

Perceived relaxation as a function of restorative yoga combined with Reiki for cancer survivors



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ABSTRACT

Aims & objectives: Twenty-six cancer survivor volunteers participated in a study of the efficacy of perceived relaxation after performing restorative yoga combined with Reiki.

Results: Subjects scoring high ratings of Meaning and Peace in life demonstrated greater perception of depth of relaxation. A comparison of subjects receiving concurrent Reiki (19) and restorative yoga with those who only received restorative yoga (7) showed that Reiki subjects experienced greater perceived depth of relaxation than subjects who were not afforded the Reiki intervention. Non-Reiki participants also showed more difficulty overcoming intrusive fearful thoughts than the Reiki group.

Conclusions: Clinical implications suggest that patients should be screened and treated for trauma-like symptoms including intrusive thoughts linked to anxiety and depression before referral to complementary programs that offer meditative or relaxation interventions.

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1. Introduction

In recent decades, yoga has been subjected to close scrutiny as to efficacy in enhancing health and wellness from a modern Western medical viewpoint. To date, most of the controlled experimental studies have shown a positive trend in improving conditions often associated with symptoms not uncommon in cancer patients. Some of these effects include improvement in quality of life [5], reducing fatigue [3], increasing bone density [9], lowering infection outbreaks [10], improving quality of sleep [15], and ameliorating mental health problems such as anxiety and depression [20].

Reiki has recently been included among the complementary therapeutic programs derived from eastern health and healing traditions for coping with cancer [18]. While Reiki is traced to origins in Japan, the philosophical and basic theoretical interpretation of both techniques is steeped in ancient, pre-scientific ideas or beliefs about the “flow of a psychic form of energy.” Although there is no universal professional license for a Reiki instructor, there is required training and three levels of competence with “Reiki Master” being the final credential. Reiki as an alternative healing method has recently become popular in many hospital settings (www.reikiinhospitals.org).

Reiki, which does not involve an exercise component, has been

subject to much less scientific study than yoga, and fewer controlled studies [1,11,13]. Built upon the belief that people transmit and receive psychic energy, a Reiki instructor simply places his/her hands near, or gently on the patient for several minutes. Usually the head, feet and hands of the patient are touched. The only measurable physical interaction may be the sensory perception of the heat of the hands. At least one controlled study of the physiologic effects of Reiki showed significant improvement in hemoglobin and hematocrit levels [23]. Reiki has also proven effective in a study of 118 cancer patients for relief of pain, sleep problems and anxiety [2,22]. Currently, the few rigorous scientific studies available as well as general medical opinion concerning Reiki has concluded that Reiki possesses very low risk in relation to iatrogenic problems [8].

Observation of the application of the Reiki technique suggests that any benefit derived from the technique might be interpreted as a psychological phenomenon, not a medical intervention. Much the same as hugging a friend in need, stroking a baby's tummy, or holding the hand of a loved one in dire distress, the Reiki technique offers a similar positive affectual response. For cancer patients in particular, the presence of an “expert” or supportive person enhancing a detached, peaceful moment of serenity is in contrast to frequent medical encounters associated with anxiety or iatrogenic effects of cancer treatments.

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2. Study goals

The study was designed to explore the subjective perception of satisfaction and enhancement of relaxation among cancer survivors when restorative yoga and Reiki techniques are combined in the same exercise session. The contribution of variables including mental health status and spirituality was included with the goal of identifying objective measures of beliefs associated with those patients who might best benefit from the wellness interventions.

3. Method

Fighting Chance, Inc. (FC), a not-for-profit, free of charge, community cancer support service established the Yoga for Cancer Patients Community Program in 2011. This initiative was an effort to reach out to cancer survivors and their caregivers by providing a health sustaining exercise program for patients with any form of cancer at any stage of the disease. Recent scientific attention to the use of yoga as a complementary treatment for cancer patients has been promising. Because of the physical nature of the exercises, a medical release to protect the participants was required in writing. Demographic information as well as attendance dates were collected and entered in the study database. All instructors received training in a restorative yoga program specifically designed for cancer survivors and based upon the approach adopted by Tari Prinster [17]. The yoga program was also developed in partnership with Shanti Yoga studio in Sag Harbor, NY. All classes were held weekly at Shanti Yoga studio. The program was voluntary and free of charge, consistent with the mission of FC.

