and willing to try new ways of working and always putting their patients' best interests first.

Momentum Children's Charity, which celebrates its 15th anniversary this year, relies entirely on individual donations to carry its vital work. For more information visit www.moment-um.org

Shirley-Anne Foster MIFPA is a qualified aromatherapist, reflexologist and Reiki practitioner with 25 years' experience running a successful practice from her own home in South-West London. She originally trained with Clare Maxwell-Hudson and later with Germaine Rich at Aromatherapy Associates.

Discussion corner

The IFPA Members' Facebook page is about communication and mutual support. On it, IFPA practitioners share experience on a wide range of issues and concerns



On the active and very lively IFPA members' Facebook page, members regularly pose questions to each other, as well as to the IFPA. In return, members offer helpful support, advice and suggestions to their peers.

In this regular feature we share responses from some popular recent posts. Please note that, in the discussions outlined below, the responses were posted by members, not by the IFPA.

- I need to replace some towels as they are no longer soft and fluffy. However, I would like to find something more environmentally friendly in terms of washing
- Member discussion: Several members provided recommendations for suppliers of towels and sarongs. Additional suggestions included:
- Massage sheets: Iron them so they look crisp and fresh. They do not cling on to the oil like towels do. A towel placed over the sheet adds warmth
- Very luxurious towels: Dry them on the washing line, then put them in the tumble drier for a couple of minutes to make them nice and soft
- Use disposable towels which can be reused about 150 times. Cover these with a sarong in summer and a throw in winter
- Use recycled couch roll to cover the couch. Ask clients to bring their own towels
- Use sarongs instead of towels. They

- are very economical with washing as you can fit so many in the machine at once. They also dry very quickly. Some members reported that their clients really like sarongs because it feels like getting between bed sheets. Sarongs are particularly preferred by clients who are prone to hot flushes. In colder weather cover with a towel or blanket which nicely offsets the cooler sarong layer
- Use fleece blankets which dry more quickly than towels. They are also lighter, so are a good choice for mobile practitioners who need to carry their equipment
- I have seen many people using peppermint or spearmint essential oil in their toothpaste recipes. Some of them are combined with coconut oil, but others are just putting them in baking soda. My opinion is that, even with carrier oils, it's better not to use these mint essential oils in toothpastes because it might damage organs. What are your thoughts?
- Member discussion: The discussion following this question raised the following points:
- Making your own toothpaste cuts down on plastic waste.
 However, one member reported that her dentist had advised that a combination of baking soda and coconut oil - common homemade toothpaste ingredients - is

- too abrasive for teeth. The taste of these ingredients was also not enjoyed by some who have tried it
- One member suggested that peppermint food flavouring might be a suitable substitute for the essential oils, as it is designed for internal consumption. She explained that she understands that essential oils for the food industry have been processed to make them safe. Another member commented that she has been using peppermint oil in her toothpaste for years with no ill effects. She reported that she also uses clove, tea tree, myrrh, and thyme thymol CT essential oils, mixed into a ready-made toothpaste without the foaming agent
- I am just about to move home. Our new house is very fusty smelling and I think it has suffered from dampness. It has also been empty for a while....I'd love to hear your blends for 'deep home cleanse' so I can try something new
- Member discussion: Some practitioners recommended considering this issue from an energetic viewpoint and suggestions included using Himalayan rock salt and energised water to draw out the moisture, both physically and psychically.

A similar suggestion was to sprinkle rock salt around the house

and clap in every corner to get rid of stale energy, in case the musty smell is coming from 'another level'. Yet another suggestion combined Shamanic and aromatherapy-based approaches, recommending sage, clapping, loud music and favourite scented essential oils.

Other suggestions included:

- Lime and peppermint can be helpful for curry smells. Try dropping the neat oils onto chipboard floor boards and air the whole house
- One member advised to go easy on peppermint oil, after once putting three drops into old trainers to get rid of the smell. She reports that she tasted peppermint for a week afterwards
- Leave out a bowl of salt to see if it gets damp. Infuse the salt with an essential oil of choice, perhaps tea tree
- Make a spray using perfumer's alcohol and lemongrass essential oil, which is great for freshening a stale atmosphere. Try 60ml alcohol and 15 drops each of lemongrass and may chang. Lemongrass was also recommended for cleaning a mouldy greenhouse! You could also try Eucalyptus citriodora and peppermint.
- Do you consider yourself an aromatherapist who offers massage, or a massage therapist who incorporates aromatherapy?
- Member discussion: The lively discussion on this topic included a range of comments from members who consider themselves first and foremost to be aromatherapists, using a combination of different skills, including massage, to support clients.

For some, these skills also include other therapeutic modalities such as reflexology, Reiki, acupressure massage and nutrition. Yoga teaching, herbalism and making essential oil blends for candles also feature in a list of the many skills possessed by IFPA members.

Of course, several members highlighted the fact that they support their clients' healing through the use of essential oils. Members stressed that they blend individually for clients, selecting treatment approaches based on client need.

Some members see themselves as both aromatherapists and massage therapists in equal measure. One explained that, for some clients, massage is the main purpose of the treatment while for others it is aromatherapy. However, for most clients both aspects seem to be equally important. One member pointed out that potential clients tend to look for either a massage therapist or an aromatherapist.

- Am I right in thinking that essential oils shouldn't be used in a treatment with a client who has recently finished radiotherapy for breast cancer? She had the lymph nodes in her armpits removed a few months ago. She would like an Indian head massage, so I would do this without essential oils.
- Members' responses: This question was answered by several members demonstrating a range of experience of working in medical settings, including a response from our colleagues at the *International Journal of Clinical Aromatherapy*.
- There's absolutely reason why not, as long as client has given permission. I cannot think of a physiological reason why not. During radiotherapy many suffer from nausea and it can be triggered by oils that would normally be tolerated well. This might possibly last for a time after treatment? I would say that during treatment, if the oils are tolerated without any nausea, then it should be OK
- Depending on the rest of her health history, there is no reason why you cannot give her your usual Indian head massage with oils because she has received radiotherapy for breast cancer. You will do her the world of good as you work sensitively with her needs
- The myth that massage can spread cancer has been debunked. Just

- remember the basic tenets of clinical aromatherapy massage. Blend for how she is feeling on that day. I would recommend two essential oils maximum and pass them under her nose before you blend. In some instances, radiotherapy changes the sense of smell
- One member also gave some massage guidance, advising that the direction of massage should be away from the lymph nodes

There are excellent training opportunities available to aromatherapists working in the cancer field, such as those offered by The Royal Marsden Hospital in London (www.royalmarsden.nhs.uk), The Christie in Manchester (www. christie.nhs.uk) and independently by Rhiannon Lewis of Essential Oil Resource Consultants (www. essentialorc.com). Additionally, there is a list of links to information sources in the members' section of the IFPA website. Search Resources & Media, then Useful Links & Resources.

- I am savouring the aromas from a freshly opened bottle of Turmeric oil (steam distilled). Do any of you have any experience using it?
- Members' responses: Several members use this more unusual aromatic oil. Most of the comments highlighted the anti-inflammatory actions of turmeric essential oil. Suggestions for use included adding it to balms and blends for muscular and joint aches, including arthritis, for this reason. One member explained that it is also reputed to be carminative to the digestive system.

