

NAHA 

The National Association for Holistic Aromatherapy

# Aromatherapy Journal

## **In this Issue:**

- **It's Harvest Time!**
- **Conifers: Hydrosols from Autumn Woods**
- **Essential Oils for Fibromyalgia**
- **Making Menopause a Happier Place**
- **Fibroids: A Healing Journey**

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# Aromatherapy Journal

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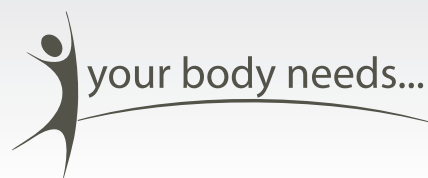


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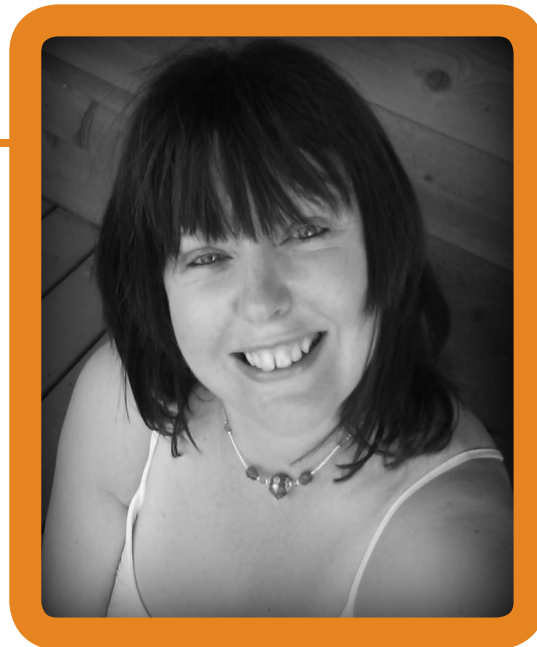




# Editor's Note

## Autumn

Since moving to the United States nine years ago, I have become familiar with the alternative name for *autumn*, that of *fall*. I love this synonym because it reminds me of the nature of the season, the falling of the leaves from the trees, and a time to take stock of summer's achievements. Autumn marks the end of summer and the transition into winter, a time when nature, and our bodies, start to slow down. After a busy summer of designing (and working in) my new garden, and working on creating my new work space for my aromatherapy business, I am not adverse to honoring nature's message for this particular season!



Autumn is actually one of my favorite seasons, a sentiment that is shared by several of our *NAHA Aromatherapy Journal* writers; in this issue they bring you stories of autumn plants, harvesting, and health issues that may affect us in the “fall” of our lives. Ann Harman shares some distillation stories of conifers on page 57; Kelly Holland Azzarro shares her very personal journey with fibroids on page 63; Elizabeth Ashley discusses menopause and how to get through it with greater ease on page 27; and, on page 53, NAHA Director, and the newest member of the NAHA writing team, Shanti Dechen, shares some advice for harvesting, distilling, and infusing common herbs found in your garden.

In addition, Amber Duncan continues her series of articles about using aromatherapy safely with children on page 21, and Dr. Joie Power concludes the second part of her article, *It's Just a Smell: What Could It Do?*, on page 11. Roxana Villa has written a beautiful piece on *The Linguistics of Perfume* on page 7. We also have two additional articles: one about *Essential Oils for Fibromyalgia* by Evelyn Stilson, on page 41, and another exploring the benefits of complementary medicine in today's health system by Tiffany Keith on page 35. And not forgetting an article by our own NAHA President, Annette Davis, about Diabetes Mellitus and the current understanding and management options with herbs on page 45.

Finally, I would like to thank our many *NAHA* Directors who have shared several autumn recipes with us on page 74.

If autumn is the season to slow down, there is no excuse for not doing so with this bumper issue of the *NAHA Aromatherapy Journal*! Curl up with a copy, on your favorite reading device, switch on the aromatherapy diffuser, and try some of the suggestions and tips brought to you by our talented team of writers.

With aromatic blessings,

*Sharon Falsetto*



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# The Linguistics of Perfume

By Roxana Villa



Words have multiple meanings, particularly within the world of the fragrance industry. Let's begin our little discourse on the linguistics of fragrance with the word *perfume*, which is defined as both a noun and a verb. The noun refers to a single or combination of aromatic compounds imparting a pleasant aroma. Perfume as a verb, refers to the vapors that waft up to impart a sweet scent. This verbiage most likely alludes to early fragrances mentioned in ancient texts where plant matter is mentioned as being burned to purify or as an offering. A great example is white sage, known botanically as *Salvia apiana*, (bee = *apiana*, sage = *salvia*) used by the native peoples of southwestern America for psychic clearing and fumigation.

## Traditional Healing and Spiritual Purposes of Perfumes

When our early ancestors began using scent, the materials evolved from dried leaves and



Smell © Roxana Villa

resins to macerations in oil and wine.

Cultures such as ancient Egypt had rich traditions of using macerations of herbal oils mixed with beeswax to make unguents that not only smelled good but served for spiritual and healing purposes as well. Hippocrates, the father of medicine, encouraged the people of Greece to burn aromatic plants in the streets during a plague to prevent the spread of disease. Later on in time, a French cosmetic chemist, René-Maurice Gattefossé, used lavender to heal a burned hand and quickly realized that the violet colored herb contained attributes far beyond just the scent.

## Synthesized Perfumes

In this modern era, where synthesized aroma molecules are abundant, perfumes may include a variety of components that are botanical, natural and chemical soups, many petroleum based. The average consumer has no idea that the fragrances, cosmetics and foods they purchase contain colorants, flavors and scent molecules that are toxic to the body and the planet. Most perfumes, even within the niche community of artisans, are formulated with synthetic compounds yet promoted as containing flowers, herbs, woods and resins.

The word *perfume* has imprecise interpretations with multiple meanings. The challenge for those of us working with a palette of vibrant plant essences is that





## Natural Perfumes

Before the introduction of these laboratory created components perfumers used whole ingredients, found in the natural world, primarily animal and plant. The animal ingredients provided longevity, consisting of ambergris (from whales), musk pods, civet and castoreum. Plant aromatics included essential oils, as well as various forms of macerations. Due to inconsistencies in weather and harvests the new synthetic compounds became more appealing to the fragrance composer. Not only were these modern chemicals easy to access and work with but in most cases they were substantially cheaper per kilo.

the majority of people are not educated in the linguistics of flavor and fragrance. Many who believe themselves to be “allergic” or “sensitive” to perfume haven’t realized that most of this discomfort is a result of man made molecules combined with other materials. In sensitive individuals, like those involved in aromatherapy, fragrance components that have been augmented from their whole form present a challenge to the immune system.

Substances currently used to create perfume can be natural, botanical, synthetic, or a combination. Synthetic compounds, created in a laboratory, became part of the perfumer’s palette in the late nineteenth century with the introduction of aroma chemicals and isolates such as “coumarin” – containing a hay-like fragrance. These synthetic molecules were the building blocks of our modern perfume industry by making fragrance available to the masses.

Natural perfumers today continue in the tradition of using both animal and plant based “natural essences” and isolates. The word “natural” however is extremely loosely defined in both flavor and fragrance. The challenge with historic animal ingredients is that an energetic imprint of death of a sentient being. Even the ten or twenty year old bottles of civet readily found on the internet represent a low vibration associated with the reptilian brain. Although these materials have powerful base and fixative properties, the experienced botanical perfumer uses skill and creativity to move into new territories and shift the perception of immortality in a perfume. After all, the beauty, vitality, and aroma of a fresh bouquet of flowers exceeds that of plastic or silk.

## Greenwashing of the Term *Natural*

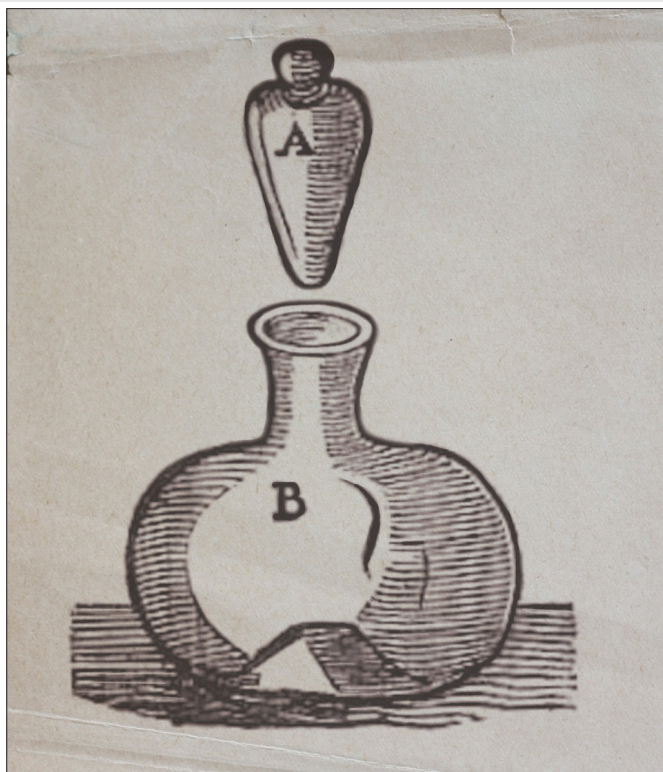
*Greenwashing* is a term used to reference public relations (PR) and marketing to

promote a perception that a product, individual, or brand is environmentally conscious. A small sector of the population is aware of the abuse and greenwashing of the word natural, others are fairly asleep to such things and then there are those who are convinced they cannot wear any type of fragrance because it will give them a headache. This last sector is the one I personally strive to reach, when they discover that indeed there are beautiful, complex fragrances that they can wear, and their life becomes whole again. The aromas of flowering meadows, tropical jungles, and adventures on desert islands all become possible again in a single whiff. The vast horizons of an olfactory terrain that was once desolate is now lush and fertile – full of possibilities.

### The “Golden Age” of Perfumes

The botanical perfumer is an individual consciously choosing to use materials from vital nature, whole and complete, not fabricated in or tampered with in a laboratory. The palette of these alchemists includes essential oils, absolutes, concretes, CO<sub>2</sub> extractions, infusions, tinctures, and processes soon to be discovered as we enter the “Golden Age.”

This new fragrance model harkens to a long forgotten era where the perfume artist, like a priestess in ancient Egypt, practices an integral approach to fragrance creation. Working within a paradigm of sustainability and health, the modern perfumer aligns herself with Mother Nature. Individuals dedicated to the full spectrum of artistry while serving Gaia will eventually crack the matrix of illusion and bring a flood of connectivity to new neural



Alchemy © Roxana Villa

pathways in human consciousness. The result will bring clarity and insight to our craft and industry as we walk the bridge into an evolutionary cycle of heightened vibration.

### About Roxana Villa:

Like the facets of a gem, Roxana’s pure botanical perfumes reflect a myriad of synergistic disciplines. Professional training in aromatherapy cultivated her nose with a firm knowledge of the healing attributes found in the plant kingdom. As an award-winning artist, she brings gifts of storytelling, conceptual thinking, and a strong visual aesthetic to her work in fragrance. These two disciplines weave seamlessly, together with her natural instincts, into authentic expressions of olfactory art.

To learn more about Roxana, please visit her website at: [www.illuminatedperfume.com](http://www.illuminatedperfume.com) or email her at: [roxana@illuminatedperfume.com](mailto:roxana@illuminatedperfume.com)





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# It's Just a Smell, What Could it Do?

## Part Two: Human Olfactory Capabilities

by Joie Power, Ph.D.

Olfactory aromatherapy is all about the sense of smell yet most aromatherapists don't really know much about this sense, its importance to humans, and how powerfully it affects us. Even in the sciences, the sense of smell has been referred to as "the neglected sense" because until very recently it received little attention.

**Aromatherapists, who use the sense of smell to achieve therapeutic effects, should be experts on olfaction because when you understand the sense of smell you begin to become more fully aware of the potential impact of inhaled essential oils, how they might be used and how to administer and blend them for the greatest effect.**

### The Biological Importance of Smell and its Contributions to Human Experience

The sense of smell is evolutionary the oldest of the modern senses. Body systems with the oldest evolutionary history are generally those that are most closely tied to basic survival functions. Animals in the wild have a very difficult time surviving without a good sense of smell because, without it, they can't locate food and they have trouble detecting dangers such as the presence of predators. Humans who lose their sense of smell can survive but also have a surprisingly difficult time. Even though we use our sense of smell constantly we are often not aware of it and we tend to devalue

its importance in our daily lives. People who become anosmic are invariably surprised – and disheartened – by the consequences; they lose the ability to enjoy food, sex drive can be badly affected, menstrual cycles may be altered, vocational and social functioning is often affected, and depression is frequent and can be severe. In general, **quality of life and sense of well-being have been found to decline significantly in people who lose their sense of smell.**<sup>2</sup>



To really appreciate the biological importance of the sense of smell you need to bear in mind that **for most mammals, odors are the primary stimuli that drive almost every significant behavior, including things such as:**

- maternal bonding
- social interaction
- selecting a mate
- finding food
- avoiding predators and other dangers, and
- claiming territory.



Humans are also mammals so, with slight variations, we have the same basic olfactory system as our four-legged cousins and, like them, we swim in a sea of olfactory information that we draw into our receptors with every breath we take. While humans don't generally go about sniffing peoples' behinds to select mates we nonetheless have neural circuits that link the sense of smell to many complex behaviors and emotional responses and **we are still using odor cues to influence our decision making, often, if not usually, at a subliminal level. Smells influence our moods, the time we spend at various locations, our perceptions of other people and our cognitive performance and it appears that odors that are unperceived or unidentified may exert even stronger effects than do identifiable odors that are noticed.** <sup>21</sup>

One of the main biological functions of odors is to warn of dangers, and specific characteristics of olfaction are especially well-suited for doing this. For example, human detection and discrimination of odors are excellent, as you will see below, and these good abilities enable us to perceive subtle changes in the quality of the odors that surround us. On the other hand, our ability to distinguish between different odor concentrations is not very good, nor is our ability to name specific odors that we perceive. It's been suggested that this is because the functions of identifying odors and estimating their concentration are not as biologically important to us as are the functions of detection and discrimination since it is these latter abilities that enable us to detect the qualitative changes in the olfactory environment that signal the presence of dangers. The issue of odor concentration

does have some specific importance to aromatherapists and perfumers, however, since concentration of odor molecules can completely alter the aroma produced by those molecules. The odorant known as indole is a striking example of this: at lower concentrations indole has a beautiful floral aroma while at higher ones its odor is putrid and fecal. In general, odorant concentration must be raised by at least 20% before the change can be perceived by a human.<sup>11</sup>

While human studies of the behavioral effects of odors have hinted at the biological importance of smell to us the full impact of aromas on people has not been fully appreciated in the sciences and I doubt that it even can be through application of experimental models, which leaves us with our own experiences as perhaps the only way to appreciate the powerful olfactory effects that have so often been recognized by writers. As the author Patrick Suskind writes in his novel *Perfume: The Story of a Murderer*: "Odors have a power of persuasion stronger than that of words, appearances, emotions, or will. The persuasive power of an odor cannot be fended off, it enters into us like breath into our lungs, it fills us up, imbues us totally. There is no remedy for it."<sup>27</sup>

As I wrote in Part One of this article in the *NAHA Summer Aromatherapy Journal* 2015.2, no other sensory system communicates as directly with the brain's emotional centers as does the sense of smell and this hard-wiring gives us the basis for understanding how odors could affect us in the way described by Suskind. **Odors can comfort, frighten or revolt; they can provoke us or subtly soothe and subdue us; they can make us feel happy or sad, calm or nervous;**



**they can increase our work productivity or stimulate us to buy things. Odors can even temporarily disable us and “odor weapons” have been explored by the U.S. military.**

If you are still inclined to doubt that the sense of smell has great biological importance to humans consider the rather astonishing fact that fully a third of the human genome is devoted to the olfactory system as opposed to vision which requires only three genes and hearing which develops from “shared” genes which also code for other aspects of development.<sup>16</sup>

#### Human Olfactory Capabilities

**The human sense of smell is functional at fetal stages of development** and there is evidence that we emerge from the womb with biases towards odorants that were encountered through the amniotic fluids.<sup>22</sup> In fact, fetal odor memory is said to be responsible for activating adaptive responses in the newborn such as orientation, identification and soothing. Since newborn babies are clearly attracted by some odors and repelled by others

it's been suggested that our odor preferences are something that we are just born with.<sup>26</sup> If that were true, however, infants would always have the same odor preferences as adults and they don't: four year old children have been found, for example, to like the smell of synthetic sweat and feces and it appears that it is not until somewhere around six years of age that children begin to dislike these smells.<sup>25</sup> Taking the findings from a number of studies together, it seems likely that we have an inborn aversion or attraction to some odors but not to others and in some cases our experiences after birth can even “reverse” at least some innate preferences. **The studies showing that odorants can pass from the mother to her developing child via the amniotic fluids suggest that when pregnant women inhale essential oils they may be influencing how their children will later value and react to those specific aromas.**

Many mammals are credited with having a better sense of smell than humans and this is often attributed to the fact that the number of olfactory receptors is greater in animals; while humans have only about 350 functional odorant receptor genes mice have about 1000. Nonetheless, the sense of smell in humans is far more effective than most people realize and our detection thresholds and odor discrimination abilities are often similar to or even better than those of other animals.<sup>13</sup>

Humans are able to detect and discriminate about 400,000 volatile compounds (odorants) each having a distinct molecular structure.<sup>18</sup>

We can detect ethyl mercaptan, an odorant added to propane gas, at average concentrations of less than one part per billion;<sup>6</sup> this is the equivalent of three drops



of water in an Olympic-size swimming pool so this means that given water from two Olympic-size pools to sniff, the average human could correctly identify the one to which three drops of ethyl mercaptan had been added.