3.1. Sample

Recruitment of patients were drawn from an established Yoga for Cancer program consisting of 44 registered participants. Seasonal attendance and open enrollment of the established wellness program resulted in a total of 28 cancer survivors who were offered voluntary participation in the study. Two choose not to disclose personal information requested by the anonymous questionnaires. The remaining 26 volunteers were each given the choice of combining yoga with Reiki or not combining the Reiki component. This resulted in two comparison groups: yoga with Reiki ($n = 19$) and yoga without Reiki ($n = 7$), (Fig. 1).

3.2. Classes and instructors

Classes lasted about 1 h & 15 min. And classes were conducted at a large yoga studio in a central location of a rural community. Groups consisted of from 4 to 12 students with one yoga instructor and 2–3 Reiki instructors. A total of three trained yoga instructors were employed over the course of the program.

3.3. Restorative yoga

Each class consisted of a series of yoga poses and exercises that included movement (range of motion), focused breathing and balancing, and weight bearing. Following 45 min of exercise yoga, the restorative component was added for another 20–30 min. The restorative, or relaxation component was performed by assuming two consecutive static yoga positions (“restorative shoulder-stand” and “restorative cobbler”) with the use of bolsters, blankets and belts. The poses were all performed while lying on the floor (mat) with an effort to keep the body symmetrically aligned and minimizing the force of gravity. All instructors observed the individual students and assisted with either postural adjustments and/or applied Reiki techniques. The yoga instructor maintained a quiet,

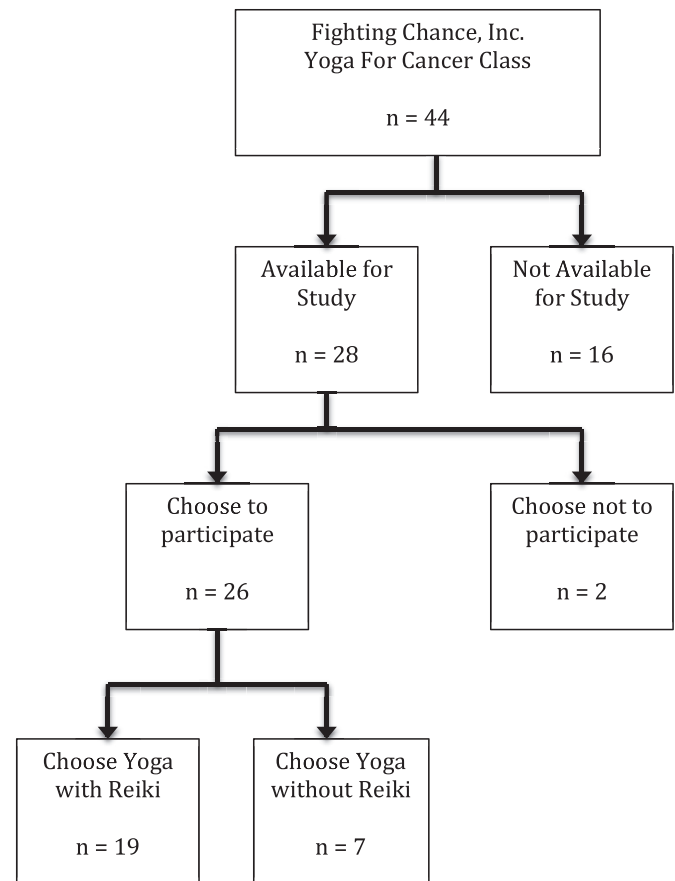


Fig. 1. Flow chart showing recruitment and number of subjects assigned to final two arms of the study (Yoga with Reiki, and Yoga without Reiki).

calm atmosphere and carefully controlled class decorum. In addition to the selection and pacing of the exercises, he offered occasional verbal directives in keeping with contemporary skill training in mindfulness and meditation. Concepts of “letting go”, “Staying in the here and now,” “self appreciation,” “gratefulness” and “non-judgmental attitude” were some of the cognitive mediators employed to enhance the relaxation experience. In addition, background Indian sitar music accompanied the relaxation period.

3.4. Reiki

The Reiki instructors all had received from one to three years formal training in the technique. The technique consisted of placing of the instructors' hands on or near the scalp, neck, feet and knees. Each student was approached by first asking if they wanted to receive the technique. If agreeable, the technique was applied in the absence of any conversation. The instructors used an antibacterial hand wash as they moved from one student to another. Each student received about 10–15 min of Reiki treatment.

3.5. Hypotheses

The null hypotheses was assumed that no differences would emerge when comparing the restorative yoga + Reiki group with the restorative yoga group. The study was also designed to explore relationships between measures of spirituality, meaning and purpose in life, mood states of anxiety and depression and the ability of the cancer survivor to experience greater depth of relaxation.

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