The aroma of turmeric oil was also discussed. One member pointed out that its aroma is not always considered pleasant and others warned that it can overpower the scent of other essential oils. Essential oils that members find it blends well with, for aromatic purposes, include juniper berry, lemon, cedarwood, frankincense, mandarin and sweet orange.

True or false?



Beware of facsimile essential oils and absolutes, cautions **Ray Gransby**. He explains how to make sure you buy what you think you're buying



uying the quality of essential oils you need can be challenging, as aromatherapists are only too well

aware. Essential oils are variable: they vary in composition, they vary in price and they vary in the way that they are described by suppliers.

Scattered amongst descriptions of named essential oils described as 100 per cent pure and natural are descriptions such as cosmetic grade, type and NI (Nature Identical). These can be found amongst lists of genuine essential oils on suppliers' websites and even experienced aromatherapists can be caught out, as happened recently to a practitioner who contacted the ATC for advice.

So, what are we talking about here? I describe them as facsimile essential oils because that is what they are and that is how they are often described.

To clarify: aromatherapists need to know that these products are perfume compounds. They are manufactured by major fragrance manufacturers to replicate the fragrance of often expensive fragrance ingredients such as hyacinth, honeysuckle or violet leaf absolute, many of which are not used in aromatherapy.

However, they are also manufactured to replicate the fragrance of a range of essential oils and absolutes that *are* used in aromatherapy. The manufacturers intend them to be used as fragrance

compounds to impart a named fragrance to cosmetics and toiletry products and to household goods such as candles, pillow sprays, room sprays etc.

These compounds have an advantage over genuine essential oils because the fragrance composition does not vary and, made with synthesised ingredients, they are cheaper and designed to be difficult to distinguish from the real thing by fragrance alone. Reputable manufacturers will include a marker, usually fragrance ingredients that would never be found in the genuine essential oil but would be obvious in a GC-MS analysis, to ensure that they can be distinguished from genuine essential oils.

Unfortunately, not all suppliers of essential oils to aromatherapists have this facility and it is all too easy for facsimile oils to be supplied unintentionally as the genuine article. If it is not absolutely clear from a supplier's product description that this is not a genuine essential oil, customers can and do buy these products as genuine essential oils.

Some suppliers list them as a separate category within a list of essential oils and absolutes, typically using the name of the oil. For example:

Neroli: Neroli oil blend, also described as Neroli essential oil type, or as Neroli essential oil cosmetic grade. One oil we are aware of at the ATC is made up of 10 per cent genuine neroli oil, 66 per cent fragrance ingredients extracted from natural sources, and essential oils from other species such as Ylang



Make sure you buy genuine essential oils, not facsimiles

ylang, and 24 per cent non-natural fragrance ingredients. Genuine Neroli oil is typically priced at around £26 for 2.5ml, the perfume oil at around £2.

Frangipani: Frangipani absolute NI has been seen listed under essential oils in a category called perfume quality absolutes but described as Frangipani absolute. This is typically made, without any frangipani absolute at all, from fragrance ingredients both nature identical and synthetic, although a small percentage of Ylang ylang is often included to represent the exotic fragrance of frangipani. Genuine Frangipani absolute is priced at around £30 for 2ml, the perfume compound at £5.99 for 2ml.

Lavender: Examples here are: Lavender 40/42 (Lavandula angustifolia) 100% Pure Cosmetic Grade Essential Oil and Lavender FRENCH BLENDED (Type 40-42) -Lavandula Angustifolia (Lavender) Flower Oil.

The situation with regard to lavender is rather more worrying as it is often advertised with aromatherapeutic properties as an alternative to 100 per cent Lavandula angustifolia and appears on a large number of suppliers' websites, often listed with other lavender essential oils. Typically, the product description includes the statement: "Blended mixture of lavender oils (Lavandula angustifolia L.), and other Lavandula spp. and fractions thereof. The ester content is maintained at 40-42% by adjustment with Linalyl acetate'

The Lavandula species referred to is typically lavandin (Lavandula x intermedia/hybrida) although it could easily be Lavandula latifolia (Spike Lavender) or Lavandula stoechas (maritime Lavender). The linalyl acetate content could be of natural or synthetic origin.

Another blend we are aware of

is made with Lavandula angustifolia oil blended with the same major ingredients in the same proportions as found in the genuine oil. This makes it very difficult to separate it from genuine oil using GC-MS if it were not for a small amount of de-terpenated sweet orange extract containing ethyl alcohol and citral (not found in lavender essential oils) added as a marker. Lavender essential oil from Lavandula angustifolia retails at an average of £6 for 10ml while the 40/42 blend retails at around £2.50 - £3.

So, it pays to be careful and to read the fine print in product descriptions. Be vigilant and don't be caught out!

As always, if you would like help and advice on any of the issues raised in this article you are very welcome to contact the Aromatherapy Trade Council (ATC) – see contact details opposite.

Ray Gransby BSc (Hons), Administrator of the Aromatherapy Trade Council, has over 40 years' experience in the cosmetics, toiletry, perfumery, flavour and fragrance, and essential oil industries with many leading multinational companies.

The Aromatherapy Trade Council (ATC), the trade association for the specialist aromatherapy essential oil trade, represents manufacturers and suppliers of aromatherapy products as well as the interests of UK consumers. It aims to ensure that its members market safe, good quality products and supply accurate information for consumers.

For more information contact the Aromatherapy Trade Council, PO Box 219, Market Rasen, LN8 9BR, tel: 016738 44672, info@at-c.org.uk, www.a-t-c.org.uk

News from the CNHC



Measuring outcomes

A recent edition of Massage World features an article from CNHC Chief **Executive and Registrar Margaret** Coats in which she discusses the **Charity Commission Consultation** outcome earlier this year, and what the use of Patient Reported Outcome Measures (PROMS) means for the industry. It also outlines how CNHC registrants and other practitioners can get involved by using Measure Yourself Medical Outcome Profile (MYMOP) and/or Measure Yourself Concerns and Wellbeing (MYCaW) to record PROMS data from patients. Read the article at www.cnhc.org.uk/ sites/default/files/Downloads/Massageworld-article.pdf; for information on MYMOP and MYCaW, see www.cnhc. org.uk/quidance-registrants.

Spreading the word

This summer the CNHC exhibited at the Bloom Show at Olympia London. At the three-day event CNHC staff and Board members engaged with

visitors and distributed a range of CNHC materials, including over 3000 postcards asking visitors if they had checked to see if their practitioner is registered. The question facilitated discussion on the role of CNHC and how CNHC registrants stand up for standards across the industry. This event provided a wonderful opportunity to raise the CNHC's profile with members of the general public.

Practising in London

CNHC-registered practitioners in London may be required to obtain a license to practise. According to the London Local Authorities Act 1991, several therapies on CNHC's Accredited Register, including aromatherapy, may need to be licensed. The London Special Treatments Group has compiled a list of organisations (including CNHC and several of its Verifying Organisations) that qualify for exemption under Section 4 of the 1991 Act. Although most London Boroughs accept the list, some do not - see www.cnhc.org.uk/ london-special-exemption-status for the latest information.