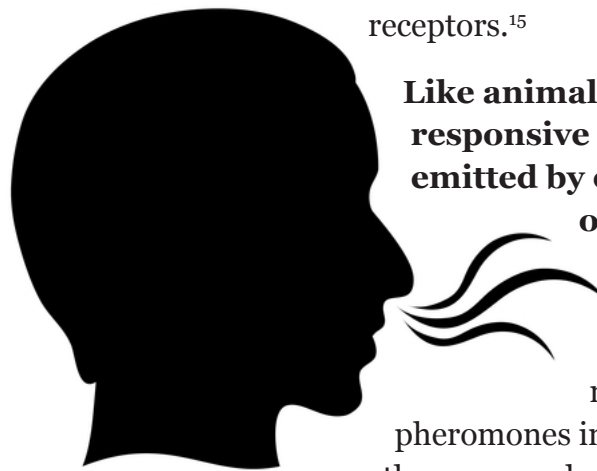
Humans can discriminate between their own t-shirts and those of others based only on scent.<sup>14</sup>

We can follow a scent track in a field and we get better at it with practice.<sup>19</sup>

Although we are good at detecting odors, we are not generally very good at identifying them and in one study subjects were only able to identify about 50% of common odors associated with frequently encountered household items.<sup>3</sup> When we put odorant molecules together in mixtures, our identification abilities become even worse; when subjects were asked, for example, to identify familiar single odors and the components of more complex odor mixtures, the greatest accuracy was seen with single odors while few subjects were able to identify the constituents of the mixtures.<sup>12</sup> In a frequently quoted study by Berglund, the untrained human nose was shown to be unable to detect and identify more than three odors in a mixture and even trained perfumers topped out at four.<sup>1</sup>

One of the reasons that we have difficulty identifying the components in an odor mixture is that interesting and unexpected things happen when you mix odorants. Some odors cancel others out when blended; it's

been known since the nineteenth century, for example, that camphor cancels out the aroma of juniper and even gasoline. In my experience, some beautiful essential oil aromas just “disappear” or otherwise change when mixed with certain essential oils. The processing of odor mixtures engages mechanisms that are not fully understood and may include some sort of inhibitory action at the olfactory bulb or competition for receptors.<sup>15</sup>



**Like animals, humans are responsive to olfactory cues emitted by other members of our own species.**

While there is some controversy as to whether or not humans sense pheromones in the same way as other mammals there is a growing body of evidence that we do respond subliminally to at least some intraspecies odor cues in both physiological and behavioral ways. One of the best known examples of this is the synchronization of menstrual cycles among women living together.<sup>17</sup> Similarly, research also suggests that odor cues still play a role in reproductive behaviors in humans; for example, women generally rate male armpit odor as unpleasant, except when they are ovulating and at that time this evaluation changes and the smell of a man becomes, literally, more attractive, at least for some women.<sup>8</sup> Conversely, sniffing the tears of emotionally distressed women was found to reduce sexual arousal and testosterone levels in men.<sup>7</sup> The role of sexual preference in such studies has not been adequately addressed.

**Humans, like animals, are also sensitive**

**to the odor of fear.** In one study, women were able to correctly identify happiness in women and men, and fear in men based on odor swabs taken from the armpits, while men in the same study correctly identified happiness in women and fear in men.<sup>4</sup> The smell of fear also, surprisingly, improved cognitive performance in women<sup>5</sup>. Finally, human subjects exposed to the odor of “fearful” sweat have been shown to have an increased startle reflex.<sup>20</sup>

What all of these studies have shown is that **human secretions have important olfactory signaling properties. We are clearly able to detect and discriminate an odorant that is produced by another human and we respond to these odorants with changes in physiological functioning, cognitive performance, perceptions, and behavior.** In many, if not most, cases we are unaware of both these odorants and the fact that we are responding to them. Who knows what else we may be responding to in our olfactory environment? In Chinese Medicine, each of the five elements is associated with a smell and an emotion; for example the smell of the Wood element is rancid and its emotion is anger. Are these the physiological smells that we produce in various emotional states? My suspicion is that they may well be and that we are subliminally detecting and responding to these smells all the time. Perhaps some of the people who seem to be especially intuitive about the feelings of others are simply people who have a very good sense of smell.

### Variations in Human Olfactory Abilities

Human olfactory capabilities differ significantly from person to person and may be

affected by many factors, such as age, health, hormone levels, smoking and drinking habits, gender, personality and even the culture to which the “smeller” belongs; two of these dimensions, age and gender, are especially relevant to the practice of aromatherapy.

Like our senses of hearing and vision, the sense of smell declines as we age. Anosmia (complete loss of the sense of smell) is nearly four times more frequent in people over 75 and rates for impaired olfactory abilities may run as high as nearly 25% in people age 53 to 97.<sup>9</sup> In my experience, these rates are significantly higher in treatment settings such as nursing homes where perhaps 60% or more of residents have at least diminished olfactory abilities.

Two of the best known studies on aging and olfactory abilities were conducted on nearly 3000 adults during 2009 and 2011 by Schubert and colleagues. The results of these studies demonstrated that at the first five year follow-up, **63% of 80 to 97 year olds showed a decline in olfactory abilities. Men in that study were more severely impaired than women and also of interest is the fact that self-reports of olfactory loss were not reliable.**<sup>23, 24</sup>

Aromatherapists working in geriatric settings need to be aware of the high frequency of olfactory impairment in the elderly. A number of studies have confirmed that anosmic rats do not show the same response to odorants such as lemon (*Citrus limonum*) or rose (*Rosa x damascena*) essential oil as do rats with intact olfactory systems.<sup>10, 28</sup>

**Patients who are anosmic will also probably not respond as expected to**



**olfactory stimulation with essential oils, although they should still be able to experience any benefits that may arise from absorption of essential oil constituents into the blood stream through the skin and respiratory system.**

**Women are generally said to have better olfactory capabilities than men and may be more affected by aromas, at least in some respects.**

The famous National Geographic Smell Survey of 1989, which had over a million respondents, found women to be superior on all measures of olfactory ability, including detection thresholds, odor discrimination and odor identification.<sup>29</sup> Women also had more emotional responses to odors than did men. Subsequent studies have shown similar results and women have also been found to have better olfactory memory than men, at least for familiar odors. Girls are better than boys in identifying their friends by odors alone. Women's olfactory abilities also vary with their menstrual cycle and may change during pregnancy and so do their evaluations of odors in terms of what they find pleasant and unpleasant. It has been proposed that women's superior olfactory abilities may relate to greater exposure to odors (women use more scented products, for example), although there may be evolutionary reasons for this as well.

### Summary

Aromatherapists who use the sense of smell for altering moods, behavior and even hormonal functioning are working with a powerful tool that has proven efficacy for such applications in humans. Clinically,

it's wise to be aware of individual reactions to specific essential oil aromas and to be respectful of individual preferences and reactions as there are significant variations among humans in how, and even if, specific aromas are perceived. Olfactory impairment is a real possibility in the elderly, especially in care settings, and may alter therapeutic response to olfactory aromatherapy. Gender differences in olfactory abilities and response to olfactory stimulation could be a confounding factor in studies on the effects of inhaled essential oils and also suggest that



women might be more emotionally responsive to olfactory aromatherapy than are men, although this cannot be confirmed on the basis of current evidence.

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# Essential Oil Safety for Children: Six Years Old and Beyond

by Amber Duncan



“Essential oils have a wide range of biological activity, but they are not universally safe.”<sup>4</sup>

We know that essential oils are extremely potent and, when used in an appropriate manner, can be a great asset to your home health regimen. This article serves to provide the reader with a deeper understanding of the safe use of essential oils with children ages six and up. The article aims to achieve this by outlining essential oils to avoid as well as providing examples of research carried out that demonstrates the therapeutic benefits of essential oils among pediatric clients using aromatherapy. The biggest safety suggestion that should be followed with all children is that “Essential oils for home health purposes should be used for a maximum of 10 days at a time. A period of 14 days should elapse between uses, unless otherwise instructed by a qualified practitioner.”<sup>8</sup>



## Essential Oils to Avoid with Children under Ten Years of Age<sup>7</sup>

- Birch (Sweet) (*Betula lenta*) - avoid using via any route.
- Eucalyptus (*Eucalyptus camaldulensis*, *Eucalyptus globulus*, *Eucalyptus maidenii*, *Eucalyptus plenissima*, *Eucalyptus polybractea*, *Eucalyptus radiata*, *Eucalyptus smithii*) - avoid using near or directly on the face; this includes the chest area.
- Wintergreen (*Gaultheria fragrantissima*, *Gaultheria procumbens*) - avoid using via any route.

## Essential Oils to Avoid with Children before Puberty (Approximately Age Thirteen)<sup>7</sup>

- Chaste Tree (*Vitex agnus castus*) - avoid using via any route.

## How to Use Essential Oils with the above Age Groups

For the above age groups (from age six to age thirteen) the best levels of dilution for normal conditions are about 1%, up to a maximum of 2%. Use between 5-10 drops per ounce of carrier oil for ages six to seven, and 5-12 drops per ounce of carrier oil for ages eight to twelve. After age thirteen, use the adult range of dilution for most conditions—one





to three percent—depending upon specific circumstances; this translates to roughly 5-15 drops of essential oil per ounce of carrier.<sup>8</sup> For most conditions topical application is not necessary and the most effective way to use essential oils is through inhalation, be that via using an essential oil diffuser or applying essential oils to an aroma inhaler.

### **Clinical Studies on the Use of Aromatherapy with Children**

The chemical composition of essential oils, and how essential oils interact with children, is something that should not be taken lightly, as indicated by the examples from the studies and papers referenced below. While these studies show the many ways essential oils can be integrated into traditional therapies to enhance their effects, they also review some of the major issues that are brought to light relating to a deficit of research regarding the safe use of essential oils with children.

For example, a paper written by Patricia McNeilly discusses using complementary therapies in nursing practice and notes that the British Epilepsy Association recommends

the use of lavender (*Lavandula angustifolia*) essential oil along with ylang ylang (*Cananga odorata*) essential oil, Roman chamomile (*Chamaemelum nobile*) essential oil and jasmine (*Jasminum grandiflorum*) essential oil as a measure for reducing seizures. She also identifies that authoritative guidance varies relating to essential oil use with children stating that “the lack of evidence regarding safe practice in relation to how children metabolize essential oils, practitioners are faced with making a decision based on anecdotal, conflicting evidence.”<sup>1</sup>

In an observational study that was completed in Cape Town South Africa a Level 1 burn unit investigated the effects that aromatherapy massage would have on pediatric patients. The sample population included seventy-one pediatric burn patients, with a median age of three, who received a total of 126 massage sessions. The blend that was used was a 1% dilution of lavender (*Lavandula angustifolia*) essential oil, German chamomile (*Matricaria recutita*) essential oil, and neroli (*Citrus aurantium* var. *amara* (flos)) essential oil, diluted in a carrier of grapeseed (*Vitis*

*vinifera*) oil. The results showed significant reduction in heart rates and respiratory rates among the pediatric burn patients. Additionally, it was found that most of the sessions elicited positive behavior from the children. Positive behavior examples included the children falling asleep during treatment, visual demonstrations of relaxation or calming down, or the patients asking for the session to continue. Of the seventy-one clients only nine of them, with a median age of fifteen months, did not show any positive behavioral responses to the therapy.<sup>3</sup>

Another study, conducted in 2013, evaluated the use of lavender (*Lavandula angustifolia*) essential oil with pediatric post- tonsillectomy patients. The study found that the use of lavender essential oil reduced the need for post-operative pain medication in children ranging in age from six to twelve. The lavender essential oil was administered in an inhaled form and did not appear to provide therapeutic benefits during the night. However, the patients had decreased requests for pain medication during the waking hours.<sup>5</sup> In another perianesthesia study (patients undergoing or recovering from anesthesia), the use of lavender (*Lavandula angustifolia*) essential oil and ginger (*Zingiber officinale*) essential oil were used. In this study ninety-four children were divided into two groups; the first group received an intervention of aromatherapy using the two listed essential oils while the second group received a placebo of just jojoba (*Simmondsia chinensis*). This study found that those in the aromatherapy test group demonstrated lowered distress levels. However, the difference was not statistically significant.<sup>2</sup>

In comparison to the prior examples of post-surgical care a study was evaluated by Janice Styles regarding the use of aromatherapy with children hospitalized with human immunodeficiency virus (HIV). In her study Styles noted that “Aromatherapy massage tends to promote sleep in children who are otherwise unable to settle due to chronic pain.”<sup>6</sup> Her paper did recognize that aromatherapy, while not a cure for the disease, could help activate the body’s innate healing mechanisms. She also remarks that “Children who are in the terminal phase of an illness have the right to quality of life and... we are able to create a balance between the need for invasive procedures and the provision of supportive therapies which will help to counteract their effects.”<sup>6</sup> This remark stands out because aromatherapy has the ability to support the whole body system. What we can glean from these studies is that the use of aromatherapy with pediatric patients is best used in conjunction with conventional therapies and with a health professional’s awareness especially for serious illnesses such as HIV.

In conclusion we find that essential oils can be used far more leniently with children once they reach age ten, compared to those younger than six years of age, and treat them much the same as adults once they hit puberty. While studies have been conducted to evaluate pediatric response to aromatherapy there is much more that needs to be evaluated to build upon what we know of the science and art of aromatherapy. By understanding and respecting the interactions of essential oils with the unique developmental cycles of pediatrics we can continue to improve children’s lives via aromatherapy.



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**Editor's Note:** Professionally formulated products containing highly diluted eucalyptus are widely used by consumers and may be appropriate for use on children if appropriate parental precautions such as keeping them out of reach of children are taken.

**About Amber Duncan:**

Amber Duncan is a recent graduate of *The Aromahead Institute* and owner of *Holistic Health Helpers*. She is a work at home mom of three little ones (ages five, three and six months). She devotes her time to helping others through teaching the safe implementation of essential oils into their daily lives.

Learn more about Amber by visiting her website at: [www.holistichealthhelper.com](http://www.holistichealthhelper.com), her Facebook page at: [www.facebook.com/DuncanClanHealthHelpers](http://www.facebook.com/DuncanClanHealthHelpers) or email her at: [duncanclanhealthhelpers@gmail.com](mailto:duncanclanhealthhelpers@gmail.com)

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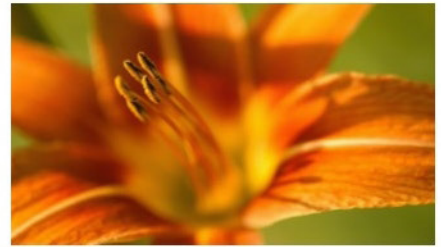
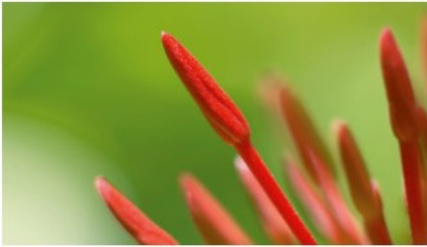
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# Making Menopause a Happier Place

by Elizabeth Ashley



Ancient medicine equates menopause with the autumn of our female lives. The time we pass from Maiden to Mother to Crone, can be a time of great emotional and physical suffering for some women, whereas others seem to breeze through it without a care in the world. Over recent years, extensive research has investigated the impact a woman's attitude may have on her physical symptoms and thus her experience of them.

