

Reflexology for Post Traumatic Stress Disorder

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PTSD, Post Traumatic Stress Disorder, is a mental health condition that is triggered by a terrifying event. Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts of the event. (Mayo clinic staff 2011)

PTSD can affect the body systems and cause stress on them. This study aims to explore whether Reflexology can help restore functioning in areas of physical complaint held by the Subject.

Research shows that reflexology is beneficial for PTSD.

Previous studies:

- *Reflexology Impact on Posttraumatic Stress Disorder*, Barbara and Kevin Kunz; <http://www.reflexology-research.com/index.php/what-is-reflexology/reflexology-information/complete-reflexology-for-your-life/reflexology-impact-on-post-traumatic-stress-disorder>
- *PTSD and Reflexology*, Paula Stone, <http://www.thestoneinstitute.org/2013/08/07/reflexology-helps-ptsd>
- *PTSD and Reflexology*, Iris Aharonovich, Copyright @ Foot and Soul - Reflexology Services in the Greater Boston Area, Massachusetts

SUBJECT:

Subject is Female 55, designer, suffered from childhood sexual abuse from age 4 -9, blocked out of memory until age 48 when subject moved out of state and away from abuser. Subject started to remember abuse in dreams at that time. Headaches started at age nine until about a year ago when subject started talking about abuse. At age 18 subject started counseling because she knew something was not right, was being treated incorrectly as child of an alcoholic. Subject received hypnotherapy at age 48 for three years and it really helped. She had trouble sleeping until one year into hypnotherapy. Subject has never been on any prescription medication for PTSD.

Subject suffers from low back pain and headaches. In 2002 subject was in head on car accident, in which her right ankle, tibia, and fibula were fractured. She was off work for six months. She does get some swelling in her right ankle.

Main complaint is stress in the lower extremities, pelvic, hips, left groin and leg. She has been dealing with this issue for approximately two years. Subject has tried acupuncture, manual chiropractic, as well as activator chiropractic, physical therapy, and massage therapy. The activator chiropractic and massage therapy has helped the most.

Subject believes that the issues with her lower extremities are caused from her childhood abuse, and not being able to let go and forgive.

TREATMENT PLAN:

Foot and hand reflexology, with focus on the feet. Will begin each session on right foot, then move to left foot, then to hands.

Session will be 1 hour 15 minutes, on Wednesdays at noon, once a week, for six consecutive weeks.

Reflexes to be worked:

Focus: Endocrine, Nervous and Reproductive systems

Secondary: Hip/Thigh/Knee, Pelvic Line, Groin Lymph

Techniques used:

For relaxation: Compression Pull, Alternating Pulls, Spreading, Knuckle Roll, ROM

Primary: Thumb and Finger-walking

Working-on-points: Static Pressure, Alternating Pressure, Micro-Friction

Rationale for choosing the above protocol:

- Nervous System affects the emotional behavior and memory. Can bring the body into parasympathetic state, in which healing can occur. Together with the Endocrine System it controls communication and homeostasis in the body.
- Reproductive System because of sexual abuse.
- Hip/Thigh/Knee, Pelvic Line, and Groin Lymph are where physical pain is now.

Subject filled out a daily diary, including pain level, stress level, sleep quality and patterns, and any changes in daily activities. Used a scale from 1-5, 1 being less and 5 being severe.

Session 1, 11/13/13

Pre-session interview: Subject reported that her left leg at groin, adductor, and iliotibial band was hurting and felt very tight; she didn't sleep well the night before; and has never received reflexology.

Subject and I found congestion bilaterally in the pancreas reflexes, adrenal reflexes, pituitary gland reflexes, lower thoracic and lower back spinal reflexes; on left foot uterus reflex, hip/thigh/knee reflex; on right foot pelvic line reflex between zone 4-5; on hands bilaterally adrenals, left hand pancreas reflex in zone 3 and lower back spinal reflex.

After session subject stated feeling very relaxed, left leg felt better, but some pain and tightness still there, and left gluteal muscle was sore.