Whistleblowing guidelines

Earlier this year CNHC attended a seminar on safeguarding organised by the Professional Standards Authority (PSA) at which discussions were held around the role of safeguarding and relevant legislation, Duty of Candour and Whistleblowing for Accredited Register practitioners. In line with PSA recommendations, CNHC has developed and published new guidance and briefing notes on Duty of Candour, Whistleblowing, and Declaring unspent convictions. Links to all three documents at www.cnhc. org.uk/sites/default/files/News/Enews-Aug2019-issue118.pdf

For further information about the CNHC and how to register or renew, or about any of the items above - call 020 3668 0406, visit www.cnhc.org.uk or email info@ cnhc.org.uk

Creative ways to boost your business

Whether you are a newly qualified or an experienced aromatherapist you need to promote your business. Here **Fiona Minett** explains how to set about raising your profile



ublic Relations (PR) is about communication and visibility. If you are a business wanting to communicate with an audience, PR will work for you. Regardless of size, regardless of industry, regardless of experience level, there will be areas of the media and routes to visibility that will work in elevating your business and

supporting you in reaching your goals.

I often ask clients if they consider themselves an expert in their field and it is staggering the number of them who don't feel that they meet this criteria. Would you consider yourself an expert? The reality is that if you have trained or studied in an area and practise as a teacher, healer, coach, aromatherapist... you are absolutely an expert.

PR and promotion does not have to be overwhelming. Venturing out of your comfort zone will always be an advantage but taking it step by step will make the whole process more accessible and achievable. In this article I have broken down the process of how you, an expert in your field, can build your presence on- and off-line and get your business and offering seen by your audience.

First steps

Perhaps you are newly qualified, or you have been working in the industry but now want to branch out on your own? Below are some first steps to consider when it comes to getting yourself established and visible:

- Set up a simple website with as much functionality and interactivity as possible. The website should allow people to book appointments and contact you easily. It should help them to get to you know you, the person behind the brand, the one with whom they will ultimately be interacting. People buy people, so remove any barriers to you becoming familiar to them
- **Start blogging on your website**. Blogging is a perfect way to share your expertise and provide an insight into how you work, where you work and what value your offering provides. Share your credentials on your website. What are your qualifications? Do you have

- testimonials that you can post on there? No testimonials, no problem just offer a couple of friends a taster of your service in return for a testimonial and you are up and running
- **Get active on social media**. Find the platform that will speak to your audience for example, Instagram typically speaks to a more youthful audience than Facebook. See your social media as a more fluid extension of your website. Share social proof, invite people into your world, share how you work and ultimately position yourself as an expert by sharing your knowledge. Remember, you will never be able to share so much expertise that your audience will cease to need your service. The more you share, the more trust you build, the better your conversion will be on your social media activity
- Explore networking options both on- and off-line. Online will help you build your social media network, drive website traffic and improve your SEO (Search Engine Optimisation). However, if you are offering an in-person service, you will rarely beat offline networking for opening doors and reaching potential clients. Think about where your ideal customers network but also explore where likeminded businesses network. By building a business network around you, you will create a referral network where you end up with people that you recommend to others and who will recommend you to potential clients
- Reach out to local media. When it comes to reaching out to the media at this stage, start building confidence in the process by nurturing relationships with local media. Regional newspapers are always looking for content, business news and success stories. Reach out to your local paper and tell them about the launch of your business, your latest news or the unprecedented success you've had in the last six months for example. Don't be afraid to ask the contacts you make here what stories they like to receive and what they are often on the lookout for

Developing your profile

Perhaps you've established your online presence and built a great network around you but now you're looking to

take it all up a notch. Thinking about how to get into the mainstream media to reach your target audience with a little more power and scale?

- Content strategy. Now is the time to really start thinking about a content strategy what content are you sharing and how does it build a bigger picture? With industry experience behind you, consider building a library of content that is relevant and informative to your target audience. Think about how you can distil this content through your blog, newsletter, social media and beyond, with the strategic aim of growing your audience or client base. A strong content marketing strategy will position you well as a leader in your field, as an educator and will lay the foundations for the ultimate proof of expertise writing a book
- **Media coverage** is something that you can really start developing at this stage of your business, in a number of ways. Build connections with your regional media, both news media and lifestyle magazines, and pitch yourself as a provider of expert content. What can you share that will inform and interest their readers?
- Share your expertise. Develop the notion of sharing your expert content, professional insight and your offering itself. Look at the consumer or the relevant trade-facing media that speaks to your target audience, and explore where you could sit within their content. There is abounding opportunity across the media: interviews, informative features, reviews, reader promotions, product placement, expert Q&A features, as well as guest articles

Experience and challenge

To those of you with over a decade working as an expert in your field, I pose this challenge - are you doing any of the outreach activities listed below?

- Step up your PR activity and outreach. Make yourself visible to broadcast opportunities across the media by aligning your expertise with wider industry trends or industry developments that are going mainstream. What topics can you speak about and who would want to hear about them? Perhaps there are pressing issues around regulation in the aromatherapy industry that you feel you need to communicate to a wider audience: make your case. Be a spokesperson for the industry and reach out to platforms like Bloomberg, BBC Business, TRT World and share your perspective and why a wider audience needs to be aware of these issues
- 'Newsjacking' is the process of using topical or trending news stories to generate high octane coverage and much of this type of opportunity is presented to those that are experts in their field. Building on from connecting with broadcast opportunities, following the news and reacting to it gives you the platform to be a powerful spokesperson for your industry
- Speaking opportunities are a great way to connect with audiences and educate. As an expert, there is a mantle of education that you inevitably take on; both for those in the industry around you, but also for the wider public. Speaking at industry events, consumer wellness/wellbeing events, trade shows etc, gives you

- an elevated platform for visibility and sharing your key messages
- Become a thought leader in your industry. Your
 opinions and insight will hold great value and any way
 that you can share this will lend even more gravitas
 to you, your personal brand and your business. The
 ultimate way to position yourself as a thought leader
 and champion for your industry? Write a book

There are many ways to creatively promote your businesses and the key thing to remember is that nothing is out of reach. If you have a service to offer, a story to tell or insights to share, there will be a wealth of opportunity out there for you.

Top tips

Here are some quick, easy-to-action top tips when it comes to getting visible and tackling some of your own PR: **JournoRequest:** Follow the hashtag #JournoRequest on Twitter for 'of the moment' requests for content, quotes and case studies from journalists from all corners of the media.

Subscribe to GetQwoted and HARO: These are free platforms that share media opportunities and facilitate you getting in direct content with the journalist requesting the information.

Tap into independent media: There is a real rise in the number of independent magazines, especially in the health and wellness sector, as well as online platforms. These are often open to article contributions, so share some of your expert content.

Connect with freelance journalists: This can be a great way in to larger publications, as they will compile information for an article either as a direct result of a magazine commission or in order to pitch a story to a magazine. A simple Google search for journalists in your sector will throw out a range of contacts for you to reach out to.

Get out and about and network: You can never do too much networking; every meeting, every content, every event could present opportunity for you.

Apply for industry-specific, and general business, awards: Winning or being shortlisted can give great exposure as well as the opportunity to obtain strong regional or trade coverage.

You offer a professional service and you know you are an expert in your field so you need to make sure as many potential clients as possible hear about what you can offer them. As you can see from my suggestions above, it doesn't have to cost the earth to promote and grow your business – just some time, effort, confidence and imagination.

Fiona Minett is an expert consultant on Consumer Public Relations and a long-time supporter of small business. Before setting up her consultancy she spent six years running a PR agency specialising in work with small businesses and start-ups, helping them to promote their business ventures through effective public relations strategies.