Cultural variations between the experiences of menopausal attitudes are enormous, but as yet we have little understanding of why this might be. Clearly though, the onset of menopause is not an overnight occurrence; we do have warning of its arrival, and even an expectation of it. There is a gradual slowing of the menarche as the physiological changes in the body develop alongside her age. We have ample preparation time for the final shutting down of reproduction, and in fact when the menopause finally does begin, it has probably been about ten years since the woman thought about the realistic possibility of having children.

## Cultural Differences in Menopausal Symptoms

Western women generally report symptoms of menopause as those of hot flashes, night sweats, irregular or heavy periods,

depression, insomnia, weight gain and anxiety. Interestingly, **only night sweats and hot flashes are actually linked with the real hormonal changes in our body.**

According to Freeman and Sheriff (2007) though, most of these symptoms are seldom reported in China, Japan, and India. Japanese women are more likely to report chilliness, headaches and shoulder stiffness as the most troublesome of their symptoms. Women who live in rural Greece and those who have been raised in the Mayan culture report few problems at all apart from the changes in their periods and cycles.

So why might this be, when clearly the endocrine changes should be the same right across our sex? Conclusions may be drawn from the fact that Japanese women eat a diet very high in soy which is full of phytoestrogens; phytoestrogens are believed to be very helpful to the body's system. Other suggestions include cognition, behavior, lifestyles, and even socio economic factors.

It seems that social and cultural meanings that we attach to menopause might affect our perception of it. In nineteenth century England, for instance, Western psychiatry considered the menopause as a time of great emotional instability in women. They were on the lookout for women losing emotional



control and indeed being “gripped at the hands of hysteria.”

By the twentieth century, consideration of the “disease” had been passed from the mind and into the physical realm. Here, an understanding was gained that the disease arose from a deficiency of oestrogen and so therefore treatment

with Hormone Replacement Therapy (HRT) was introduced; HRT addressed all of the emotional and physical sequelae that would partner that.

Doctors also began to understand that the menopause not only presented its own brand of *symptoms*, but that its onset also increased the likelihood of longer term problems; that the oestrogen deficiency might affect heart disease, osteoporosis, depression, cognitive impairment, and even dementia. Fear from an entire generation of women meant profits for the hormone companies were well and truly up.

As the Millennium hailed, a new concern raised its ugly head about a slight increase in the likelihood of breast cancer for women on HRT. Consequently, prescribed medication numbers quickly dropped. The chemical goddess was banished, but the fear and anxiety attached to the health concerns associated with one’s cessation of periods remained deeply ensconced. Negative stereotypes affect women’s attitudes about their physical changes even today. Here aromatherapy possibly has the most to offer women than at any other time of their lives.

The links between depression, menopause and hot flashes are complex, but nevertheless are compelling. Some studies suggest that there might be a slight natural increase in depression which diminishes after menopause. Others suggest no such change exists. One resounding fact that the scientists are in agreement about though, is that depressed mood is more closely

associated ***with life stresses*** than actual hormonal changes. And furthermore, women who are depressed tend to find hot flashes more problematic. Moreover, anxiety *before* menopause is associated with the presence and severity

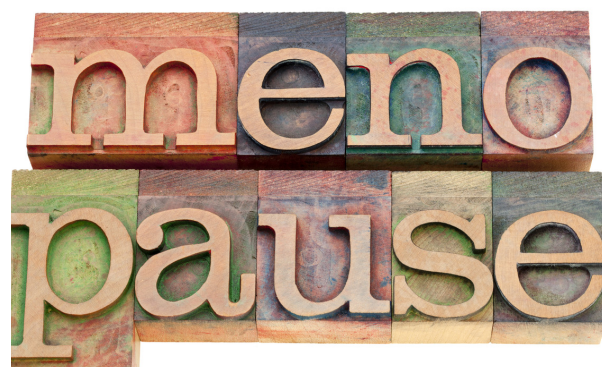
of menopause symptoms. Women suffering moderate or high levels of anxiety are as many as **five times** more likely to report suffering from hot flashes.

I found this research particularly enlightening because it forces the aromatherapist to consider two methods of the management of menopausal symptoms. Firstly, the most regularly chosen method is massage, but there is also inhalation. It is fascinating to see how these applications can affect the chemistry of a woman’s body.

### Massage

Two beautiful reports came from the same team from the Department of Nursing and Midwifery at Tehran University of Medical Sciences. Sadly their findings are not published as to which essential oils they used! However...

The first study in 2012 wanted to gauge how much aromatherapy massage would affect the



emotional symptoms of menopausal women. Ninety women were recruited and split into three groups. The first group was given a thirty minute massage with essential oils twice weekly for four weeks. The second group was given massage with a blank almond carrier oil. The third control group received no treatment at all.

At the end of eight sessions the rating scale showed marked differences in the women. Both the aromatherapy group and the massage group reported a reduction in symptoms of physical fatigue, irritability, anxiety, and depressed mood but the aromatherapy group was most improved.

In 2013, the experiment was repeated again, this time on post-menopausal women. Again, ninety women were divided into three similar groups.

Here, we see the same most significant improvement with the aromatherapy, but we are able to get a better understanding of how that was measured. The psychological difference on the depression score improved by a mean average of -2.29 whereas the massage group still had significant improvements but only to a mean average of -1.2

### **Clary Sage Essential Oil**

A clinical trial was undertaken in November 2014 at Sookmyung Women's University in Seoul Korea to assess the neurotransmitter changes taking place in blood plasma when a person inhales clary sage (*Salvia sclarea*) essential oil. This was an interesting trial because the results were able to further aid researchers in determining which is the most accurate method of measuring depression through questionnaires.



The trial was commenced using the Korean version of the Beck Depression Inventory (I & II).

Two measures were compared. The first measure was serotonin, the mood modulator, also known as 5-HT. The second measure was cortisol, the hormone that is released during times of stress and can be so detrimental to health, over time.

On inhalation of the clary sage essential oil:

- Cortisol levels dropped.
  - Levels of 5-HT rose significantly.
- Interestingly, it was found that the concentration of the 5-HT changes depended on the severity of the depression score.

### **5-HT**

In the group of participants who had a reading of “normal” on the depression scale:

- A 341% increase on 5-HT was recorded on the KBDI-I scale.
- A 828% increase in 5-HT was recorded on the KBDI-II scale.



In those who were deemed to be in the “depression” group:

- A 484% increase in 5-HT was recorded on the KBDI-I scale.
- A 257% increase in 5-HT was recorded on the KBDI-II scale.

### **Cortisol Changes**

- A 16% decrease in cortisol was recorded on the KBDI-I scale.
- A 31% decrease in cortisol was recorded on the KBDI-II scale.

### **Depression Group**

- A 8.3% decrease in cortisol was recorded on the KBDI-I scale.
- A 36% decrease in cortisol was recorded on the KBDI-II scale.

The researchers asserted that KBDI –II is potentially the better screening tool for clinicians to gauge depression.

Therefore, clary sage essential oil was able to increase “the happy drug” for more than eight times in people who were not depressed, but was still able to elevate their mood by about three times. More importantly though the physical effects of the cortisol were blunted as the stress hormone was decreased in their systems.

### **Neroli Essential Oil**

In another trial researchers wanted to establish to what extent neroli (*Citrus aurantium* var. *amara* (*flos*)) essential oil could help menopausal symptoms, stress, and oestrogen levels. This time sixty three women participated. One group was given 0.1% dilution of neroli essential oil, and the second group was given 0.5% dilution of neroli essential oil; the control group was given a

blank almond oil. Each participant was asked to inhale the essential oil for five minutes, twice daily, for five days. They were gauged with the Menopause Specific Quality of Life Questionnaire (MENQOL).

In addition, they were measured with a sexual desire **Visual Analogue Scale (VAS)** (Self-assessing a score of between 1-10).

Blood serum was then tested to review levels of cortisol, oestrogen, blood pressure, pulse and a stress VAS.

Both groups that used neroli essential oil scored very well in the physical domain of the MENQOL and the VAS scale, but it was found that sexual symptoms such as vaginal dryness remained unaffected. In summary, sexual desire was heightened, but this did not affect the actual physical sexuality of the woman. Both groups that used neroli essential oil showed a lower diastolic score when blood pressure was tested; however only those who had been inhaling the 0.5% dilution had a reduced systolic rate. Both groups enjoyed improved pulse rate as well as cortisol and oestrogen concentrations.

Therefore, inhaling neroli essential oil at 0.5% dilution was the most beneficial choice.

On review it was found that Western women tended to have mixed perceptions about their oncoming menopause. Most had very positive feelings about an end to periods and also the worry of unwanted pregnancies. This resonates with a fundamental difference between the aforementioned Mayan women and their perceptions about menopause. In fact, for them menopause does not even exist except in terms of the cessation of their periods. Women marry very young, between the ages



of fourteen and eighteen, and they have many, many children. Because of this, they have few menstrual cycles and also actually go through menopause a good ten years earlier than Western women.

Mayan women speak of the feeling of “being free” and “feeling like a young woman again.” Many of them look forward to menopause as a time of “constant and good health.” For them anxiety, negative attitudes and health concerns are the bane of the childbearing years and that menopause heralds an end to these times. They look forward to times where they are free of taboos and restrictions and they are able to do things they enjoy like going to church or visiting friends. To them, old age is treated with respect.

These Mayan women view the menopause simply as a running out of blood. They believe that childbearing uses up their blood and so for them there is no sadness for the end of fertility, because they feel they have had many

children and they have fulfilled that need.

For Western women the negative feelings they felt seem to come from an overwhelming concern about “letting themselves go.” They worry about their appearance and about no longer feeling attractive in a society dominated by young waifs.

This concern was addressed in a Korean trial from 2007 where post-menopausal women had abdominal massage in a view to try to reduce their waist circumference and the collection of body fat around their tummies. Each participant was given a one hour full body massage for six weeks. In between massages they were given a home aromatherapy blend to apply themselves, massaging into it into the abdomen for five days each week between massages.

The aromatherapy blend comprised of 5% grapefruit (*Citrus x paradisi*) essential oil and cypress (*Cupressus sempervirens*) essential oil combined with “three other kinds of oils.”



The aromatherapy group not only achieved significant reduction in waist size but also reported enhanced body image.

There were many trials I could have chosen, most of them using rose (*Rosa x damascena*)

essential oil and geranium (*Pelargonium graveolens*) essential oil incidentally, to balance the hormones, but I thought that the particular trials that I chose showed a very interesting focus on looking after the client's emotional well-being in order to reduce their symptoms.

### Aromatherapy Recipes for Menopause

Some suggested recipes to utilise well-being during menopause include:

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#### Menopause Massage Oil

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##### Ingredients:

4 oz. Passion Flower (*Passiflora incarnata*) oil

##### Essential Oils:

2 drops Rose Maroc (*Rosa x damascena*)  
1 drop Clary Sage (*Salvia sclarea*)  
1 drop Benzoin (*Styrax benzoin*)  
-----

Blend the carrier oil with the essential oils in a 4 oz. bottle. Use the blend for a full body massage or massage oil daily over the abdomen.

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#### Menopause Well-being Diffuser Blend

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##### Essential Oils:

1 drop Neroli  
(*Citrus aurantifolium* var. *amara* (*flos*))  
1 drop Lavender (*Lavandula angustifolia*)  
1 drop Bergamot (*Citrus bergamia*)  
-----

Refer to the diffuser manufacturer's guidelines for use of the diffuser. Diffuse the blend for thirty minutes then take a one hour break from diffusion.

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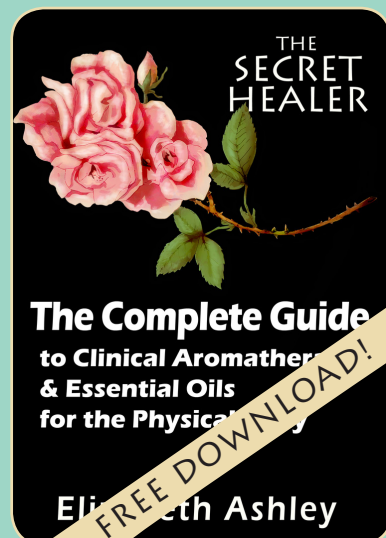
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# Aromatherapy, Meditation and Modern Medicine: Exploring the Benefits of Complementary Medicine in Today's Health System

by Tiffany Keith

Modern medicine is a marvel of technology, biology, and chemistry – science grappling with illness and death and often winning. Surgeries, injections, and pills can perform miracles that ancient physicians would have wept to see. However, some of that ancient knowledge can still be of use today. Practiced alongside modern medicine, it can provide more subtle healing that affects the root cause as well as the symptoms of a disease.

Increasing numbers of people are seeking knowledge that has been lost, ignored, or sidelined for centuries; these are often treatment modalities that have been discounted, for the most part, by the medical community. So much interest has grown in these

ancient practices that science has finally taken a second glance, and many of these systems are proving, on being tested, to be beneficial, either alone or as a complementary therapy alongside modern medicine. The two modalities that

this article addresses are aromatherapy and meditation, ancient practices that are making their way back into the spotlight of science. It is possible that, combined, the synergy of these practices can bring about greater healing than either can alone.



## **Aromatherapy Practice: The Mind-Body Connection**

One of the most important factors that many of the complementary alternative modalities have in common is a focus on the mind-body connection, and the



increasingly obvious fact that our thoughts have a huge impact on the outcome of any application. One of modern medicine's drawbacks is that it tends to view a patient as parts, like a computer – tweak this wire, replace that board, and everything will be fine. People, however, are significantly more complex and interrelated than any computer. Our systems are interconnected in ways that are just now being explored by science. An interesting example is our sense of smell—our olfactory sense is deeply tied to the limbic system, the part of our brain that deals with emotion, memory, and learning.

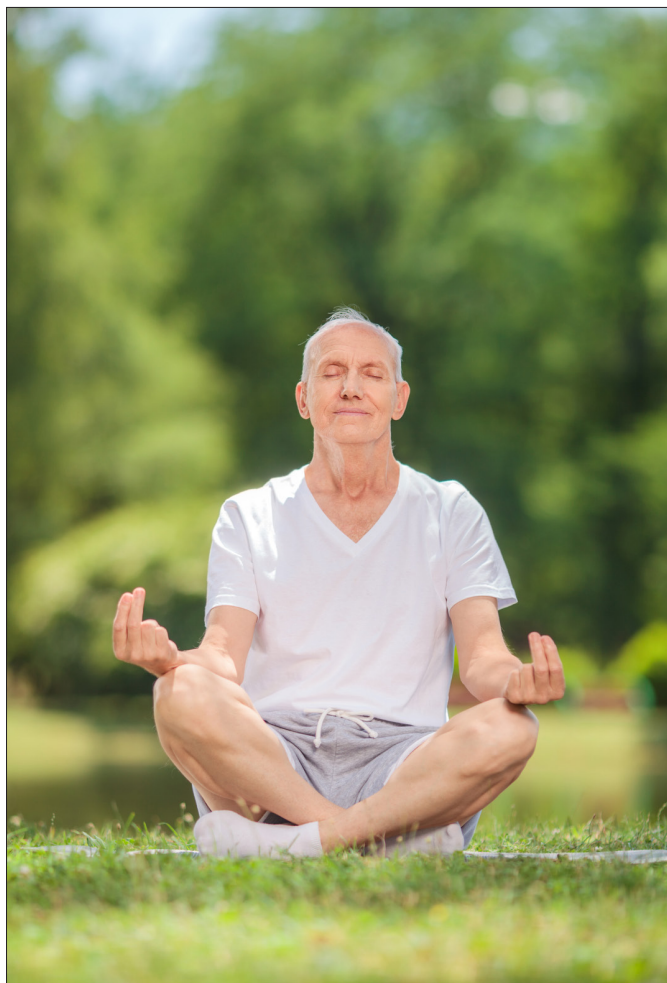
This is why the effects of essential oils can be felt on so many levels. Not only do the essential oil molecules pass through the blood-brain barrier, affecting our body and mind physically, but scent is entwined with both memory and emotion. For this reason, certain smells can evoke strong reactions, both positive and negative, from many people. The sense of smell is tied deeply into our brains at levels well below the conscious mind. We react mentally and physically without the smell even necessarily registering in our awareness. The sense of smell is at once extremely powerful and very, very subtle.