Session 2, 11/20/13

Pre-session interview: Subject reported feeling pretty good. Diary indicated that pain decreased and she slept better as week went on.

Subject and I found congestion bilaterally in feet; pancreas reflexes, adrenal reflexes, pituitary gland reflexes, sciatic nerve reflexes (Achilles tendon), lower thoracic and lower back spinal reflexes; on left foot hip/thigh/knee reflex; on hands bilateral congestion in lower back spinal reflexes and right hand adrenal reflex. Subject felt anxious after feet so worked hands sitting in chair.

After session, client reported feeling good.

Session 3, 11/27/13

Pre-session interview: Subject stated she was very busy last week and anxious for trip tomorrow to see family for Thanksgiving, her left groin and leg are pain level 2. Her diary indicated heavy lifting and physical work toward end of week causing increased pain and poor sleep quality.

Subject and I found congestion bilaterally in feet; pancreas reflexes (except zone 1 left foot), pituitary gland reflexes, sciatic nerve reflexes (Achilles tendon), lower thoracic and lower back spinal reflexes, on left foot hip/thigh/knee reflex, adrenal reflex, hypothalamus reflex, and groin reflex zone 2; on right foot pineal gland reflex and pelvic line reflex in zone 4; on hands right adrenal gland reflex and left hand groin lymph zone 2.

After session subject reported she felt less anxious and left leg and groin felt much better.

Session 4, 12/4/13

Diary stated pain level was high (5) on day of travel and did not sleep well the night before. Pain level was a 3 while away and trip home. Sleep quality fluctuated during the week. Subject was doing a lot of physical work, moving furniture, painting, climbing ladder, hanging drapes, and pictures. When subject returned home pain level dropped to a 2. Subject stated she thought she was doing pretty good, compared to how she used to feel after doing so much.

Subject and I found congestion, bilaterally in feet and hands of the lower back spinal reflexes; bilateral feet pancreas reflexes (excluding zone 2 and 4 of left foot), bilateral sciatic nerve reflexes (Achilles tendon) medial side and left foot lateral side; on right foot pelvic line reflex zone 4 and pineal gland reflex; on left foot hip/thigh/knee reflex, thoracic spinal reflex, and groin lymph zone 2.

After session subject stated she felt really good and that pain was gone.

Session 5, 12/11/13

Subject reported that she is doing pretty good, had a good week even after cleaning her house. Her left leg and groin feeling pretty good and has noticed that she has increased range of motion putting socks on. Diary stated pain level 1 except for the day she cleaned her house, when it rose to a 3 but back to a 1 the next day. Sleep quality improved as week went on.

Subject and I found congestion; bilaterally in pancreas reflexes, adrenal reflexes, pituitary gland reflex, sciatic nerve reflexes (Achilles tendon) medial side and right foot lateral side, lower back spinal reflexes, hip/thigh/knee reflexes, fallopian tube reflexes in zone 1 and 5; on right foot shoulder line zone 1 (possible thyroid reflex); pelvic line reflex zone 4 right foot and zone 1 left foot; groin lymph zone 1 left foot and zone 4 right foot, zone 2 left hand; lower thoracic spine reflex on left foot and hand; right hand adrenal reflex and lower back spinal reflex; on left hand pancreas between zone 3 and 4.

After session subject stated she felt really good: no pain and felt relaxed, less stressed.

Session 6, 12/18/13

Subject reported a little pain in left groin and adductor area. Diary stated that pain level was 1 until she climbed ladder, next day went to 3, then 2 for 2 days, then back to 1 at end of week. Sleep quality was pretty good all week.

Subject and I found congestion, bilaterally adrenal reflexes, pancreas reflexes (excluding zones 3 and 4 left foot), fallopian tube reflexes zone 1, groin lymph reflexes zone 1, pituitary gland reflexes, great toe lateral side, lower back spinal reflexes; on left foot pelvic line reflex zone 1; on right foot ovary reflex, cervical spinal reflex; on right hand adrenal reflex; left hand pancreas reflex zone 3, groin reflex zone 2; bilateral hands lower back spinal reflexes.