Essential oil profile: Black spruce

Deborah Franks looks at the chemical constituents, properties and uses of an uplifting aromatic essential oil



he Black spruce (Picea mariana), a North American species of the genus Picea (Pinaceae family),

grows in cold, high latitude areas of Canada. The pale clear oil has low viscosity and coniferous, camphoraceous and sweet fragrance notes. This produces a calming but uplifting 'Christmas tree' aroma.

Other trees in the genus - eg *Picea engelmanniim* (Engelmann spruce) and *abies* (Norwegian spruce) – also produce essential oils. However, although related, they may have differences in characteristics such as aroma and bioactivity.

Black spruce is empirically considered to be a general restorative, respiratory stimulant and anxiolytic, particularly where low mood arises from stress, extreme fatigue or chronic conditions. In support of this view we can explore the oil's major chemical constituents since there is little available research on the oil itself.

Chemical composition

A typical composition of Black spruce is esters and monoterpenes, with low levels of sesquiterpenes and alcohols, and extremely low levels of oxides and ketones (LabAroma.com).

Esters

The largest single component is bornyl acetate at 32%. Esters are typically calming and sedative with pleasant fruity aromas. They are considered adaptogens, substances that support the balance of physiological processes and promote homeostasis.



Research supports specific analgesic and anti-inflammatory actions of bornyl acetate in inflammatory lung conditions (NaChen et al 2014) and osteoarthritis (Yang et al 2014). It may also help counter negative effects of over-stimulation without affecting task performance eg those experienced when working with display screens (Matsubara et al 2011).

Monoterpenes

Monoterpenes in Black spruce typically account for around 56% of the oil. They include camphene (18%), a and b-pinene, d-limonene and beta-carene. Monoterpenes generally display anti-microbial, tonifying, decongestant and analgesic effects and are easily absorbed via the mucous membranes of the respiratory tract when inhaled. Cyclical monoterpenes present, including d-limonene, aid skin penetration in topical applications.

Camphene is considered to have antioxidant properties, useful in situations of chronic inflammation and emotional stress where oxidative stress has a control role. This includes inflammatory lung conditions such as asthma (Tiwawi 2009). Anti-tumoral

action on melanoma cells has also been noted (Girola 2015).

The compounds delta-3 carene, a- and b-pinene, typically comprising over 20%, are thought to have a modulating effect on the adrenal cortex and cortisol production. This does not necessarily mean that they work at the steroidal level but rather provide strengthening and tonifying support to the adrenals. The body's cortisone balance is very important, both physically and mentally, with needs changing depending on circumstances. Cortisone-like substances may help the body regulate levels, aiding stress responses, glucose metabolism, controlling blood pressure and mood.

Two forms of a-pinene and b-pinene occur naturally, the (-) and (+) isomers. The (+) isomers of both are thought to be more common in the North American spruce with the (-) isomers more common in the European (eg Norwegian) spruce. The (+) isomers have research-based evidence for specific antimicrobial properties against Candida and MRSA (da Silva 2012), and for their effect on brain waves. In women they were found to increase alertness, cognitive mental activity and creativity, and minimise depression. In men +-a-pinene decreased brain waves involved in daydreaming but +betapinene had no effect (Kim et al 2018).

It is thought that a-pinene is a GABAergic monoterpene (working as a sedative via the benzodiazepine receptors) and research in 2016 identified these actions in the (-) isomer (Yang 2016). It is possible that GABAergic action is greater in other spruce oils where the (-) isomer is more prevalent. This better supports an empirical assessment of Black spruce as having anti-depressant

qualities connected to low mood or melancholy through loss of vitality, rather than a deeper emotional- or chemical-based depression for which other oils may be more suitable.

Summary

Black spruce can be used in massage, diffusion, nebulisers and inhalers and may be helpful in blends for respiratory tract conditions including cough, bronchitis, congestion and asthma. It may support breathless, fatigued situations eg palliative and end of life care, and chronic painful, exhausting conditions eg osteoporosis and temporomandibular joint dysfunction. It may help in blends for aching muscles where stress and tension are a contributing factor and soften the effects of more pungent camphoraceous oils, eg rosemary and Spanish sage which are often used for nervous exhaustion.

Consider mixing Black spruce with bergamot for psychological aspects, with ginger and black pepper for the lungs when fatigued, lethargic and cold, with a sweet marjoram/orange blend for tired muscles.

Note: Sustainability and safety Black spruce is currently listed as status LC (least concern) on the IUCN Red List. It is nontoxic and

nonirritant at low dilutions but prone to oxidisation due to the high monoterpene level, particularly limonene and delta-carene. Sensitisation and irritation of the skin and mucous membranes are therefore a risk. Use an appropriate antioxidant when making products with it, eg Rosemary CO2 extract or vitamin E for oil-based products, and store the oil in a dark, airtight container in a fridge.

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NEXT ISSUE

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The IFPA welcomes editorial contributions to In Essence. These can be short items such as news reports, letters, or reviews, or longer article contributions. For our Spring/ Summer 2020 edition we are particularly looking for article contributions or case studies (1000-3000 words) on aspects of aromatherapy practice or essential oils.

For further information about writing for In Essence – or to submit editorial material for our next edition - please contact the Editorial Team via admin@ifparoma.org

HAVE YOU MOVED?

If you have recently changed your personal or business contact details do make sure you inform the IFPA office as soon as possible.

Whether you have a new postal address or have just changed your telephone number or email address it's important to let the office know so that records can be kept up to date and that you continue to receive all IFPA communications.

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Republic of Ireland

Obus School of Healing Therapies

3-4 Mill Lane, Leixlip Co Kildare, W23 X2P7 Tel: 00 353 1 6282121 info@obus.ie www.obus.ie

Russia

The School of professional aromatherapy "Aromatniy Ray" (Aroma Paradise)

Sverdlovskaya oblast Kamensk-Uralskiy, Pionerskaya 55 Tel: +7 950 2076967 E-mail: aromaray@mail.ru Web: www.aromaray.ru

Scotland

ESHA - Edinburgh School of Holistic Aromatherapy

C/o The Yards,11 Back Stile Kingsbarns, Fife, KY16 8ST

Singapore

Nila Singapore Pte Ltd

24 Sin Ming Lane, #05-103 Midview City

Singapore, 573970
Tel: 01473 736256 (UK) & 0065911978822 (Singapore) julie.e.foster@outlook.com adeline@nilasingapore.com www.aromanila.com

Switzerland

Sela Zentrum GmbH

Website: www.sela.info

Schule für integrale Gesundheit und Aromatherapie Gartenstadtstrasse 7, 3098 KÖNIZ, Switzerland Tel: 0041 31 842 12 00 E-mail: info@sela.info

Taiwan

AromaHarvest International

10F.-1, No.191, Sec. 4 Jhongsiao E. Rd, Da-an District, Taipei City, 10690 Contact: Yuan-Lyn Chang Tel: 886 287717050 aroma@tw-aa.org www.tw-aa.org

Aroma Wish Aromatherapy Academy

6F-1, No 118 Da-Dun 20th St, Taichung City 407, Taiwan Email: academy@aromawish.com Tel: 886-4-23108982

IAA Taiwan

17F-3, No 88, Jhongyang E. Rd, Jhongli City Taoyuan County, 320, Taiwan Tel: 00886 34258658 E-mail: iaa@iaaiaa.org.tw Web: iaaiaa.org.tw