Aromatherapy, the practice of utilizing essential oils on a physical, emotional, and spiritual level, is one of the promising complementary modalities that is being explored today. It can be defined as “the controlled use of essential oils to maintain and promote physical, psychological and spiritual wellbeing.”<sup>6</sup> Essential oils are the distilled (or otherwise extracted) essences of various parts of certain plants. Scientific studies have shown that essential oils can have a strong effect on

both the body and mind. For example, a study at the College of Public Health Sciences of Chulalongkorn University in Thailand showed that inhalation of French lavender (*Lavandula angustifolia*) essential oil “caused significant decreases of blood pressure, heart rate, and skin temperature”<sup>8</sup> and it also increased the power of alpha and theta brainwaves, showing that simply inhaling the oil has a measurable, physical response. Similar results have been shown in essential oil applied to the skin; one study, which used a blend of lavender essential oil (*Lavandula angustifolia*) and bergamot (*Citrus bergamia*) essential oils versus a placebo, with both applied in a massage, showed a “significant decreases of pulse rate, and systolic and diastolic blood pressure, which indicated a decrease of autonomic arousal” as well as subjective ratings of being “more calm” and “more relaxed” by the recipients of the essential oil blend versus the placebo.<sup>5</sup>

### **Aromatherapy Practice: The Immune System**

Many essential oils have been shown to increase the human body's immune response directly. Blue gum eucalyptus (*Eucalyptus globulus*) essential oil, for example, affects phagocytic ability of human monocyte derived macrophages (MDMs) in vitro<sup>9</sup>, and furthermore does not negatively affect the macrophage's viability. Carvone, a chemical constituent found in caraway (*Carum carvi*) essential oil, dill (*Anethum graveolens*) essential oil and in some other essential oils, has been shown to increase “...the total number of white blood cells, and stimulated antibody production in spleen and bone marrow when administered to mice...”<sup>10</sup>



Obviously, significantly more research must be done, but there are very promising results from the studies that have been conducted thus far.

### **Aromatherapy Practice: Stress and Anxiety**

Another area in which aromatherapy has proven particularly efficacious is in the reduction of stress and anxiety. In one case, a basic study of pre-operative patients tested 150 patients who were about to undergo surgery. They were either given standard care (the control group), standard care plus the application of lavandin (*Lavandula x intermedia*) essential oil, or standard care plus jojoba (*Simmondsia chinensis*). The patients that received lavandin essential oil “had

significantly lower anxiety on OR (operating room) transfer, suggesting that lavandin essential oil is a simple, low-risk, cost-effective intervention with the potential to improve preoperative outcomes and increase patient satisfaction.”<sup>1</sup> Essential oils are a vast resource that is deeply underutilized where it is most needed.

### **Aromatherapy and Meditation**

Meditation, or mindfulness meditation practice, can be as simple as spending a few breaths being aware, deeply and intimately, of one’s body and surroundings – or as complex as spending hours chanting mantras. Meditation, at first glance, doesn’t really seem like something that could be considered a complementary therapy, and yet the results that have been shown in extensive studies are impressive. A study conducted on HIV-1 patients showed that in an eight week program, those who meditated every day for thirty to forty five minutes showed no decrease in their CD4+ T lymphocytes (which help fight the virus), whereas those who did not meditate showed a significant drop in their immune cells. <sup>2</sup> The daily meditation practice was enough to strengthen the patients’ immune systems considerably—those who meditated kept their fighting cells alive.

Another study, in 2003, followed two groups of healthy employees: one group participated in an eight week meditation course and the other group did not. At the end of the eight weeks, both groups received a flu shot. The scientists reported “significant increase in left-sided anterior activation, a pattern previously associated with positive affect, in the meditators compared with the non-meditators ... also found significant increases



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in antibody titers to influenza vaccine among subjects in the meditation compared with those in the wait-list control group. Finally, the magnitude of increase in left-sided activation predicted the magnitude of antibody titer rise to the vaccine.”<sup>3</sup> In other words, the employees who meditated had a better antibody response than those who had not, and the difference in response could also be tracked by brain activity level.

Not only does meditation boost immune response, it has been shown to improve health and reduce stress at the genetic level. A study conducted in Wisconsin, France, and Spain compared a group of experienced meditators in a day of intensive mindfulness practice to a group of non-meditators doing quiet tasks. The researchers discovered that “the meditators showed a range of genetic and molecular differences, including altered levels of gene-regulating machinery and reduced levels of pro-inflammatory genes, which in turn correlated with faster physical recovery from a stressful situation.”<sup>7</sup>

### Essential Oils for Meditation

Science, therefore, seems to support the immune-boosting, healing effects of each of these complementary therapies. Additionally, there are essential oils that are traditionally used to enhance meditation: angelica root (*Angelica archangelica*), cedarwood (*Cedrus atlantica*), frankincense (*Boswellia carteri*), jasmine (*Jasminum officinale*), lavender (*Lavandula angustifolia*), myrrh (*Commiphora myrrha*), neroli (*Citrus aurantium* var. *amara* (flos)), rose (*Rosa x damascena*), and ylang ylang (*Cananga odorata*) are essential oils that are often used to augment the meditation experience. Evidence would suggest that the use of an essential oil which both increases immune response and enhances meditation might create a synergistic effect that would increase the body’s natural defenses. Angelica root (*Angelica archangelica*) essential oil is one example that might be useful in this capacity (although care should be taken, as the essential oil which is extracted from the root is

phototoxic; it also should not be used during pregnancy or while nursing). It is important that each essential oil be chosen specifically for the individual, as essential oils can be dangerous if used improperly.

Indeed, scientists have observed a phenomenon that could have great promise in this field. Many of the human body's systems can be "trained" to respond; just as Pavlov famously trained his dog to salivate at the sound of a bell, the immune response can be conditioned in much the same way. In 1985, researchers at the University of Alabama exposed mice to the smell of camphor (*Cinnamomum camphora*) essential oil for several hours, and then injected the test subjects with a chemical that stimulated the activity of the mice's "killer" white blood cells, while the control group was only exposed to the aroma of camphor (*Cinnamomum camphora*) essential oil. They repeated this sequence nine times, and the tenth time, they simply exposed all of the mice to the odor without giving them an injection. Nevertheless, the mice that had previously received the injections showed elevated white blood cell levels, while those that had only been exposed to the aroma of the camphor (*Cinnamomum camphora*) essential oil did not.<sup>4</sup> Their immune systems linked the scent of camphor (*Cinnamomum camphora*) essential oil with the need to increase white blood cells, and did so automatically.

If this concept, conditioning the immune response, was applied to the practice of meditation, combined with the benefits of aromatherapy, the effect on the immune system would be enormous. Not only would meditation and aromatherapy directly improve

the body's health, but practitioners could then get an immune boost simply by smelling the oils they used during their meditation practice – immensely helpful in situations where meditation is not practical, such as a long plane flight or a crowded shopping center.

Immune response conditioning can be used for people with chronic illness, such as lupus or fibromyalgia. At some point, after meditating with a set smell, even summoning the memory of their selected healing scent could potentially arouse their immune system to rally to their defense – just as the memory of the scent of apple pie can cause one to salivate. The effect could be strengthened by incorporating other healing modalities, such as massage and Reiki, and using the chosen essential oil during each session. The mind and body would associate that smell with increased feelings of wellness and relaxation, creating a sort of exponential loop of healing.

While further research must be conducted, it should be apparent that by ignoring these and other complementary alternative modalities, the science of medicine is doing itself and its patients a great disservice. Meditation and aromatherapy are not a magic "cure-all" pill, but used judiciously alongside current medical standards, and with oversight from trained professionals, they could provide valuable relief to thousands of people.

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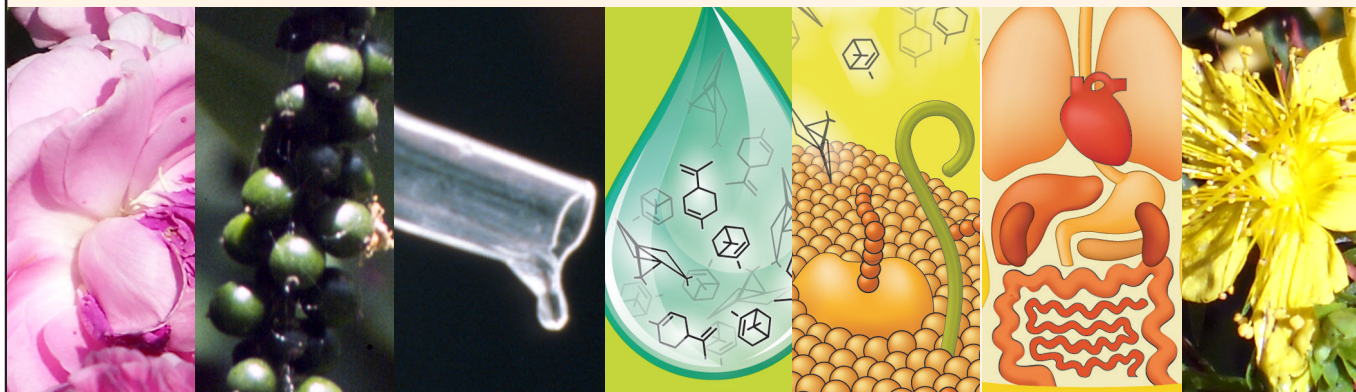
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# Essential Oils for Fibromyalgia

by Evelyn Stilson Ouderkirk



## What is Fibromyalgia?

Fibromyalgia (FM) is a chronic medical condition that causes widespread pain throughout the body. To receive a diagnosis of fibromyalgia, a patient must show a history of widespread pain in all four quadrants of the body for a period lasting more than three months and must show a positive pain reaction in eleven out of eighteen tender points in the body when pressure is applied. Although widespread pain is the primary symptom of fibromyalgia, patients often suffer from severe fatigue, cognitive dysfunction (“brain fog”), irritable bowel syndrome (IBS), insomnia, headaches and migraines, anxiety, depression,

and an increased sensitivity to light, touch, and sound.

An estimated ten million Americans are currently diagnosed with fibromyalgia,<sup>1</sup> with symptoms that range from tolerable for some, to debilitating for others. Fibromyalgia patients often receive their diagnosis only after all other known causes of their symptoms have been ruled out.

Recent research suggests that fibromyalgia associated pain may be caused by a demyelinating process similar to chronic inflammatory demyelinating polyneuropathy (CIDP).<sup>2,3</sup> Understanding the root causes of fibromyalgia pain can lead to better symptom management and an improved quality of life for fibromyalgia patients.

## Essential Oils as a Complement Tool for Pain Management

Numerous studies have been conducted that show essential oil use may reduce inflammation and pain. As fibromyalgia research progresses, our understanding of the physiological changes that occur in the body can provide insight to the most appropriate essential oil choices for the fibromyalgia client.

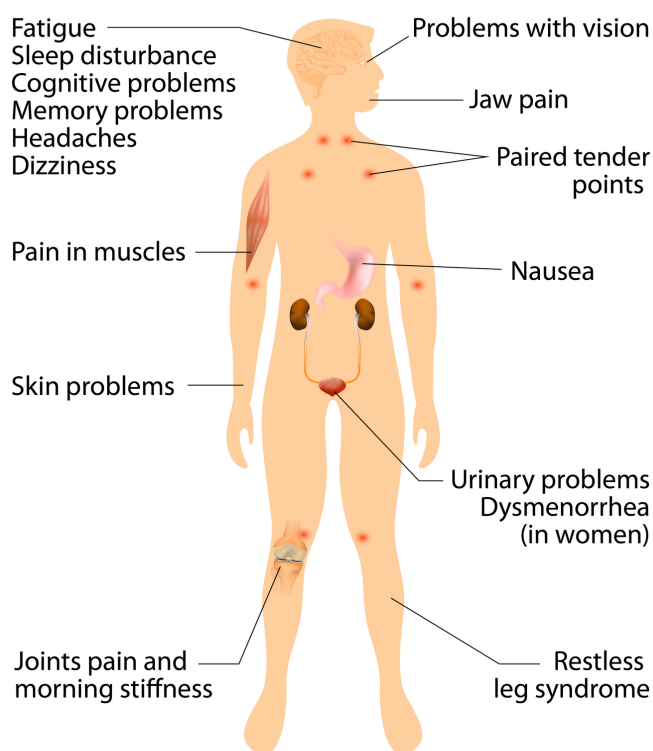
Blue gum eucalyptus (*Eucalyptus globulus*) essential oil research has shown reduced inflammation and pain when inhaled.<sup>4</sup>



Blue gum eucalyptus (*Eucalyptus globulus*)  
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## Fibromyalgia



Participants in the study were clients who received total knee replacement surgery and also received traditional treatment therapies, in addition to essential oil inhalation therapy. Pain and inflammation in the human body have a negative effect on autonomic body functions resulting in increased blood pressure and heart rate. Researchers theorize that inhalation has a direct effect on the autonomic and sympathetic body systems by way of the olfactory system. Participants in the study that inhaled eucalyptus essential oil had reduced blood pressure, reduced heart rate, and a reduced perception of pain when compared to the control group.

Holy basil (*Ocimum sanctum*) essential oil studies have also shown a reduction in

neuropathic pain.<sup>5,6</sup> Researchers theorize that neuropathic pain is perpetuated by calcium and oxygen free radicals competing for dominance. As one level increases, the other level will also increase, creating a vicious cycle that causes the pain state. Their research using rat models demonstrates reduced levels of calcium and oxygen free radicals in addition to an observed reduction in pain.

Black pepper (*Piper nigrum*) essential oil has been shown to have strong analgesic and anti-inflammatory effect.<sup>7</sup> Furthermore, the study conducted by Farhana et al. showed black pepper essential oil had significant analgesic effect when compared to the non-steroidal anti-inflammatory (NSAID) and control groups in the study. Essential oil from *Piper nigrum* has the potential to be skin irritating if not well-diluted due to the hot and spicy nature of the oil.<sup>8</sup> Black pepper essential oil should be well tolerated as a topical application when diluted with a carrier oil at a one percent ratio. Proper use of black pepper essential oil at safe levels also demonstrates far fewer side effects than its pharmaceutical counterpart.

Vetiver (*Vetiveria zizanioides*) essential oil research involving mice shows reduced inflammation and strong analgesic activity in both acute and chronic cases.<sup>9</sup> Thyme (*Thymus vulgaris*) essential oil research shows reduction in free radical activity, neuropathy pain reduction, and improvement in cognitive function due to diabetes mellitus.<sup>10</sup> Significant research has been conducted on the neuroprotective effects of turmeric (*Curcuma longa*) essential oil that shows reduction in inflammatory response, free radical expression and improved cognitive function.<sup>11</sup> Ginger (*Zingiber officinale*) extract research has also

shown improvement in both myelinated nerve fiber loss and oxidative stress in nerve lesions associated with neuropathic pain.<sup>12</sup>

### Essential Oils Offer Added Values for Fibromyalgia Sufferers

Fibromyalgia clients struggle with multiple issues along with the primary complaint of chronic pain. In addition to answering the primary concern of pain, an essential oil has multiple beneficial values to offer. For example, Black pepper (*Piper nigrum*) essential oil offers energetic qualities such as a reduction in both fatigue and depression in addition to its analgesic and anti-inflammatory properties.<sup>8</sup> Blue gum eucalyptus (*Eucalyptus globulus*) essential oil also provides support by soothing exhaustion and aiding with concentration.<sup>13</sup>

It is the energetic values of essential oils that potentially provide a greater health benefit to the fibromyalgia patient. Not all patients diagnosed with fibromyalgia display every symptom, nor do they all experience the same level of pain. An aromatherapy blend has the potential to address primary and multiple secondary complaints simultaneously.

Aromatherapy as an art, is designed to support the individual by getting to know that individual. While generalizations can be made about the benefits of a specific essential oil, it is not assumed that one particular essential oil will be a match for everyone in need of that benefit. By following current research on essential oils and chronic health problems we, as aromatherapists, can provide appropriate choices for individual clients.