After session subject stated she felt pretty good, relaxed and pain gone.

Follow-up,

Diary from week after final session indicated pain level was minimal, 1 all week, and sleep quality was pretty good.

SUMMARY:

Clients daily diary:

P L = Pain Level (1-5) 1 being mild, 5 being severe
S L = Stress Level (1-5) 1 being mild, 5 being severe
C A D L = Change in Activities of Daily Living or Lifestyle
New = Anything new to the situation
S P H = number of hours slept
S P Q = Sleep quality (1-5) 1 being poor, 5 being good

	PL	SL	CADL	New	SPH	SPQ
14-Nov		3	1		7	2
11/15/2013		2	1		8	2
11/16/2013		3	1	attic xmas tree	6	2
11/17/2013		2	1	xmas shop	9	5
11/18/2013		2	1		7	4
11/19/2013		1	1		8	5
11/20/2013		1	1		8	5
11/21/2013		1	1	HA pm	7	5
11/22/2013		2	1		8	3
11/23/2013		1	1		7	4
11/24/2013		2	0		9	5
11/25/2013		3	3	Heavy lifting physical	5	1
11/26/2016		3	3	Heavy lifting physical	6	2
11/27/2013		2	2		8	1
11/28/2013		5	2	travel	5	1
11/29/2013		3	3	painting, ladder	8	5
11/30/2013		3	3	Moving furniture ladd	8	5
12/1/2013		2	3	Moving furniture ladd	5	1
12/2/2013		3	2	x-mas tree & travel	5.5	3
12/3/2013		2	2		8	3
12/4/2013		2	2		7	4
12/5/2013		1	1		5	2
12/6/2013		1	1		6.5	3
12/7/2013		1	1		9	4
12/8/2013		3	1	cleaned	9	5
12/9/2013		1	2		8	4
12/10/2013		1	1		7	4
12/11/2013		1	2		8	3
12/12/2013		1	1		10	5
12/13/2013		1	1	ladder	7	4
12/14/2013		3	2		9	5
12/15/2013		2	1		6	3
12/16/2013		2	1		8	4
12/17/2013		1	1		8	5
12/18/2013		1	1		7	2
12/19/2013		1	1		8	5
12/20/2013		1	2		8	3
12/21/2013		1	1		8	4
12/22/2013		1	1		8	4
12/23/2013		1	1		7	3
12/24/2013		1	1		5	3

Subject claimed to enjoy reflexology and thought it helped with her pain in left groin and leg. She has more range of motion and when she does have pain, it does not last as long, and is not as severe. Subject suggested returning to physical therapy again to help with the range of motion and continuing with reflexology, massage therapy, and chiropractic.

CONCLUSION:

Reflexology did help my subject with symptoms from PTSD, although one case study is not enough research to claim that all people suffering from PTSD would benefit from reflexology.

Some interesting facts as quoted from the US department of Veterans Affairs, updated Jan. 3, 2014:

“Posttraumatic stress disorder (PTSD) can occur after you have been through a trauma. A trauma is something horrible and scary that you see or that happens to you. During this type of event, you think that your life or others' lives are in danger. You may feel afraid or think that you have no control over what is happening.

Going through trauma is not rare. About 60% of men and 50% of women experience at least one trauma in their lives. Women are more likely to experience sexual assault and child sexual abuse. Men are more likely to experience accidents, physical assault, combat, disaster, or to witness death or injury.

Going through a trauma doesn't mean you'll get PTSD, though. Although over half of us go through some type of trauma, a much smaller percent develop PTSD.

Here are some facts (based on the U.S.):

- *About 7-8% of the population will have PTSD at some point in their lives.*
- *About 5.2 million adults have PTSD during a given year. This is only a small portion of those who have gone through a trauma.*
- *Women are more likely than men to develop PTSD. About 10% of women develop PTSD sometime in their lives compared with 5% of men.*