Colorys Health & Beauty Consultancy Co Ltd

3F-3 No 150, sec 1, Heping W. Rd, Jhongjheng Dist Taipei City 10079, Taiwan Tel: (02) 2301 0966 colorybeauty@yahoo.com.tw www.colorys.com.tw

Namaste Aromatherapy Academy

53 Chungmei 15th Street, HUALIEN CITY Hualien, 970, Taiwan Contact: Sue Chen Tel: +88638224133

E-mail: namaste.aroma@gmail.com

Web: https://www.facebook.com/namaste.aroma

Neal's Yard Remedies Aromatherapy Academy (Taiwan)

10F, No 66, Sec. 3, Nanjing E. Rd, Zhongshan Dist Taipei City 104, 10487, Taiwan Tel: +886 2 2555 6608 ex205 erin.chen@vitel.com.tw www.nealsyardremedies.com.tw

United Arab Emirates

The Holistic Institute

PO Box 31904, Dubai UAE Contact: Sunita Teckchand Tel: 00 971 15065 75628 Sunita@theholisticinstitute.org www.theholisticinstitute.org

USA

Aromahead Institute, School of Essential Oil Studies

Montana, United States, 59801 Tel: 406-531-2923 E-mail: team@aromahead.com Web: www.aromahead.com

AromaticStyle

7000 Ramsgate Ave Los Angeles, CA, 90045 Contact: Tomoko Holmes E-mail: tomoko@aromaticstyle.com Web: www.aromaticstyle.com Tel: 310 968-3016

The Institute of Spiritual Healing & Aromatherapy, Inc

PO Box 32097, Knoxville, TN, 37930 Contact: Margaret Leslie staff@ISHAhealing.com www.ISHAhealing.com Tel: 856-357-1541

Wales

Cardiff Metropolitan University

Cardiff Metropolitan University Cardiff School of Health Sciences Llandaff Campus, Western Avenue Cardiff CF5 2YB Tel: 029 2041 6070 iduffv@uwic.ac.uk

CONTINUING PROFESSIONAL DEVELOPMENT

November

- 15 Aromatherapeutic facial, with Jane Rose, Stour Row, Dorset, £110 SEED
- 15 Stress, emotional wellbeing and essential oils, Winchester, £100 WSA
- 15-17 Massage for cancer care, with Martina Connolly, OBUS Wellness Centre, Leixlip, Ireland, € 300 OBUS
- 16-17 Reflexology through the meridians, with Denise Hanlon, Courtyard Hotel, Leixlip, Ireland, €225 OBUS
- 22-24 Lymphatic drainage massage, with Martina Connolly, OBUS Wellness Centre, Leixlip, Ireland, €225 OBUS
- 26 Tsuboki Japanese hand massage, with Anne Parry, Ash, nr Aldershot, Surrey, £120 SEED
- 26-27 Lymphatic drainage massage, with Jane Rose, Stour Row, Dorset, £210 SEED
- 27 Auricular reflexology, with Denise Hanlon, OBUS Wellness Centre, Leixlip, Ireland, €125 OBUS
- 27 Tsuboki Japanese foot massage, with Anne Parry, Ash, nr Aldershot, Surrey, £145 SEED
- 29 Hormones, menopause and essential oils, Winchester, £100 WSA

December

- 2-3 Palliative care & complementary medicine, with Bridget Purser, Ash, nr Aldershot, Surrey, £217.50 SEED
- 6 Aromatherapy and pain management, Winchester, £100 WSA
- 7 DIY natural lip care, with Patricia Wong, Singapore, £85 (SGD 148) NS
- 7 DIY natural foot spa, with Patricia Wong, Singapore, £85 (SGD 148) NS
- 7 Manual lymphatic drainage, with Sunita Teckchand, Dubai, UAE, £400 THI
- Trigger point massage, with Jane Rose, Ash, nr Aldershot, Surrey, £120 SEED
- 11 Strain/counter-strain techniques, with Jane Rose, Ash, nr Aldershot, Surrey, £120 SEED
- 12-13 Ayurvedic facial, with Jane Rose, Ash, nr Aldershot, Surrey, £245 SEED

January 2020

- 3-4 Essential oils blending, Shanghai, China, ¥2,800 CAA
- 11 Aromatherapy for pregnancy, with Sunita Teckchand, Dubai, UAE, £400 THI
- 11-13 'M' Technique[®] practitioner course, with Audrey Quinn, Hamilton, Scotland, £220 TMT
- 17 Cancer care and aromatherapy, Winchester, £100 WSA
- How to select essential oils by Triangular analysis, French chemical molecules, with Yao Yuxian, Beijing, China, ¥800RMB AT
- 18-19 Lymphatic reflexology, with Denise Hanlon, Courtyard Hotel, Leixlip, Ireland, €225 OBUS
- 20-24 Aromatherapy practical application, with Jane Rose, Ash, nr Aldershot, Surrey, £600 SEED

- 20-21 Aromatherapy practical taster, with Jane Rose, Ash, nr Aldershot, Surrey, £250 SFFD
- 28 Tsuboki Japanese face massage, with Anne Parry, Ash, nr Aldershot, Surrey, f135 SEED
- Tsuboki Japanese face massage levelwith Anne Parry, Ash, nr Aldershot,Surrey, £145 SEED
- Aromatherapy and mental health and wellbeing, Winchester, £100 WSA
- 31-2 Return to practice, with Jane Rose, Ash, nr Aldershot, Surrey, £315 SEED

February

- 1-3, Aromatherapy in children care, Shanghai, China, ¥3,180 BIO
- 1-2 Holistic facial, with Ines Willis, Covent Garden, London, £290 NYR
- 1-2 Introduction to Ayurvedic medicine, with Doug Satyma, OBUS Wellness Centre, Leixlip, Ireland, €225 OBUS
- 2 Film Perfume feedback: Essential oils on the emotional level, subconscious, with Jiewen Chen, Beijing, China, ¥600RMB
- Aromatherapy for the chakras, with Louise Mac, Hinckley, Leicestershire, £120 PPA
- 4 Carrier oils, with Louise Mac, Hinckley, Leicestershire, £120 PPA
- 4-5 Aromatherapy & Ayurveda, with Jane Rose, Stour Row, Dorset, £240 SEED
- 4 'M' Technique[®] practitioner course, with Jane Sheenan, Norwich, £220 TMT
- 7 Aromatherapeutic facial, with Jane Rose, Stour Row, Dorset, £110 SEED
- 7-9 ACE cupping massage level 1, with Martina Connolly, OBUS Wellness Centre, Leixlip, Ireland, €275 OBUS
- 8 Reiki level 1, with Christine Courtney, OBUS Wellness Centre, Leixlip, Ireland, €125
- 9 Personal sharing session- Daily use and experience of hydrolats and carrier oils, with Jiewen Chen, Beijing, China, ¥600RMB AT
- 11 'M' Technique[®] practitioner course, with Jane Sheenan, Norwich, £220 TMT
- 15-17, Aromatherapy in maternal care, Shanghai, China, ¥3,180 BIO
- 13 Care of the elderly and aromatherapy, Winchester, £100 WSA
- 17 Pregnancy massage, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- 18 Pregnancy and aromatherapy, with Louise Mac, Hinckley, Leicestershire, £120 PPA
- 18-21 Remedial & sport injuries massage, with Jane Rose, Ash, nr Aldershot, Surrey £480 SEED
- 19 Baby and child massage, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- 20 Babies, children and aromatherapy, with Louise Mac, Hinckley, Leicestershire,
- 21-23 Aromatic kinesiology level 1, with Robbie Zeck, OBUS Wellness Centre, Leixlip, Ireland, €395 OBUS