#### Tender Points Blend I

---

**Ingredients:**

1 oz. jojoba (*Simmondsia chinensis*)

**Essential Oils:**

4 drops ginger (*Zingiber officinale*)  
 1 drop blue gum eucalyptus  
 (*Eucalyptus globulus*)  
 2 drops myrrh (*Commiphora myrrha*)

---

#### Tender Points Blend II

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**Ingredients:**

1 oz. jojoba (*Simmondsia chinensis*)

**Essential Oils:**

2 drops Holy basil (*Ocimum sanctum*)  
 1 drop blue gum eucalyptus  
 (*Eucalyptus globulus*)  
 2 drops myrrh (*Commiphora myrrha*)

---

**Instructions for Use:**

Both Tender Points Blends are anti-inflammatory, antispasmodic, and warming. Blue gum eucalyptus (*Eucalyptus globulus*) essential oil and myrrh (*Commiphora myrrha*) essential oil offer calming and clear thinking benefits as well as helping to alleviate exhaustion.

It's best to mix these blends in a roller-ball applicator and apply to painful tender points. Ginger (*Zingiber officinale*) essential oil and Holy basil (*Ocimum sanctum*) essential oil can be sensitizing for some people, so it's best to use one blend for a few weeks and then switch to alternative blends for a few weeks before returning to the tender points blends. Fibromyalgia symptoms are known to "wax and wane" so I generally save the Tender Point Blends for times when fibromyalgia pain flares are at their highest limits.

Cautions: Avoid use during pregnancy. Ginger essential oil is slightly phototoxic.



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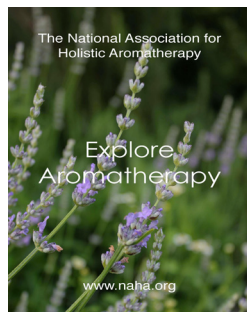
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# Diabetes Mellitus: Current Understanding and Management Alternatives

by Annette Davis, CN and Nikolas Arvis, MD

Diabetes is a group of metabolic diseases characterized by prolonged high blood glucose. *Diabetes mellitus* is derived from the Greek word *diabetes* meaning “to pass through” and the Latin word *mellitus* meaning “honeyed.” It is believed that the term *diabetes* was coined by Greek physician Apollonius of Memphis (circa 250 B.C.) when he observed excessive urination in patients. The term *mellitus* was added by English physician Thomas Willis in 1675 when he noticed that the urine of diabetic patients had a sweet taste.

**Type 1 diabetes**, previously called insulin-dependent diabetes, occurs when beta cells, the insulin producing cells of the pancreas, are destroyed by the immune system.

**Type 2 diabetes**, previously called noninsulin-dependent diabetes, occurs when cells lose their sensitivity to insulin.

If untreated, diabetes can lead to serious conditions such as blindness, heart disease, kidney disease, nerve disease and stroke.

## Epidemiology and Medical Statistics Prevalence in the United States

As of 2012, 9.3% of the United States population suffered from diabetes. Diabetes in seniors over the age of 65 had a staggering prevalence of 25.9% or 11.2 million people.



Authors Annette Davis and Nikolas Arvis

In people under the age of 20, only one in three cases of diabetes is type 2 versus 91% encountered in older ages.

When ethnicity is taken into consideration: 7.6% of Non-Hispanic whites, 9% of Asian Americans, 12% of Hispanics, 13.2% of Non-Hispanic Blacks and 15.9% of American Indians/Alaskan Natives suffer from diabetes.

Based on death certificate data, diabetes was the seventh leading cause of death in the United States in 2010. In 2012, the cost of diabetes, including reduced productivity and medical costs, was estimated at 245 billion dollars (CDC, 2014).

## Pathophysiology

In order to understand diabetes, we first need to understand carbohydrate metabolism and





the action of insulin. After the consumption of food, carbohydrates are broken down into glucose molecules in the gastrointestinal (GI) tract which then pass into the bloodstream elevating its concentration in the blood. This glucose rise stimulates the pancreas to secrete insulin from its beta cells. Once secreted, insulin activates glucose transporters that allow glucose to enter cells. Much like a key in a lock, the activation happens through a receptor in the cell membrane that is specific for insulin molecules. Once glucose has entered the cells, dropping its concentration in the blood, insulin secretion is inhibited.

Hormones such as glucagon, catecholamines, growth hormone, thyroid hormones and corticosteroids participate in raising blood glucose. By contrast, insulin is the only hormone known to reduce blood glucose.

Diabetes is a metabolic disease that occurs either because the pancreas doesn't produce

enough insulin or the cells fail to properly respond to insulin. Depending on the reason, diabetes is divided in type 1 and type 2.

### **Type 1 Diabetes**

Type 1 diabetes is an autoimmune condition with unknown cause, although a viral infection is usually blamed. The immune system attacks and destroys the beta cells of the pancreas halting the production of insulin. The onset of type 1 diabetes is usually before the age of thirty. Patients are generally slim to normal weight. The lack of insulin results in the inability of glucose to enter the cells and cellular energy requirements fail to be met. The starving cells utilize a process called lipolysis to break fats into glycerol which further metabolizes into glucose and fatty acids. The fatty acids metabolize into ketones which in turn drop the metabolic pH. This condition is called diabetic ketoacidosis (DKA) and it is usually the first symptom of type 1 diabetes.

## Type 2 Diabetes

Type 2 diabetes is vastly different than type 1 diabetes. Autoimmunity is not responsible, and fortunately the beta cells are not destroyed allowing the pancreas to still produce insulin. In addition to genetic factors, type 2 diabetes is caused by obesity, dietary and lifestyle factors, and advanced age. The pathology behind this type is a result of one or a combination of the following factors: peripheral resistance to insulin, altered insulin secretion, increased production of glucose by the liver. The reason cells become resistant to insulin is quite complex. While not yet fully understood, staggering evidence points toward obesity and a diet rich in simple carbohydrates and fats. When cells become resistant to insulin, the pancreas compensates by increasing insulin production causing hyperinsulinemia. Over time, the secretion of insulin drops to subnormal levels. Because our body is remarkably able to adapt, diabetes can remain undiagnosed for years.

### Signs and Symptoms of Diabetes

Diabetes type 1 and 2 share the same signs which are associated with the inability of glucose to enter the cells: increased thirst (polydipsia), increased hunger (polyphagia) that gets worse after eating, and frequent urination (polyuria). This trio is common to all types of diabetes. Other signs such as slow wound healing, fatigue, headaches, and blurry vision are also very common, but often ignored or misdiagnosed at first.

When high glucose is present in the bloodstream, the kidneys are forced to work excessively in order to filter and absorb it. The capacity for such action however is limited and

### Symptoms of Diabetes

- Increased thirst (polydipsia)
- Increased hunger (polyphagia) that gets worse after eating
- Frequent urination (polyuria)
- Slow wound healing
- Fatigue
- Headaches
- Blurry vision

excess glucose is secreted in the urine along with water. Polyuria leads to dehydration which triggers a thirst response. Fatigue is also the result of dehydration and the inability of the body to use sugar to produce energy. Weight loss is the result of constant urination as well and the loss of calories through urine. This often manifests in the early stages of diabetes when patients lose weight rapidly. The high concentration of glucose circulating in the bloodstream is also important at a cellular level. The increased osmotic pressure in the extracellular fluids forces water to passively stream from the cells causing inflammation, damage, or even cellular death. Conditions such as diabetic retinopathy, nephropathy and neuropathy are the direct result of this process.

### Managing Diabetes

The management of diabetes concentrates on keeping blood sugar levels as close to normal as possible. Type 1 diabetes is, of course, treated with insulin injections and in some cases by pancreatic transplantation. Type 2 diabetes is treated with anti-diabetic medications, such as Metformin, which decrease production of glucose by the liver.



Other medications may be used to increase the release of insulin, make cells more sensitive to insulin, or decrease the absorption of sugar from the intestines. Insulin may also be used in type 2 diabetes. Fortunately, a number of medicinal plants have also shown promising results in the management of diabetes. “More than 400 plants and compounds have shown antidiabetic activities *in vitro* and/or *in vivo*” (Chang et al., 2014).

### Case Study (Example)

A fifty five year old man presents with fatigue, chronic headache, chronic thirst, and frequent urination. He has gained fifty pounds over the past year in spite of the fact that he stopped drinking beer when the weight gain started. He admits that he snacks on sugary foods, chips, and drinks one to two liters of soda daily. He works a desk job. He lifts weights once a week, and tries to walk once per week, but is otherwise largely inactive. He has a paternal family history of type 2 diabetes. His blood sugar measured 145 six months ago and 150 two weeks ago. His Hemoglobin A1c measures high at 6.8. His total cholesterol is within normal range at 198, however his HDL Cholesterol is mildly elevated at 39. His body mass index (BMI) is 29 and his blood pressure is mildly elevated at 145/95. He currently takes no medications, herbs or supplements. He has refused pharmaceutical treatment and is seeking alternatives.

### Analysis

His problem is Type 2 diabetes, likely influenced by a genetic component though largely caused by dietary and lifestyle factors. His increasing blood sugar, BMI and blood pressure are increasing his risk for heart disease, stroke and kidney disease.

### Management

Management includes a life-long low-glycemic or other weight-reduction diet and an interval exercise program to promote weight reduction. Botanical support includes anti-diabetic, anti-inflammatory, and hypotensive herbs such as Cinnamon (*Cinnamomum zeylanicum*) (Ranasinghe et al., 2012), Fenugreek (*Trigonella foenum-graecum*) (Neelakantan et al., 2014), Roman Chamomile (*Anthemis nobilis*) (Zhao et al., 2014), Lemon Balm (*Melissa officinalis*) (Weidner et al., 2014), Tarragon (*Artemisia dracunculus*) (Kheterpal et al., 2010), and Geranium (*Pelargonium graveolens*) (Boukhris et al., 2012). Licorice (*Glycyrrhiza glabra*) herb will be avoided in this case due to his mild hypertension. The client has been directed to keep a journal of his exercise, food intake, blood sugar and blood pressure. He will have a follow-up clinic visit every two months and follow-up labs every three to six months to measure his progress and adjust his management plan as needed.

### Follow-up

The client returned for follow-up at five months. He has been compliant with his tincture blend only having missed an occasional weekend dose. He has cut his soda intake to twelve ounces per day and snack foods to once per day. He continues to abstain from beer except for Friday or Saturday nights when he socializes with friends. He has added a leafy green salad and whole fruit smoothie to his daily diet. He has switched from white rice to brown rice 50% of the time, and from white bread to whole grain bread 75% of the time. He is limiting bacon and fried foods to one or two servings each per week. He has added an half an hour treadmill run twice per week and takes

**Table 1:** Herbs that may be useful in the management of Diabetes



**Cinnamon bark** (*Cinnamomum zeylanicum*)  
Reduces insulin resistance, anti-inflammatory  
(Ranasinghe et al, 2012)



**Fenugreek seed** (*Trigonella foenum-graecum*)  
Reduces postprandial glucose levels  
(Neelakantan et al, 2014)



**Chamomile, Roman flower** (*Anthemis nobilis*)  
Hypoglycemic, anti-inflammatory, hypotensive  
(Zhao et al, 2014; Zeggwagh et al, 2009)



**Lemon Balm leaf** (*Melissa officinalis*)  
Reduces insulin resistance (Weidner et al, 2014) © NAHA Image Database



**Geranium leaf** (*Pelargonium graveolens*)  
Anti-diabetic  
(Boukhris et al, 2012)



**Tarragon leaf** (*Artemisia dracunculus*)  
Anti-diabetic (Kheterpal et al, 2010)  
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**Licorice root** (*Glycyrrhiza glabra*)  
Reduces insulin resistance, anti-inflammatory  
(Sil et al, 2013)



**Table 2: Sample Phytotherapeutic Diabetes Management**

Fenugreek ( <i>Trigonella foenum-graecum</i> ) herbal tincture	80 cc
Roman Chamomile ( <i>Anthemis nobilis</i> ) herbal tincture	80 cc
Lemon Balm leaf ( <i>Melissa officinalis</i> ) herbal tincture	80 cc
Cinnamon bark ( <i>Cinnamomum zeylanicum</i> ) essential oil	*3 cc
Tarragon ( <i>Artemisia dracunculus</i> ) essential oil	*3 cc
Geranium ( <i>Pelargonium graveolens</i> ) essential oil	*3 cc

Blend all of the herbs and essential oils listed in Table 2 together in an eight-ounce glass bottle. Shake well before use. Take 2 cc with each three meals diluted in a small glass of water.

(\*Essential oils for oral use should be highly diluted in an appropriate carrier. The amount of essential oil contained in this tincture blend is approximately 0.375 drops of each oil - 1.125 drops total per 2 cc dose.)

Recommend a low glycemic, weight reduction diet and exercise plan.

Note: This sample phytotherapeutic management plan is intended to be used under the supervision of a qualified healthcare professional. Optimal results are achieved when management plans are customized to each patient.

a walk around the block on his lunch hour most week days. He still lifts weights once per week and agrees to try and increase to twice per week. He has lost ten pounds (reducing his BMI from 29 to 28). His blood sugar has decreased to 138. His LDL cholesterol has decreased from 39 to 38 bringing it within normal range. His Hemoglobin A1c has decreased from 6.8 to 5.9 (normal range 4 - 5.6%). His blood pressure has decreased to 143/93. He states that his symptoms have all decreased approximately 50%. The client is satisfied with his progress. He agrees to continue his tincture blend while continuing dietary and lifestyle improvements. He has been advised to schedule a follow-up visit in two months and follow-up labs in six months.

Diabetes is an extremely common, disabling, and potentially deadly disease. Increasing public awareness of the signs and symptoms of the disease will greatly increase early diagnosis and a management plan resulting in a reduction of premature death and disability. For example, reducing Hemoglobin A1c (a laboratory measure of blood glucose control) by just one percentage point can reduce the risk of eye, kidney and nerve diseases by an impressive 40%. Keeping blood pressure under control can reduce the risk of heart disease and stroke by up to 50%. Reducing LDL (“bad”) cholesterol, while increasing HDL (“good”) cholesterol can reduce the risk of cardiovascular events by up to 50% (CDC, 2014). While anti-diabetic medications are

sometimes unavoidable, anti-diabetic herbs and essential oils in combination with dietary and lifestyle modifications can be valuable tools in reducing the need for prescription medicines while greatly improving the quality of life for diabetic patients.

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Annette Davis is a Clinical Nutritionist with over twenty years of clinical Phyto-Aromatherapy and Endobiogeny experience. She has studied Endobiogeny under Dr. Jean Claude Lapraz since 1989. She was introduced to holistic healing by her Grandmother, an American aromatherapy pioneer, Annemarie Buhler. She currently serves as the President of the National Association of Holistic Aromatherapy (NAHA) and as the Membership Chair for the American Society of Endobiogenic Medicine and Integrative Physiology (ASEMIP).

## About Nikolas Arvis, M.D.:

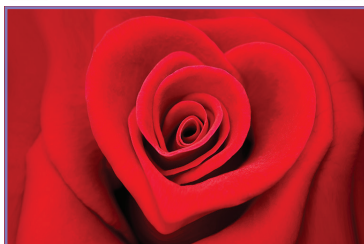
Dr. Nikolas Arvis is a European Union licensed Medical Doctor. He attended the University of Belgrade School of Medicine where he earned his medical degree in 2007. Upon graduation he completed his internship at the Cardiovascular Institute of Belgrade and then entered the forensics residency program. He moved from Greece to the United States in 2011. He is currently studying Endobiogeny and working toward his medical licensing in Idaho.



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## It's Harvest Time!

by Shanti Dechen CCAP, CAI, LMT

Our botanical garden was so prolific this year! We grew basil (*Ocimum basilicum*), German chamomile (*Matricaria recutita*), lavender (*Lavandula angustifolia*), cilantro/coriander (*Coriandrum sativum*), melissa (*Melissa officinalis*), peppermint (*Mentha x piperita*), rose geranium (*Pelargonium graveolens var. roseum*), rosemary (*Rosmarinus officinalis*), yarrow (*Achillea millefolium*), thyme (*Thymus vulgaris*) and many other herbs. We have already processed many aromatic plants into infused oils, dried herbs and hydrosols.

Whether you have a garden or are growing potted plants there are many ways to prepare your bountiful fall harvest for use throughout the year. Here are my suggestions:

**Drying:** Drying can be used for culinary purposes or as herbal teas. After you harvest the plant material you can either place it in a basket with a cloth or paper towel in the bottom to soak up any moisture, hang the plants up, or place the plants in a paper bag. Once they are well dried, put them into a glass jar and label.

It is best to store dried herbs in a dark and cool environment to prolong the shelf life. These can be used for tea, ground for facial products, or distilled for hydrosols and essential oils.