- 6 Reiki authentic voice, with Christine Courtney, OBUS Wellness Centre, Leixlip, Ireland, €125 OBUS
- 27 Pregnancy and aromatherapy, Winchester, £100 WSA
- 29 Basic reflexology, with Sunita Teckchand, Dubai, UAE £400, THI

March

- 1 Aromatic chemistry, Shanghai, China, ¥2,800 CAA
- 2-3 Chemistry of essential oils, with Sarah Robinson, Hinckley, Leicestershire, £240 PPA
- 3-4 Hot stone body & reflex massage, with Anita James, Ash, nr Aldershot, Surrey, £210 SEED
- 7 Making natural creams & lotions, with Christine Courtney, OBUS Wellness Centre, Leixlip, Ireland, €150 OBUS
- 7 Aromatic acupressure head massage, with Jo Kellett, Brighton, £135 FTS
- 9 Care of the elderly and aromatherapy, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- 10 Cancer care and aromatherapy, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- 10-11 Ayurvedic facial, with Jane Rose, Ash, nr Aldershot, Surrey, £245 SEED
- 11 Aromatherapy for hospice care, with Louise Yarker, Hinckley, Leicestershire, f 120 PPA
- 19 Respiratory conditions and aromatherapy treatments, Winchester, £100 WSA
- 12 Ayurvedic chakra basti, with Jane Rose, Ash, nr Aldershot, Surrey, £110 SEED
- 12 Respiratory conditions and aromatherapy, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- Pain management, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- Basic Swedish massage, with Sunita Teckchand, Dubai, UAE, £400 THI
- 16-17 Aromaflexology, with Louise Mac, Hinckley, Leicestershire, £240 PPA
- 17 Tsuboki Japanese foot massage, with Anne Parry, Ash, nr Aldershot, Surrey, £145 SEED
- 18 Massage refresher, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- 18 Tsuboki Japanese hand massage, with Anne Parry, Ash, nr Aldershot, Surrey, £120 SEED
- 19 Theory refresher, with Louise Yarker, Hinckley, Leicestershire, £120 PPA
- Pregnancy massage, with Jane Rose,Stour Row, Dorset, £105 SEED
- 25 Aura/energy massage, with Jane Rose, Stour Row, Dorset, £120 SEED
- 28 Lomi lomi massage, with Heather Larmour, Courtyard Hotel, Leixlip, Ireland €225 OBUS
- 28-29 Aromatherapy for pregnancy, with Jo Kellett, London, £260 FTS
- 30 Aromatherapy detox for cellulite, with Louise Mac, Hinckley, Leicestershire, £120 PPA
- 31-1 Fingerlift facials, with Louise Mac, Hinckley, Leicestershire, £120 PPA

CONTINUING PROFESSIONAL DEVELOPMENT

- 2-3 Indian head massage, with Louise Mac, Hinckley, Leicestershire, £120 PPA
- 4-5 Ayurvedic Indian head massage, with Jane Rose, Stour Row, Dorset £225 SEED
- 7-8 Ayurvedic body massage, with Jane Rose, Stour Row, Dorset £225 SEED
- Cranial sacral skills, with John Wilks, Ash, 16-17 nr Aldershot, Surrey, £240 SEED
- The art of blending essential oils, with 18 Sunita Teckchand, Dubai, UAE, £380 THI
- 'M' Technique[®] practitioner course, with Loretto Cattell, Sutton Coldfield, £220
- 'M' Technique[®] practitioner course, with 25-26 Philippa Hunter, Stroud, Glos, £220 TMT
- 25 Abdominal massage, with Sally Tyler, Stour Row, Dorset, £120 SEED
- 28-29 Aromatherapy & Ayurveda, with Jane Rose, Ash, nr Aldershot, Surrey, £240 **SFFD**
- 25-26 Holistic facial, with Ines Willis, Covent Garden, London, £290 NYR

- 9-10 Ayurvedic facial, with Jane Rose, Stour Row, Dorset, £245 SEED
- 12 Deep tissue massage, with Jane Rose, Stour Row, Dorset, £120 SEED
- 13 Hands free massage, with Jane Rose, Stour Row, Dorset, £105 SEED
- 15 Soft tissue dysfunction and muscle energy techniques, with Jane Rose, Stour Row, Dorset, £120 SEED
- Manual lymphatic drainage, with Sunita 16 Teckchand, Dubai, UAE, £400 THI
- 'M' Technique® practitioner course, NHS 16-17 Natural Health School, Harrogate, £220
- 17 Facial rejuvenation massage, with Vicki Kaufmann, Covent Garden, London,
- Ayurvedic body massage, with Jane Rose, 19-20 Ash, nr Aldershot, Surrey, £225 SEED
- Ayurvedic Indian head massage, with Jane Rose, Ash, nr Aldershot, Surrey, £225 SEED

- 6-10 Aromatherapy practical application, with Jane Rose, Stour Row, Dorset, £600
- 6-7 Aromatherapy practical taster, with Jane Rose, Ash, nr Aldershot, Surrey, £250 SEED
- 13 Aromatherapy for pregnancy, with Sunita Teckchand, Dubai, UAE, £400 THI
- 16 Aromatherapeutic facial, with Jane Rose, Ash, nr Aldershot, Surrey, £110 SEED
- 17 Pregnancy massage, with Jane Rose, Ash, nr Aldershot, Surrey, £105 SEED

4-5 Holistic facial, with Ines Willis, Covent Garden, London, £290 NYR

- 5-10 Lavender aroma journey, with Adeline Lim, Bulgaria, £1400 (SGD 2540) NS
- 11-12 Aromatherapy for fertility, with Jo Kellett, London, £260 FTS
- 28 Aura/energy massage, with Jane Rose, Ash, nr Aldershot, Surrey, £120 SEED
- 29-30 Lymphatic drainage massage, with Jane Rose, Ash, nr Aldershot, Surrey, £210 **SEED**

8-9 Indian head massage, with June McEnroe, Covent Garden, London, £290

- 3-4 Holistic facial, with Ines Willis, Covent Garden, London, £290 NYR
- 26 A seasonal blend of essential oils With Kawai Wat, Beijing, China, ¥600RMB AT