**Distillation:** Steam distillation of all aromatic plants can be carried out for both essential oils and hydrosols. There are many glass and copper home garden distillers on the market. They range from 2-10 liters.



**Stovetop Hydrosol:** This is another easy and inexpensive way to distill any aromatic plant. The distillation equipment is simple and is usually found within your home; stainless steel pot, stainless steel bowl, ceramic bowl, brick and ice. This process results in a lovely hydrosol with a very small amount (0.5-1%) of essential oil.





**Flower Essences:** If you still have fresh flowers in your garden, processing them into flower essences can be a fantastic way to soothe the emotions and instill a healthy balance throughout the year. A useful reference for this process is *Flower Essence Reparatory* by Patricia A. Kaminski and Richard A. Katz.

**Infusion or Maceration** is another method of extraction that is used for plants and herbs that cannot be steam distilled or extracted through pressing the seeds or nuts.

The flower heads are collected and covered in a vegetable base. Olive oil (*Olea europea*) or jojoba (*Simmondsia chinensis*) is the best base to cover the plant material and to draw out the

beneficial nutrients. Neither of these oils will oxidize, nor become rancid, as so many other carrier oils do.

### **Oil Infusion Process (Rose Hip Infusion):**

**STEP 1** - Clean and dry the flower heads, herbs or plant material for a day or two.

**Method:** Dry the plants by putting them into a basket with a cloth or paper towel in the bottom to soak up any moisture, hang them up, or place them in a paper bag.

**STEP 2** - Once the plant material is dry, chop, crush, or grind it into small pieces or powder.

**STEP 3** - Place the crushed or ground up plant material into a glass jar, then cover with a base of olive or jojoba oil. Leave a small amount of room at the top.

**NOTE:** Use jojoba for any delicate aromatic plant material or if it will be used as carrier oil for facial care products. Olive oil (*Olea europea*) is fine for other plant matter such as arnica (*Arnica montana*) or calendula (*Calendula officinalis*).

Leave the mixture in a dark and warm environment for four to six weeks, shaking it daily 100 times, until the base oil has absorbed the properties and essential oils from the plant material. When you see the plant material start to degrade it is time for the next step.

**STEP 5** - At the end of four to six weeks, drain off and filter the oil. Use a funnel and strainer or a coffee filter.

**STEP 6** - **Bottle:** It is always best to store the finished product in a dark amber-colored bottle.



STEP 7 - Label: Include the common and botanical name of the plant and the date of filtering on the bottle.

The end result of this infused oil is a wonderful carrier oil to add to your essential oil blends and products.

*Alcohol Infusion:* Used for non-aromatic herb plants like motherwort (*Leonurus cardiac*) and echinacea root (*Echinacea purpurea*) that will be used as an herbal tincture. With this process you can use freshly harvested plant material and do not have to dry it first. Follow the same instructions that have been given for the oil infusion.

### Examples of Plant Matter Used for Infusion:

#### **Arnica** (*Arnica montana*)

The flowers are used in the maceration process, while the roots of the plant are used

for homeopathic remedies. Arnica oil is used to reduce pain and inflammation for fractures, sprains, bruises,

strained muscles, tendons, bruises, contusions and swellings. It is excellent in reducing muscle and joint inflammation either combined in massage oil or used as a compress, when it is used as soon as possible on injuries with unbroken skin.

**Precaution:** Arnica oil should only be used externally, *not* internally. Do not use on cuts or open wounds. Do not use arnica oil during pregnancy or while nursing. Do not use arnica oil if you have a daisy allergy. If taking blood-thinning medication, consult a physician.

#### **Calendula** (*Calendula officinalis*)

Calendula looks similar to marigold, but should not be confused as such. Calendula has incredible anti-inflammatory and vulnerary properties; it is found to be particularly useful



for imbalances of the circulatory system. Its anti-inflammatory properties make it useful in balms and salves for wounds, bruises, bedsores, and skin rashes. It is excellent for skin care, particularly eczema.

### **Rosehip** (*Rosa canina*)

Rosehip oil is extremely beneficial in tissue regeneration for conditions such as facial wrinkles, premature aging, burns, and on scars following surgery. It is believed that these important functions in regeneration and repair of the skin tissue are due to high levels of both gamma-linolenic acid (47.4%) and linolenic fatty acids (33%).

### **St. John's Wort** (*Hypericum perforatum*)

St John's Wort oil is useful as an anti-inflammatory, for wounds, mild burns, soothing inflamed nerves, hemorrhoids, varicose veins, sores, ulcers, muscles, as well as sprains, and bruises.

**Precaution:** Photosensitivity - do not apply before going out into sunlight or exposing yourself to a tanning bed.

*Enjoy Your Bountiful Harvest!*

### **About Shanti Dechen:**

Shanti Dechen, CCAP, CAI, LMT is the founder and director of *Aroma Apothecary Healing Arts Academy*, is a Certified Clinical



Clockwise from Top left: Arnica (*Arnica Montana*), Rosehip (*Rosa canina*), Calendula (*Calendula officinalis*), St. John's Wort (*Hypericum perforatum*)  
All Images © NAHA Image Database.

Aromatherapist, clinical health practitioner and a certified massage therapist since 1979. She has a university background in healing and the sciences—over 15,000 hours of extensive holistic training and certification in bodymind therapies. She is the NAHA Regional Director for Colorado and lives in the beautiful mountain community of Crestone.

To learn more about Shanti, please visit her website at: [www.learnaroma.com](http://www.learnaroma.com) or email her at [info@learnaroma.com](mailto:info@learnaroma.com)

# A Collection of Conifers: Hydrosols from Autumn Woods

by Ann Harman



## What is a Conifer?

I have a deep reverence for the conifers; they are ancient noble trees. Conifers belong to the Gymnosperm (naked seed) Division of the plant kingdom. Unlike the Angiosperms (Flowering Plant Division) which produce seeds in ovaries of the plant, the Gymnosperms produce seeds that are not within a flower; thus the term *naked seed*. Botanically the term *angio* means a vessel (ovary), *gymno* means naked and *sperma* refers to seed. In evolutionary terms gymnosperms are quite ancient and predate the angiosperms by at least 200 million years. There are fossilized records of the conifers that date back at least 300 million years. Some gymnosperms, such as the Ginkgo and Cycads, have changed very little since these ancient times. Gymnosperms were the first plants to produce seeds, a huge evolutionary leap.

In botany, conifers refer to “cone bearing” plants. The conifers have at least 600 living species around the world and there are at least two botanical families that are of interest to the aromatherapy industry; these include *Pinaceae* and *Cupressaceae*. The Pine Family (*Pinaceae*) has several commercially important genera, including the Fir (*Abies*), Pines (*Pinus*), and Douglas fir (*Pseudotsuga*) which are distilled for their essential oils and hydrosols. The Cypress or Cedar Family (*Cupressaceae*) includes the genera:

*Chamaecypare*,  
*Cupressus*, *Juniperus*  
and *Thuja*. I have experience of distilling both Douglas Fir (*Pseudotsuga menziesii*) and Ponderosa Pine (*Pinus ponderosa*), and I have been fortunate to receive some delightful samples of other conifer hydrosols to analyze and experience, such as the lovely Pinyon Pine (*Pinus edulis*) and Juniper (*Juniperus communis*).

## Distillation of Conifers

Fall is my favorite time of year to distill the conifers for hydrosols. The cool fall air is a pleasant change from the grueling heat of the distillation shed in the summer. I have experimented with different parts of the trees including needles, twigs and heartwood and resin. I have yet to distill the bark or cones, but they are on my list. There is a noticeable difference in aroma, thus the chemistry, and the yield of essential oil. I prefer to hydro-distill the conifers after a good soak of at least twenty-four hours; longer if the weather is cool. Soaking the plant material helps to dissolve the waxy cuticles protecting the needles and makes the resin more accessible. On the alembic stills it takes a long, slow distillation to convert the terpenes present in the plant to the more polar alcohols and ketones. The hydrosols are bright and woody, really quite beautiful.



### Chemistry of Conifer Hydrosols

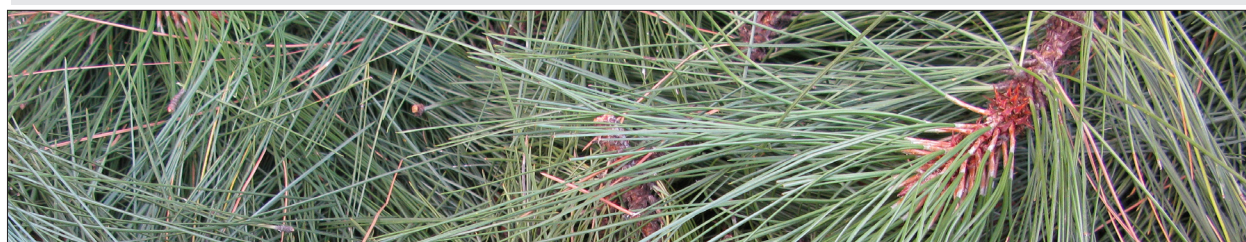
The five conifer hydrosols I have had analyzed by GC/MS (Gas Chromatography/Mass Spectrometry) were composed mainly of monoterpenols (36.38-69.28% of volatiles), ketones (0.69-36.91% of volatiles), esters (0.5-17.34% of volatiles) and oxides (0.7-3.04% of volatiles); they vary considerably between genus and species (see Table 1).

These hydrosols contained up to 115 other minor volatile components. It is important to note that the percentages listed in Table 1 are the percentage of the volatile components in relation to each other and not a percentage of the entire hydrosol; this was explained in the *NAHA Aromatherapy Journal* (Summer 2015.2) under the title “U.S. Grown *Helichrysum italicum*.”

**Table 1: Percentage Volatile Components Relative to Each Other**

	Pinyon Pine	Juniper	Douglas Fir	Ponderosa Pine	Douglas Fir
	<i>Pinus edulis</i>	<i>Juniperus communis</i>	<i>Pseudotsuga menziesii</i>	<i>Pinus ponderosa</i>	<i>Pseudotsuga menziesii</i>
	CHI1009	CHI1010	CHI1080	CHI1081	CHI1088
BORNYL ACETATE	3.73	0.5	12.5	0.12	17.34
CAMPHOR	1.52	28.93	1.16	ND	0.81
PIPERITONE	4.92	0.13	0.86	0.69	9.51
SABINA KETONE	ND	3.4	ND	ND	0.05
VERBENONE	5.62	4.45	ND	ND	0.19
α-TERPINEOL	22.14	1.14	8.8	38.12	5.97
BORNEOL	7.15	5.06	9.93	2.32	17.24
CAMPHENE HYDRATE ISOMER	ND	ND	ND	ND	3.64
CAMPHENE HYDRATE	0.1	0.012	4.88	0.83	7.51
CITRONELLOL	0.29	ND	5.05	0.32	3.65
Linalool	1.27	0.59	3.13	6.03	1.18
m-CYMENOL	1.62	0.06	ND	4.95	ND
MYRTENOL	1.66	1.44	0.24	3.91	ND
p-CYMENE-8-OL	3.61	2.44	0.6	3.39	0.29
TERPINENE-4-OL	11.98	16.71	29.68	4.59	15.16
Trans-CARVEOL	0.42	2.95	0.16	0.46	0.1
Trans-PINOCARVEOL	3.27	5.98	0.43	4.36	0.25
1,8-CINEOLE	1.03	0.06	0.42	0.14	0.3
1,8-CINEOLE, 2,3-DEHYDRO	2.01	2.5	0.32	0.56	0.03

A Collection of Conifers *continued*



Ponderosa Pine  
(*Pinus ponderosa*)  
© Ann Harman

We can see from Table 2 that the percentage of individual volatile components that remain in the distillate waters (hydrosols) is quite

low. Anyone who has tasted a pure hydrosol neat (undiluted) knows that even at that low percentage they are quite powerful indeed!

**Table 2: Percentage of Volatile Components in Entire Hydrosol**

	Pinyon Pine	Juniper	Douglas Fir	Ponderosa Pine	Douglas Fir
	<i>Pinus edulis</i>	<i>Juniperus communis</i>	<i>Pseudotsuga menziesii</i>	<i>Pinus ponderosa</i>	<i>Pseudotsuga menziesii</i>
	CHI1009	CHI1010	CHI1080	CHI1081	CHI1088
	59 mg/l	489 mg/l	109 mg/l	129 mg/l	163 mg/l
BORNYL ACETATE	0.00022	0.00003	0.00074	0.00001	0.00102
CAMPHOR	0.00009	0.00171	0.00007	ND	0.00005
PIPERITONE	0.00029	0.00001	0.00005	0.00004	0.00056
SABINA KETONE	ND	0.00020	ND	ND	0.00000
VERBENONE	0.00033	0.00026	ND	ND	0.00001
a-TERPINEOL	0.00131	0.00007	0.00052	0.00225	0.00035
BORNEOL	0.00042	0.00030	0.00059	0.00014	0.00102
CAMPHENE HYDRATE ISOMER	ND	ND	ND	ND	0.00021
CAMPHENE HYDRATE	0.00001	0.00000	0.00029	0.00005	0.00044
CITRONELLOL	0.00002	ND	0.00030	0.00002	0.00022
Linalool	0.00007	0.00003	0.00018	0.00036	0.00007
m-CYMENOL	0.00010	0.00000	ND	0.00029	ND
MYRTENOL	0.00010	0.00008	0.00001	0.00023	ND
p-CYMENE-8-OL	0.00021	0.00014	0.00004	0.00020	0.00002
TERPINENE-4-OL	0.00071	0.00099	0.00175	0.00027	0.00089
Trans-CARVEOL	0.00002	0.00017	0.00001	0.00003	0.00001
Trans-PINOCARVEOL	0.00019	0.00035	0.00003	0.00026	0.00001
1,8-CINEOLE	0.00006	0.00000	0.00002	0.00001	0.00002
1,8-CINEOLE, 2,3-DEHYDRO	0.00012	0.00015	0.00002	0.00003	0.00000



## Fun with the Conifers

I love the aroma of the trees in my home. I find them very helpful in keeping the winter “bugs” at bay by adding any of them to the pot of water I keep on my wood stove. The conifer hydrosols contain monoterpenols and ketones, which are effective anti-microbials. This makes them a good choice for the base of natural home cleaning products. They are also valuable in the “sick room” as a refreshing yet effective disinfectant spray. I use the hydrosols neat in an atomizer for this application.

The conifer hydrosols are a great go-to hydrosol for autumn and winter. I love using hydrosols freshly distilled, so for me, Pines are synonymous with autumn. They add an earthy, woody and radiant aroma to the home. And Douglas fir is lovely with its bright, citrus notes.

### About Ann Harman:

Ann Harman is an organic farmer who has been distilling plants for nearly two decades. Each year she teaches the Art of Distillation workshops, in addition to lecturing on hydrosols both nationally and internationally. Through her organization, *Circle H Institute*, she conducts research on hydrosols which she hopes will one day lead us to a better understanding of these complex waters. Ann is the author of the book *Harvest to Hydrosol*, available from the NAHA bookstore.

To learn more about Ann, please visit her website: [www.botannicals.com](http://www.botannicals.com)



Douglas Fir (*Pseudotsuga menziesii*) © Ann Harman

### Countertop Spray Recipe

#### Ingredients:

- Quart-size Spray Bottle
  - 1 part Ponderosa Pine (*Pinus ponderosa*) hydrosol
  - 2 parts Douglas Fir (*Pseudotsuga menziesii*) hydrosol
  - 2 drops Lemon Thyme (*Thymus x citriodorus*) essential oil
  - 1 tsp. Vodka (emulsifier)
- 

**Instructions for Use:** Mix the ingredients together in the quart spray bottle. Shake well before each use. I use this mixture to clean my kitchen and bathroom counters.

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# Natural Therapies and Aromatic Support for Uterine Fibroid Issues:

## *The ebb and flow of my healing journey*

by Kelly Holland Azzaro, RA, CCAP, CBFP, LMT

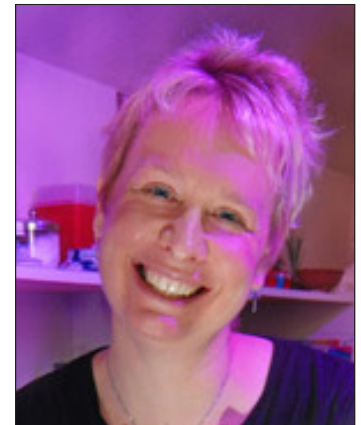
Some of you may be aware of my story. For those who are not, I'd thought it may be beneficial to share my story with others in the hope that it will empower anyone going through the same or similar experience. My wish would be that no woman would have to go through unnecessary health complications due to uterine fibroids, and so at the request of several of my fellow aromatherapist friends, I have decided to share my story with you all.

### Symptoms of Fibroids

Many women develop uterine fibroids (also called myomas) due to hormonal imbalances or changes in hormone levels (in particular estrogen); they can appear during the childbearing years, or as early as late teens to early twenties, or between the ages of 30-40+, or when peri-menopause symptoms manifest. These same fibroids will often shrink and disappear after menopause. Fibroids are noncancerous growths (also known as benign tumors) of the uterus; they are made up of abnormal uterine muscle cells that grow in tight bundled masses. Some women may never notice any symptoms from fibroids, but for those that do, here is a list of which fibroid symptoms and health issues can arise:

- Heavy bleeding and clots during menstrual period.
- Prolonged menstrual periods.

- Anemia due to excessive bleeding.
- Bloating, swelling, and tenderness of the abdominal and pelvic region.
- Lower abdominal swelling causing the appearance of being several months pregnant.
- Pain and tenderness of the low back region.
- Pressure and bearing-down type sensation in the pelvic or rectal areas.
- Constipation, diarrhea and irritable bowel.
- Frequent urination.
- Painful intercourse.
- Possible interference with fertility and the ability to conceive.



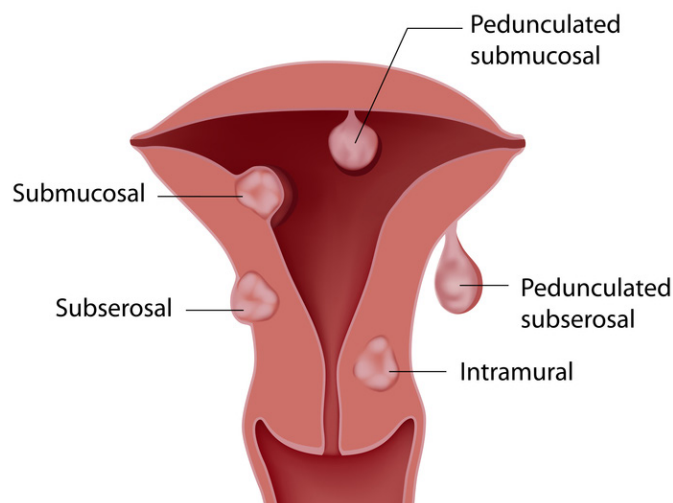
Fibroids can be found during a medical pelvic examination and confirmed by having an ultrasound. A pelvic ultrasound will also determine which type of fibroids you have so that you can discuss a course of action with your gynecologist and health practitioner.

### My Fibroid Journey of Discovery

I have had a history of heavy periods since I was a teenager, and just assumed that it was



## Uterine fibroids



normal. Then over the last four or so years, my periods became even more intense in the amount of blood flow, even developing clots. Again, I just thought this was normal for “me.” But during this time frame, and as time went on, I began to experience additional symptoms that were not normal for my body, and as I suffered through it, I thought to myself, “Well, I guess this something I must adapt to and it will get better in time, or go away.” However, that was not the case; the heavy periods continued to the point of hemorrhaging, with additional symptoms of dizziness, fatigue, headaches, lack of sleep, ringing in the ears, facial numbness and tingling, difficulty speaking and typing words, brain fog, chest pain, palpitations, anxiety and panic attacks, and I found myself struggling to stay awake past 7:00pm. I felt drained, as if the life blood source was being sucked out of me literally!

I ended up going to a woman’s health clinic that is run mostly by women health practitioners where I was seen by a midwife and a nurse practitioner who both work with bio-identical hormone therapy. After having

a saliva test done to check my hormone levels I was prescribed a topical compounded progesterone cream to aid in the heavy bleeding and to get my menstrual cycle to balance out to every thirty days versus every twenty-one days. At first I did feel a bit better, the headaches began to decrease, and I was able to get a little more sleep—but I still did not feel 100%. After about a year using the progesterone cream, I had a follow up visit with another pelvic exam, where they found that I had uterine fibroids. I was sent to have an ultrasound to confirm the fibroid diagnosis and to rule out any type of pathology. I was told that the fibroids were the cause behind the excessive bleeding and additional periods during the same month, and that progesterone cream should help in dissolving them, or I could have a hysterectomy instead. I was against the latter option, as I did not want to remove a part of my body in order to deal with the fibroids and bleeding. So I opted to continue with the topical progesterone cream and I was then referred to a medical doctor, who was holistically-minded, for a checkup and to discuss the ‘other symptoms’ that, even though I knew were all connected to the same cause, I was told that they weren’t -- they were a separate issue, as if I was a car in need of a tune-up or new part.

This holistically-minded medical doctor proceeded to carry out blood tests and he said that I needed to take an iron supplement, which I began to take immediately; unfortunately, I still felt very fatigued. Each time that I went to see him for a follow up visit I’d state that I was still feeling tired and having a lot of anxiety, along with just not being my old happy and healthy self. He’d mentioned drinking more water (which is all

that I drink anyway), and taking some additional supplements (which I had been taking already), but gave me no real answer as to why all the above symptoms continued. He too said to continue using the progesterone cream. I was also, and continue to do so, receiving acupuncture treatments from my acupuncturist husband, along with taking different herbal supplements and teas, using my essential oils, and doing meditation. Yet, I just felt like something had changed in my system and it didn't seem like there was a clear answer as to why.

I continued to use the progesterone cream and go to the doctor for follow-up visits (again with the same complaints), but after almost two years without much improvement, I decided there had to be someone who knew why I felt the way I did. The women's clinic referred me to a community care clinic run mostly by volunteer physician assistants and nurse practitioners along with medical doctors who also offered their services free of charge. The day of my appointment (which was to be for a gynecological exam), the doctor (a female specializing in women's gynecology), sat down next to me and asked me how I was feeling. I shared with her my journey up until that point and added that the newest symptom that had just happened a few days prior was that when I walked up a short flight of stairs I had labored breathing and dizziness. I also tried to take a walk the next day, but after only about 100 feet into the walk, I experienced



numbness and tingling in my left arm, face and jaw area and became nauseated and almost passed out. After hearing this she immediately had me placed in another exam room to have heart tests done. The main doctor (another female physician with a caring and listening ear) came into the room and ordered blood tests, and an in-office check of my iron and red blood cell levels. Voilà! There was the answer! I had basically no iron in my blood and I was severely anemic with extremely low red blood cells. She told me that I was experiencing hypoxia (a lack of sufficient oxygen in the blood and a lack of oxygenated blood to major organs, such as the heart and brain), and I was in need of an emergency blood transfusion. This scared me! My head was spinning. They also looked over my past blood tests from the prior doctor and said that it was right there all the time, and that they had no idea how I



had managed to go this long without having a heart attack or worse. The hypoxia was causing a lot of my symptoms and of course the lack of blood in general left me feeling drained and fatigued.

After receiving the emergency blood transfusion, my skin tone and gums went from pale white to a normal rosy color, I was able to stand up without getting dizzy, and my body was feeling warm and healthy. During the transfusion I had four heated blankets on me as I was so cold and I was trembling with anxiety at the procedure. Off came the blankets, and on came the smile. For the first time in a long time, I felt almost normal! On the drive home, I had a serene calm feeling, no anxiety whatsoever. That night I slept better and woke up feeling grounded instead of dizzy. About a week afterwards there were no more headaches or dizziness, my energy improved and I no longer had trouble forming words or being focused. One big benefit was that I did not suffer from the chronic anxiousness or panic attacks any longer either. I began to feel like my old self again. I was required to have monthly follow up visits to recheck my red blood cell count, and to monitor my heart. After one year of good results, I only need to have a follow up exam every six months, which will eventually turn into once a year, or as needed.

Though I still have fibroids, they continue to shrink and my periods do not flow as heavy. There are times where I will feel some anxiousness creep up but it never develops into panic attacks, and most of the other symptoms have subsided or are gone. I am currently still using several different herbal formulas, essential oils, carrier oils, supplements,



dietary changes, taking moderate exercise and practicing meditation, along with the following natural therapies of: acupuncture and cupping treatments, massage and aromatherapy, and castor oil packs; these therapies all help to dissolve the fibroids and are supportive tools to aid myself in this self-healing journey.

Where I choose to take a more holistic and natural approach to dealing with the fibroids and managing the accompanying symptoms, I can share that although it has been difficult at times, it has also been empowering to allow my body the time that it needs to overcome and heal itself without surgery. The medical intervention of having an emergency blood transfusion was not a “yes” or “no” answer, it was definite to sustain life. I do advocate that anyone going through any type of serious bleeding or health issue do so with the support of qualified medical doctors that really take the time to listen and care about you as an individual, as well as respect your belief to

incorporate holistic and natural therapies, and be part of your healing journey. I am grateful to the practitioners who listened and who took an active part in responding positively to my health needs while respecting my beliefs. And something that is amazing to me, is that the expensive doctor, who missed interpreting my lab results correctly and who kept asking me to return for follow ups without much improvement, drained my energy and my pocket, yet the clinic, which had volunteer practitioners, found the correct answer immediately and took care of the seriousness of the problem; to these volunteer practitioners, I am forever grateful. I also wish to express that I had the awareness to not use social media to seek out medical advice. I have observed several women going through a similar experience, who have not had an exam to rule out other serious health issues that mimic fibroid bleeding, such as cervical cancer, and who are asking strangers on social media for answers to serious health concerns. Be proactive, don't wait, get checked and go from there with a plan of action with your health practitioner/s that meets your individual needs, and honors your beliefs and choice to include holistic alternative and complementary options.

### **Aromatherapy Blends, Flower Essences, and Use of Traditional Chinese Medicine for Fibroids**

Below, I am sharing the aromatherapy blends and flower essences that I am using and find effective, as well as a list of the different supportive herbs and supplements that I take. I have also included acupuncture points that you can apply the essential oil blends to, along with the meridian channel/s to massage.

#### Woman's Balance Blend

##### **Ingredients:**

2 oz. Mist Spray Bottle  
2 oz. Jojoba (*Simmondsia chinensis*)

##### **Essential Oils:**

18 drops Clary Sage (*Salvia sclarea*)  
20 drops Geranium (*Pelargonium graveolens*)  
10 drops Cypress (*Cupressus sempervirens*)  
12 drops Grapefruit (*Citrus x paradisi*)  
8 drops Vetiver (*Vetiveria zizanioides*)

-----

**Application:** Mix all ingredients and essential oils together in spray bottle. Shake well before each use. Apply a small amount of the blend topically to the upper chest, neck, abdomen, low back region and inner thigh area. If irritation occurs, discontinue use.

I use this blend almost on a daily basis, taking a week off each month. I apply it topically to my abdomen and low back, and to my upper chest, neck and outer ear points.

The blend is useful for: menstrual cramps, bloating, breast tenderness, irritability, hot flashes and night sweats, and overall hormonal support during menstruation, peri-menopause and menopause.

Note: In TCM (Traditional Chinese Medicine) theory, fibroids are considered to be a blockage caused by Qi and blood stagnation, often due to the liver energetics of congestion and detoxification, especially when the liver organ is working overtime to deal with hormonal changes and imbalances. Acupuncture and herbal medicine can be successful in treating fibroids and other hormonal imbalances. Find a licensed and board certified acupuncture physician who specializes in female health issues; along with acupuncture treatments, schedule a lifestyle consultation to find out



Calming Stress Blend

**Ingredients:**

- 2 oz. Mist Spray Bottle
- 2 oz. Jojoba (*Simmondsia chinensis*)
- ½ oz. Tamanu Oil (*Calophyllum inophyllum*)
- ½ oz. Rosehip Seed Oil (*Rosa rubiginosa*)
- ½ oz. Calendula Infused Oil  
(*Calendula officinalis*)

**Essential Oils:**

- 6 drops Lavender (*Lavandula angustifolia*)
- 8 drops Neroli  
(*Citrus x aurantium* var. *amara* (flos))
- 8 drops Petitgrain  
(*Citrus x aurantium* var. *amara* (fol))
- 6 drops Patchouli (*Pogostemon cablin*)

-----

**Application:** Mix all ingredients and essential oils together in spray bottle. Shake well before each use. Apply a small amount of the blend topically to the upper chest, neck and mid back region, and outer ear auricular points (in particular the ear point called: Shen Men). If irritation occurs, discontinue use.

I use this blend to help to dissipate any anxious sensations and to promote a calm and grounded feeling.

more about dietary changes and herbal formulas specific to your individual needs.

In conjunct with the following aromatherapy blends listed for topical application, you may also want to apply both the Woman's Balance and the Fibro Stagnation blends to these auricular (ear) acu-points: Endocrine Hormonal Balance, Uterus, Ovary, Kidney, Liver, and Point Zero (See *NAHA Journal 2011.3* for Auricular Aromatherapy article).

Body acu-points: CV-2 (indicated for fibroids)

Fibroid Stagnation Blend

**Ingredients:**

- 2 oz. Mist Spray Bottle
- ½ oz. Evening Primrose Oil (*Oenothera biennis*)
- ½ oz. Tamanu Oil (*Calophyllum inophyllum*)
- ½ oz. Rosehip Seed Oil (*Rosa rubiginosa*)
- ½ oz. Calendula Infused Oil  
(*Calendula officinalis*)

**Essential Oils:**

- 12 drops Frankincense (*Boswellia serrata*)
- 16 drops Ginger (*Zingiber officinale*)
- 10 drops Bergamot (*Citrus bergamia*)
- 10 drops Copaiba (*Copaifera langsdorfii* Desf.)

-----

**Application:** Mix all ingredients and essential oils together in spray bottle. Shake well before each use. Apply a small amount of the blend topically to the abdomen and low back area. If irritation occurs, discontinue use.

I use this blend to help to dissolve fibroids, decrease inflammation, for abdominal and pelvic tenderness, and as an aid in liver and lymphatic support (both of which are important in ridding the body of blockages and stagnation). I apply the blend topically to my abdomen and to my low back area once a day.

I also apply the same blend with the addition of a light layer of castor oil (*Ricinus communis*) topped off with a thin cotton towel and heating pad for additional therapy at least three times per week, and on days that I am not bleeding. (See next page for information on castor oil packs).

and LIV-8 (regulates menstruation, moves blood stasis).

Massage the blend along the Kidney, Liver and Conception Vessel Meridian Channels.

I also like to diffuse different combinations of essential oils during the day based on

### Energy Boost Blend

**Ingredients:**

2 oz. Mist Spray Bottle

2 oz. Jojoba (*Simmondsia chinensis*)

**Essential Oils:**

10 drops Spearmint (*Mentha spicata*)

10 drops Lemon\* (*Citrus x limon*)

8 drops Tangerine (*Citrus reticulata* var. Blanco)

-----

**Application:** Mix all ingredients and essential oils together in spray bottle. Shake well before each use. Apply a small amount of the blend topically to the upper chest, neck and outer ear points. If irritation occurs, discontinue use. Avoid direct exposure to sunlight or a tanning bed for up to twelve hours after topical application.

I use this blend anytime I feel the need to uplift my energy levels (physically and mentally) and to help me get through a long day of work.

\*Non photo-toxic distilled lemon essential oil can be used instead of cold-pressed lemon essential oil.

my individual needs. If I'm feeling fatigued, I'll use a few drops of spearmint (*Mentha spicata*) and lemon (*Citrus limon*) essential oils in the diffuser, or if I feel overwhelmed or anxious, I'll add a few drops of petitgrain or lemon essential oils, combined with a couple of drops of lavender (*Lavandula angustifolia*) essential oil. These combinations of essential oils usually "do the job." If I am out and about, I take with me a tissue with a drop of neroli or melissa (*Melissa officinalis*) essential oil on it, to inhale as needed.

The use of castor oil (*Ricinus communis*) also known as *Palma Christi* (the palm of Christ) for certain health issues has been used throughout history, even in ancient Egyptian

times, and it's been used for fibroids and many other health issues; these health issues include cysts and digestive complaints. It has been written about in many different modern natural health publications, and it was also made known by the A.R.E. (Association for Research & Enlightenment) in hundreds of individual readings done by Edgar Cayce, a medical clairvoyant known as 'The Sleeping Prophet.'