22 Facial rejuvenation massage, with Vicki Kaufmann, Covent Garden, London, £160 NYR

Online courses

- Aromatherapy for Natural Living, online course, 36 hours, Instructor: Andrea Butje, \$275 USD. http://aromahead.com/ courses/online/ aromatherapy-for-natural-living
- Aromatherapy for Massage Therapist, online course, 36 hours, Instructor: Andrea Butje, \$350 USD.http://aromahead.com/courses/online/ aromatherapy-for- massage-therapists
- Body Butters and Lip Balms, online, 14 hours, Instructor: Andrea Butje, \$225 USD http:// aromahead.com/courses/on-line/body-buttersand-lip-balms
- Component Blending, online, 28 hours, Instructor: Andrea Butje, \$450 USD http:// aromahead.com/courses/online/ componentblending-online
- How to Protect Your Family from Colds and Flu Using Essential Oils, online video class, 3 hours, Instructor: Andrea Butje, \$50 USD http:// aromahead.com/courses/ online/how-to-protectyour-family-from- colds-and-flu-using-essentialoils
- Anatomy & physiology level 3 diploma, 12 CPD points, £65, phone for details ETS
- Pathology level 3 diploma, 12 CPD points, £49.99, phone for details ETS
- Health & safety level 3 diploma, 12 CPD points, £49.99, phone for details ETS
- Anatomy & Physiology Level 3 Diploma, 12 CPD points, £65 ETS
- Pathology Level 3 Diploma, 12 CPD points, £49.99 ETS
- Health & Safety Level 3 Diploma, 12 CPD points, £49.99 ETS
- Any date, Anatomy and physiology, online, £65
- Any date, Health and safety, online, £49.99 EST
- Any date, Pathology, online, £49.99 EST
- Series of online CPD short courses/seminars, aimed at IFPA or NAHA members and student members. £5 per course AT

Courses with flexible dates

- Chemistry A one-day course for aromatherapists, with Debbie Moore £100, dates and venues flexible, distance learning available. Email for details THTA
- Aromatic support for headaches and migraine, with Debbie Moore £100, dates and venues flexible, distance learning available. Email for details THTA
- Aromatherapeutic treatments for respiratory conditions, with Debbie Moore £100, dates and venues flexible, distance learning available. Email for details THTA
- Tranquil facials, with Debbie Moore £100, dates and venues flexible. Email for details THTA
- Skin disorders and wound management, with Debbie Moore £100, dates and venues flexible, distance learning available. Email for details
- Perfume-making workshop, half day workshop with Debbie Moore £50, dates and venues flexible. Email for details THTA
- Aromatic reflex treatment. Course requirements: Anatomy and aromatherapy qualifications. Price per day: £90 or £150 for one-to-one tuition EH
- Hot stone massage (1 or 2 days). Course requirements: Anatomy and body work/massage qualifications. Students must complete Day 1 of Hot Stone Massage course before attending Day 2. Price per day: £90 or £150 for one-to-one tuition EH
- Indian head massage. Course requirements: Anatomy and aromatherapy qualifications. Price per day: £90 or £150 for one-to-one tuition EH
- Hopi ear candling, Course requirements: Anatomy and body work/massage qualifications. Price per day: £90 or £150 for one-to-one tuition EH
- Introduction to aromatic acupressure. Course requirements: Anatomy and aromatherapy qualifications. Price per day: £90 or £150 for one-to-one tuition EH
- Aromatherapy and colour. Course requirements: Aromatherapy qualification. Price per day: £90 or £150 for one-to-one tuition EH

Distance Learning Courses with flexible dates:

- Essential oil chemistry, with Karen Sherwood, £80. Details: http://essentiallyholisticonlinetraining.com/cpd-hive-2/
- Introduction to natural perfumery, with Jennifer Rhind, £160. Details: http://essentiallyholisticonlinetraining.com/cpd-hive-2/
- Energetic protection and working in sacred space, with Arya Ingvorsen, £60. Details: http:// essentiallyholistic-onlinetraining.com/cpdhive-2/

- Ongoing IFPA Level 3 Anatomy and physiology course, with Essential Training Solutions, online, £65 ETS
- Ongoing IFPA Level 3 Pathology course, with Essential Training Solutions, online, £49.99 ETS
- Ongoing IFPA Level 3 Health and safety course, with Essential Training Solutions, online, £49.99 ETS

*DL: Course also available as distance learning

Contact details for IFPA schools and centres | First Aid Courses

IFPA-Schools CPD

AT Aromatime email via website www.aromatime.uk

AH Aromahead
Tel: 727-469-3134
email: team@aromahead.
com
www.aromahead.com

BIO Bio Tempo Herbal Therapies Studies Centre – See page 58

CAA Chinese Academy of Aromatherapy Tel: 0086 16621268991 email: 363725820@qq.com

EH Essentially Holistic
Tel: 01773 650162 or 07951
701406
email: essentiallyholistic@
gmail.com
www.essentiallyholisticonlinetraining.com

FTS From the Seed – See opposite

NS Nila Singapore Pte Ltd See page 59

NYR Neal's Yard Remedies
Tel: 02031195904
email: courses@
nealsyardremedies.com
www.nealsyardremedies.com

OBUS Obus School of Healing Therapies Tel: 0035316282121 email: info@obus.ie www.obus.ie

PPA Penny Price Aromatherapy
Tel: 01455 251020
email: courses@penny-price.
com
www.penny-price.com

SEED The S.E.E.D Institute
Tel: 01963362048/07761
185630
email: Info@theseedinstitute.
co.uk
www.seedinstitute.co.uk

THTA Tranquil Heart Training
Academy (Courses offered in
the Midlands)
Tel: 07914 869792
email: tranquilheart.2014@
gmail.com
www.tranquilheart.co.uk

THI The Holistic Institute See page 59

TMT The 'M' Technique See below

WSA Winchester School of Aromatherapy Tel: 01962 808677 email: wsabookings@ outlook.com

IFPA CPD Centres

The IFPA has approved some CPD providers offering e-learning courses – see below for current list of providers in this category.

Body Wisdom School of Healing Therapies Unit 12 B1 Cleveragh Business Centre

Cleveragh Business Centre Co. Sligo, F91RR94 Tel: 00 353 87 418 2788 mconnollybodywisdom@eircom.net

Brighton Holistics

The Conifers 206 Warren Road Brighton, BN2 6DD Tel: 01273 672690 email: jon@brightonholistics.co.uk Website: www.brightonholistics.co.uk

Essential Training Solutions Ltd (ETS)

PO Box 12565 Sawbridgeworth CM21 1BL Tel: 01279 726800 support@essential-training.co.uk www.essential-training.co.uk

From the Seed (FTS)

Contact: Jo Kellett Tel: 07970 773030 jo@fromtheseed.co.uk www.fromtheseed.co.uk

Integrative Therapies Training Unit (ITTU)

The Christie NHS Foundation Trust Wilmslow Road Manchester, M20 4BX Tel: 0161 4468236 joanne.barber@christie.nhs.uk www.christie.nhs.uk/pro/cs/comp/training.aspx

The 'M' Technique® 2 Rosebank Villas

2 Rosebank Villas Churchfield Road,Stroud Gloucestershire, GL5 1EH Tel: 01453 763103 www.rjbuckle.com

FIRST AID COURSES

The courses listed below are run by IFPA-accredited schools – contact details opposite.

November

First aid for complementary therapists, with Mark & Nina De Pina Perou*, Ash, nr Aldershot, Surrey, £100 SFED

February

29 First aid for complementary therapists, with Mark & Nina De Pina Perou*, Stour Row, Dorset, £100 SEED

April

First aid for complementary therapists, with Mark & Nina De Pina Perou*, Ash, nr Aldershot, Surrey, £100 SEED

June

20 First aid for complementary therapists, with Mark & Nina De Pina Perou*, Stour Row, Dorset, £100 SEED

*Bowen practitioner and aromatherapist Nina de Pina Perou has served as a trainer and examiner in the British Red Cross Commercial training team. Retired police officer Mark de Pina Perou is a volunteer member of the British Red Cross and also a trainer and examiner for the training team. Both volunteer for South East Coast Ambulance Service as Community First Responders.