I combined the use of essential oils with castor oil packs three times per week (on days without menstrual bleeding) to help reduce abdominal tenderness, bloating, inflammation and pain. I applied the Fibroid Stagnation Blend to my abdominal and pelvic region, followed by an application of a thin layer of castor oil, covered with a thin cotton towel/sheet or old flannel shirt, topped with a hot pack. While lying down on my massage table I listen to meditative music and inhale a favorite essential oil (bergamot, neroli and tangerine are my favorite essential oils). I allow my body to relax and my thoughts to float away for about thirty minutes before removing the castor oil pack. Be sure to use a quality castor oil specific for topical application (see list of resources).

I also incorporate the use of massage cupping over my abdominal and low back areas on a weekly basis. After cupping therapy, I apply the Hormonal Balance Blend to my abdomen, low back, thighs and upper neck areas. Traditional cupping is part of Chinese Medicine and it is often used as a stationary type treatment by applying glass cups (known as fire cupping -- which creates a low pressure of suction) to specific acupuncture points and body areas during an acupuncture session;



whereas massage cupping uses both glass and rubber cups along with massage techniques to move the cups to different areas of the body to aid in the release of pain, blockages and adhesions. The cups create a low negative pressure sensation which helps to soften tight muscles and increase blood and lymph flow.

I found information written by other holistic practitioners on what the emotional-energetic side of fibroids may represent for some individuals; here's a summary of what they share [1, 2]:

- Blockages with birthing new or creative ideas and bringing those to fruition.
- Physical manifestation of past traumas, negative and toxic thoughts.
- Difficulty expressing emotions of anger, fear and trauma
- Taking on someone else's 'stuff' (emotions, burdens etc.).

**Flower essences** are natural homeopathic-like remedies used to aid in the balance of emotions. I used individual flower essences on their own and combined with my self-care aromatherapy blends. I found the following list of flower essences helpful, along with journaling:

- Aspen (*Populus tremula*): unknown fear, anxiousness.
- Crab Apple (*Malus pumila*): emotional detoxification, body changes and challenges.
- Oak (*Quercus robur*): exhausted but struggles on.
- Olive (*Olea europaea*): total exhaustion and feeling drained (body-mind-spirit).
- Walnut (*Juglans regia*): protection from outside influences, adapt and flow with change.



**Herbs** that I have found helpful (the below list of herbs are in liquid tincture form unless otherwise indicated):

- Anxiety/improve quality of sleep: Lemon Balm (*Melissa officinalis*), Passionflower Vine (*Passiflora incarnata*).
- Heavy bleeding/clotting: Chaste Tree Berry (*Vitex angus-castus*), Sheppard's Purse (*Capsella bursa-pastoris*), and the Chinese herb formula Yunnan Baiyao\* in capsule form (this is used for excessive menstrual bleeding and to promote circulation).
- Hormonal support: Chaste Tree Berry (*Vitex angus-castus*), Motherwort Tops (*Leonurus cardiaca*).
- Cardiac tonic/support: Hawthorn Berry/Flower/Leaf (*Crataegus monogyna*), Hibiscus phyto-capsules (*Hibiscus sabdariffa*).
- Adrenal support, chronic fatigue/stress: Eleuthero Root (*Eleutherococcus senticosus*), Holy Basil Leaf (*Ocimum sanctum*).

\*Use this herb formula under the guidance of the acupuncturist/herbalist.

In addition to the use of the above herbal tinctures, I also take a couple of different Chinese herbal formulas based on my individual needs. Check with your acupuncturist for the herbal formula/s that are specific to your needs.

**Supplements** that I take are:

- Vegetarian Woman's Formula Multiple Vitamin: one per day with dinner.
- B-complex (500 mg tablet): one per day with dinner.
- Vitamin C (non-ascorbic form 500mg capsules): four per a day for a total of 2,000mg.
- Vitamin E: 400mg capsules, two per day with a meal, for a total of 800mg.
- Magnesium (500 mg capsule): One per day with dinner (to aid in muscular pain and sleep).
- Essential Fatty Acids Omegas (500 mg capsules): Two capsules total with dinner.
- Evening Primrose (500 mg capsules): One capsule twice a day with meal for a total of 1,000mg.
- Ground Flax Seed: One Tablespoon sprinkled on oatmeal breakfast, and again in mid-day shake.
- Distilled Aloe Vera (George's Brand): Two Tablespoons as needed to aid in digestion.



**Below are a few food recipes and healthy eating tips that I found helpful as well.**

I am primarily a vegetarian, but I find that I often eat more so like a vegan (no animal or animal by-products i.e. dairy, eggs or honey); however, on occasion I will eat a piece of fish if I feel deficient. Be sure to drink plenty of fresh filtered water and to get an adequate amount of fiber from vegetables (especially Brussel sprouts, kale, broccoli, and dark greens; which

aid the liver in detoxification) in your daily diet; both water and fiber aid the body in its elimination and detoxification process, which in turn helps your overall immune system, energy levels and quality of sleep.

I start my day with warm water combined with a squeeze of juice from a wedge of fresh lemon. I follow this drink by drinking fresh filtered water throughout the day, alternating with cups of tea. I like to drink 1-2 cups of Earl Grey tea for a perk up, and then switch over to herbal teas of red raspberry (*Rubus idaeus*) and hibiscus (*Hibiscus sabdariffa*). Red raspberry is known for its tonic effects for all types of female hormonal issues, and hibiscus is known for its benefit for the heart and healthy blood pressure, as well as helping to ease stress and anxiety.

**Breakfast:** Cooked oatmeal, topped with blueberries, 1 teaspoon of ground flax and ½ teaspoon of maple syrup.

**Snack:** A mid-morning or early afternoon snack of a health shake made from six ounces of organic almond milk, half of a banana, a handful of blueberries, 1 Tablespoon ground flax seed, 1 Tablespoon chia seed, 1 Tablespoon lecithin granules, 1 Tablespoon of organic cold-pressed food grade coconut oil (*Cocos nucifera*). Place in a blender and blend on high for a minute. Drink while fresh.

**Lunch:** Either a hummus and veggie pita wrap, or scrambled egg and sautéed yellow squash with side of toasted pita.

**Snack:** Organic walnuts or almonds, or a glass of almond milk, or slices of apple with almond butter.

**Dinner:** Large salad of organic mix of dark greens, chopped radish, shredded carrot, avocado all tossed with homemade salad dressing (olive oil, apple cider vinegar and pinch of sea salt). Stir fry of veggies (summer squashes, kale, mushrooms) with a bit of crumbled tempeh, topped with organic salad dressing (eat out of a bowl, or place in a pita wrap with additional dark greens).

We eat a large salad for dinner almost every day, and alternate our main meal with other healthy options of quinoa with sautéed seasonal veggies or beans and brown rice. There are endless creative combinations when cooking with vegetables, grains and non-animal based proteins (beans, lentils, tempeh are just a few).

**Snack:** glass of almond or rice milk.

**My Type of Exercise (easy, fun and non-stressful):**

- 15 minutes of light bouncing on a mini-trampoline (helps the lymphatic flow).
- 15 minutes of short aerobic warm-up with light weights.
- 15-20 minutes of walking at a regular pace with my beautiful dog Mia.
- 15-20 minutes of free-form dancing to your favorite music!

**References and Resources:**

(online article search August 2015)

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2 Fibroids; Dr. Christiane Northrup, M.D. <http://www.drnorthrup.com/fibroids/>

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Association for Research & Enlightenment:

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Kelly Holland Azzaro is a Registered Aromatherapist, Certified Clinical Aromatherapy Practitioner, Animal Aromatherapy Practitioner, Certified Bach Flower Practitioner, Licensed Massage Therapist, Massage Cupping Specialist and Reiki Practitioner. Kelly has served as NAHA Vice President and President and is the current Public Relations and Aromatherapy Journal Manager and co-editor for the National Association for Holistic Aromatherapy (NAHA). Kelly has over twenty five years of professional experience in holistic aromatherapy, massage and energy therapies for both people and their pets. She offers National Certification Board for Therapeutic Massage and Bodywork (NCBTMB) Continuing Education Units (CEU) approved classes and offers a 300+hr **Animal Aromatherapy Practitioner Certification Course(sm)**. Kelly is the Founder and Director of The Holistic Animal Association-‘Supporting the Holistic Healing Arts for People and Their Animal Friends.’ Her articles have been published in Massage Magazine, Holistic Dog Magazine, Dogs Naturally Magazine, Vita Danzare Journal and NAHA’s Aromatherapy Journal, as well as numerous blogs.

Kelly, and her husband, Marco, who is a Licensed Acupuncturist and Qigong Practitioner, have a Holistic Healing Center in the Blue Ridge Mountains of North Carolina. To learn more, please visit our websites at: [www.ashitherapy.com](http://www.ashitherapy.com) and [www.holisticanimalassociation.com](http://www.holisticanimalassociation.com)



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# Autumn Recipes

Contributed by NAHA Directors

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## Vata Essential Oil Diffusion Blend

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by Susan Cannon, RA, RYT200  
(South Carolina)

### Essential Oils:

25 drops Cedarwood (*Cedrus atlantica*)  
25 drops Black Pepper (*Piper nigrum*)  
25 drops of Frankincense (*Boswellia serrata*)  
15 drops Black Spruce (*Picea mariana*)  
5 drops Ginger (*Zingiber officinale*)  
5 drops Oakmoss (*Evernia prunastri*)  
2 drops Rose Otto (*Rosa x damascena*)  
2 drops Birch Tar (*Betula alba*)

### Directions for Use:

Combine all of the essential oils in a 5ml dark-colored, glass bottle. Use 10-12 drops of the blend for diffusion. If you prefer to use the blend as a room spray, place the 5 ml Vata blend in a four oz. spray bottle; fill with distilled water and mix together. Shake well before each use.

*Susan's Tip:* Since Vata is increased during the autumn season, consider diffusing during your evening meditation practice to comfort, dispel cold conditions, and to ground.

*NAHA directors are both diverse and knowledgeable in their various areas of aromatherapy expertise! Here is a roundup of some of their favorite autumn recipes.*

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## Study Assist Blend

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by George Cox (Ohio)

### Ingredients:

1 oz. carrier cream or oil

### Essential Oils:

12 drops Cedar (*Cedrus atlantica*)  
8 drops Rosemary (*Rosmarinus officinalis*)  
2 drops Peppermint (*Mentha x piperita*)  
8 drops Sweet Basil (*Ocimum basilicum*)  
4 drops Lemon (*Citrus limonum*)

### Directions for Use:

Blend the essential oils and the carrier oil together in a one ounce bottle.

*George's Tip:* Massage a small amount of the blend into the temples and onto the wrist pulse points when studying or before taking a test. The essential oils should help with focus, concentration, and recall of information.



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Invigoration:

A revitalizing synergy blend for inhalation

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by Valerie Cooksley, RN, OCN, FAAIM, CERT  
(Texas)

(Taken from Valerie's newest book *AROMATHERAPY: A Holistic Guide to Natural Healing with Essential Oils*, Valerie Cooksley, Floramed Publishing, 2015)

**Essential Oils:**

- 2 drops Eucalyptus  
(*Eucalyptus citriodora*, *E. radiata* or *E. smithii*)
- 2 drops Juniper Berry (*Juniperus communis*)
- 2 drops Grapefruit (*Citrus x paradisi*)
- 1 drop Clary Sage (*Salvia sclarea*)
- 1 drop Ginger (*Zingiber officinale*)

*Directions for Use:*

Combine the essential oils in a small, amber glass bottle and label. Alternatively, you can use parts (for example teaspoon) instead of drop, if you wish to mix a larger amount for diffuser use.

Use in a variety of ways for inhalation, such as electric diffuser, water humidifier, aroma lamp, personal inhaler or cotton ball/tissue. This blend is an inhalation synergy for mental alertness that can be used anytime you need to stay awake, alert, and mentally stimulated. It is very useful for people who must read, study, or work numeral figures all day, to aid in preventing mental exhaustion. It is also very well suited for inhalation during exercise workouts, as it is a stimulating and refreshing blend. This may help you to stay motivated while performing indoor stationary exercise such as rowing, cycling, and stair-stepping.

*Valerie's Tip:*

Put on a nature video and diffuse this blend for the next best thing to being outdoors in the fresh air. It is a blend of fruit, spice, and tree essential oils. Very revitalizing indeed!

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Autumn Earth Spray:  
A Deep, Grounding Scent

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by Diane Braybrook, RA (Maine)

Ingredients:

- 1 Tablespoon of vodka
- 4 oz. spray bottle
- Distilled water (approximately 4 ounces)

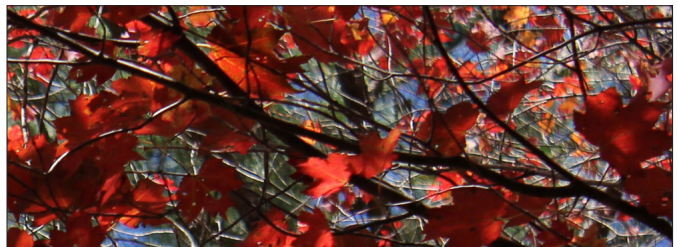
**Essential Oils:**

- 25 drops Sweet Orange (*Citrus sinensis*)
- 10 drops Atlas Cedarwood (*Cedrus atlantica*)
- 10 drops Patchouli (*Pogostemon cablin*)
- 5 drops Benzoin (*Styrax benzoin*)

*Directions for Use:*

- Combine essential oils and the vodka in a 4 oz. spray bottle.
- Attach the spray cap.
- Gently shake together the essential oils and the vodka.
- Let the mixture sit in the closed bottle for about fifteen minutes.
- Shake the bottle again.
- Open the bottle and fill with distilled water, before replacing the cap again.
- Shake and tap the bottom of the bottle each time before use.

*Diane's Tip:* Benzoin is a very thick resin. For best results heat the essential oil bottle in a dish of hot water before counting out the drops. This blend can be sprayed on and around your body, in the air, and even on a dust cloth. A wonderful meditation scent.





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[ArlysNaturals.com](http://ArlysNaturals.com)

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advertising purchase by mentioning NAHA. Email for details.

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**[ashitherapy.com](http://ashitherapy.com)**

### **East-West School for Herbal & Aromatic Studies**

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**[theida.com](http://theida.com)**

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**[aroma-rn.com](http://aroma-rn.com)**

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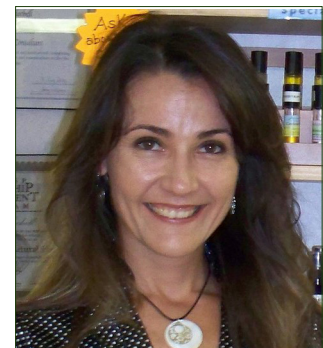
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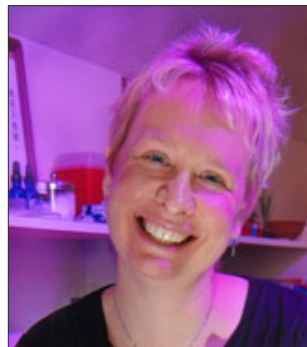
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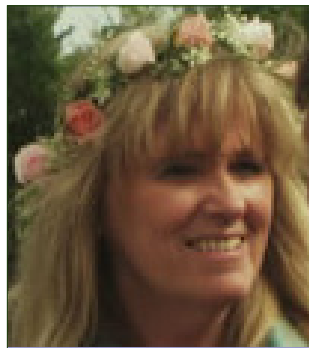
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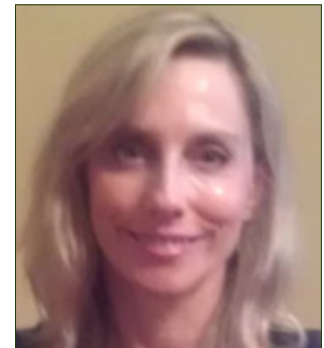
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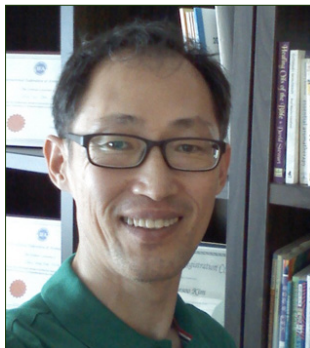
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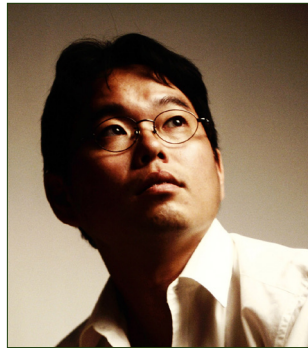
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