Please note: A valid First Aid certificate is no longer a condition for all practising IFPA membership. While the IFPA Board strongly recommends that members keep their First Aid certificate up to date, it will no longer enforce this as a membership requirement.

Sharing experience

Although there is a wealth of knowledge and expertise within the IFPA membership, few members currently share their professional experience through *In Essence*.

If you have an article or case study to contribute, or shorter items such as news stories, letters or reviews, please contact the IFPA office (details page 3) for information on how to submit editorial material.

NOTES ON CPD

All IFPA Full and
Associate members must
complete 12 Continuing
Professional Development
(CPD) points per year
to maintain their
membership. CPD is
essential to maintain and
improve knowledge and
skills and to demonstrate
commitment, both to the
aromatherapy profession
and to the quality of IFPA
members' practice.

You can earn CPD points by completing courses but there is also a range of other eligible activities, such as attending IFPA conferences and Annual General Meetings, reading and reviewing articles and books, attending regional group meetings with a speaker, aromatherapy webinars, and giving a talk to promote aromatherapy. A copy of the IFPA **Activities and Points Sheet** is available to download via the members' area of the IFPA website.

You need to keep a record of the CPD activities you have completed and the number of points each activity is worth, and you need to be able to produce evidence that you have undertaken them.

Each year two per cent of members will be selected at random (dip sampling) to ensure that their CPD commitment is being fulfilled. These members will be asked to submit their CPD portfolio for verification. If you are chosen to provide a copy of your CPD portfolio you will receive a letter or email from the IFPA office with further instructions.

Events

2019

November

1-3 9th Spirit Plant Medicine Conference, University of British Columbia, Vancouver, Canada. Details: https://spiritplantmedicine.com/ 1-5 Aromatica Australia. Biannual aromatherapy conference bringing together leading authors, practitioners, educators, researchers and distillers of essential oils. Gold Coast, Queensland, Australia. Details: www.aromaticaaustralia.com/ 27-28 The King's Fund Annual Conference 2019: delivering population health. London. Details: www.kingsfund.org.uk/events 28-29 Two-day College of Medicine Foundation Course in **Integrated Medicine at Dumfries** House, Ayrshire, Scotland. Details: https://collegeofmedicine.org.uk/ events/#!event/2019/11/28/two-daycollege-of-medicine-foundationcourse-on-integrated-medicine-atdumfries-house-ayrshire

December

2-3 CAM Therapies 2019, World Congress on Complementary & Alternative Medicine. Dubai, UAE. Interactive scientific sessions on complementary and alternative medicine and advancements in this field. Dubai, UAE. Details: https:// complementarymedicine.cmesociety. com/

2020

January

25-26 Reflexology lymph drainage (RLD) course, Integrative Therapies Training Unit, The Christie, Manchester. Details: www.christie.nhs.uk/ media/6919/course-brochure-20198.pdf

February

2020 Clinical Aromatherapy Education with Rhiannon Lewis, to be held at the Education and Conference Centre, The Royal Marsden NHS Foundation Trust, London SW3 6JJ. The four courses in this programme are listed below

under the relevant dates (3-4, 5, 6 and 7 February 2020). Full details at: https:// shared-d7royalmarsden-public.s3-euwest-1.amazonaws.com/files_trust/s3fspublic/all%20ess%20oils%20v2.pdf 3-4 Essential Oils in the Cancer Care Environment. Due to course structure it is not possible to book for a single day. Open to qualified aromatherapist working in cancer and palliative care or interested in the benefits of essential oils in these environments. 5 Essential Oils to Complement Pain Management in Cancer and Palliative Care. One-day class looks in depth at pain in the cancer/palliative care environment, highlighting where essential oils can play a positive role in assisting a person's global experience

6 Essential Oils Update Day. Oneday class for previous participants of Rhiannon Lewis's classes to update their knowledge and skills in a safe and supportive setting.

7 Clinical aromatherapy in end of life care: aromatic support in the dying process. This one-day class explores the dynamics of the dying process with a view to learning how the dying can be supported with sensitive, appropriate use of essential oils and related products.

15 Adapting massage for hospice and cancer care course, led by Anita Mehrez, Gwynneth Campbell, Sarah Wilkins, Integrative Therapies Training Unit, The Christie, Manchester. Details: www.christie.nhs.uk/media/6919/ course-brochure-20198.pdf

March

4-5 2nd International Conference on Natural Products, Medicinal Plants and Traditional Medicines on theme Exploring the way towards effective and advanced healthcare, organised by Allied Academies. Edinburgh, Scotland Details: http:// naturalmedicine.alliedacademies.com/ **14** Adapting chair massage for hospice and cancer care, Integrative Therapies Training Unit, The Christie, Manchester. Details: www.christie.nhs.uk/ media/6919/course-brochure-20198.pdf

21-22 IFPAroma2020 Conference & Trade Show, Tokyo, Japan. For details see page 7.

April

4 Clinical & practical issues in cancer care, Integrative Therapies Training Unit, The Christie, Manchester. Details: www.christie.nhs.uk/media/6919/ course-brochure-20198.pdf 28-1 May 2020 International Congress on Integrative Medicine and Health. Convened by the Academic Consortium for Integrative Medicine and Health, in association with the International Society for Complementary Research, the congress will showcase advancements in integrative medicine. Cleveland, Ohio, USA. Details: https:// imconsortium.org/

May

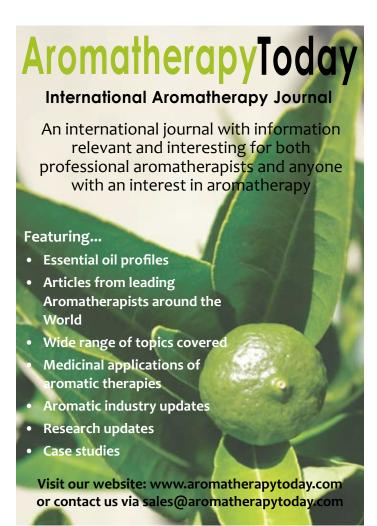
3-4 Holistic Health, NEC, Birmingham. Latest seasonal therapy launches and free educational experiences. Plus Chill Out Zone offering taster treatments. Details: www.holistichealthshow. co.uk/

22-25 Botanica2020, biannual conference on clinical aromatherapy and plant therapeutics. Theme: Efficacy, Safety & Sustainability, Bled Festival Hall, Bled, Slovenia. More information on page 6. For conference details and to register interest visit www.botanica2020.com/

October

14-17 Beyond Aromatics NAHA Conference, Salt Lake City, Utah, US. Details: https://naha.org/education/ naha-aromatherapy-conference/

If you are involved in an aromatherapy or complementary therapies event in your area, and would like to see it featured on this page, do let us know about it. Send your information (well in advance of the event) to admin@ifparoma.org, marked for the attention of the In Essence editorial team.

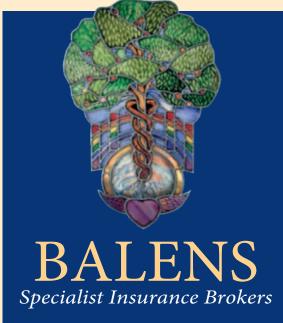






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