

Aromatherapy

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Chapter 1:

What is Aromatherapy?

Aromatherapy is the use of essential oils to affect a person's health or well-being.¹ The oils are derived from various plant, herb or tree parts (such as leaves, stems, flowers, bark, roots), distinguishing them from perfumes.² There are about 150 essential oils, used for varying purposes.³ According to the University of Minnesota, usually each oil has 100 to 200 constituent chemicals inside it.⁴

The essential oil can be administered

- through the air generally⁵
- by inhaling directly⁶
- by topical application (through bath, massage⁷ or cosmetics⁸)
- or through application to a body orifice (such as the mouth)⁹

The oil is taken out of the plant by distillation, expression or extraction.¹⁰

In distillation, steam vaporizes the lighter parts of the plant material (phytomolecules)¹¹, creating two byproducts—the essential oil and a hydrosol.¹² The hydrosol may be commercially useful itself. For example, distilling rose petals yields rose oil (an essential oil) and rose water (a hydrosol with cosmetic and culinary uses.)¹³

Expression is used to separate essential oils from citrus fruits.¹⁴ Here the peel is grated to obtain the essential oil.¹⁵ No heat is involved so essential oils derived from citrus fruits smell similar to the original fruits; sometimes in the first method (distillation), the heat causes the essential oil to smell differently from the original plant.¹⁶

A newer separation method is supercritical CO₂ extraction (SCE).¹⁷ Carbon dioxide is added and removed to derive an extract which is closer to the original plant material than that produced by the other methods.¹⁸ In other words, SCE preserves “a wider range of the chemical molecules” found in the original material.¹⁹ Therefore, an essential oil of the same original plants will be different if it is acquired by distillation than by SCE.²⁰ This difference may mean a distilled essential oil has therapeutic properties independent of those held by a SCE essential oil.²¹ The essential oil produced by SCE is often called a CO₂.²² As with expression (and unlike steam distillation), no heat is used in SCE, preventing any possible temperature damage to the essential oil.²³

Extraction can also be done with chemical solvents.²⁴ Although the solvent is removed, trace elements may remain, which may alter the therapeutic effect of the resulting oil, which is called an absolute.²⁵ Absolutes are held to be more concentrated than essential oils.²⁶

Chapter's Important Points:

- ❖ Essential oils are derived from plant, herb or tree parts.
- ❖ Essential oils are taken out by distillation, expression or extraction.

Chapter 2:

History

Various sources say aromatherapy

- Is 5,000 years old²⁷
- Or 7,000 years old²⁸
- Was practiced by the ancient Egyptians to embalm mummies²⁹
- Was practiced by the ancient Chinese³⁰
- Was practiced by the Babylonians³¹
- Was used in ancient India³²
- Was practiced by the ancient Greeks³³
- Was practiced by the ancient Romans³⁴
- Was practiced by the ancient Native Americans³⁵
- Saved people from the plague³⁶

There is a problem with this scenario. Examples given—Egyptians using infused oils³⁷ (steeping herbs in oil),³⁸ Cleopatra taking a bath with floating rose petals,³⁹ lavender pickers being exempt from the plague⁴⁰--show people working with herbs. This is different than aromatherapy, which first involves *essential oils* being taken out of plant materials and then used.

A more realistic timeline may start in the 600s of the Common Era, about 1,400 years ago.⁴¹ Essential oils were then allegedly distilled in Azerbaijan⁴², next to the Caspian Sea and formerly part of the Soviet Union.⁴³ The Persian invention of the coiled cooling pipe

(formerly a straight pipe was used) 500 years later greatly improved the effectiveness of distillation.⁴⁴ It is said essential oils became available to consumers in the apothecaries of the 1500s.⁴⁵

The modern beginning of aromatherapy is usually said to be an accident in a French perfume laboratory during the 1920s. Chemist René Maurice Gattefossé inadvertently set his arm on fire. After he thrust the arm into the nearest cold liquid, which happened to be lavender oil, he noticed the healing was rapid with relatively little pain and no scarring.⁴⁶ He was the first to use the word "aromatherapy."⁴⁷ The word began in a 1928 article he wrote promoting using essential oils in their whole state without breaking them down into constituent parts.⁴⁸ Nine years later, in 1937, he wrote what is advertised as the first book on aromatherapy.⁴⁹

During World War II Dr. Jean Valnet, a French army surgeon, used essential oils to treat soldiers who had gangrene.⁵⁰

Marguerite Maury, variously described as a cosmetics chemist,⁵¹ esthetician,⁵² or cosmetologist,⁵³ is credited with being the first to use essential oils in massage.⁵⁴ This occurred in the 1950s.⁵⁵

The first book in English about aromatherapy was by Robert B. Tisserand and was published in 1977.⁵⁶

Aromatherapy did not reach the United States until the 1980s.⁵⁷

This is the standard mythology of modern aromatherapy but it is unclear who put the *aroma* into aromatherapy—who first sought to heal through the odor of essential oils as opposed to the contact of the essential oils' properties with the skin. It is apparent that Gattefossé did not think the smell of the lavender oil healed his arm. Did he later make the jump from the physical healing properties of lavender oil to the aromatic benefits of that oil?

While who in the modern era first used the odor of aromatherapy to heal is perhaps as hazy as the rising scent, this points out that the word is a bit of a misnomer. The technique of aromatherapy does not always depend on smell.⁵⁸ It has been suggested that a more accurate name for the practice would be "essential oil therapy."⁵⁹

On the other hand, it is argued that essential oils really aren't "oils" at all.⁶⁰ This would make essential oil therapy as misleading a name as aromatherapy. Whatever the name's shortcomings, the word *aromatherapy* is long-lived, now celebrating its 80th birthday.

Chapter's Important Points:

- ❖ Modern aromatherapy began in France in the 1920s.
- ❖ Aromatherapy can be administered through techniques other than smell.

Chapter 3:

Why Aromatherapy Works

In order to discuss why or how aromatherapy works, we must first ask, does it work? The standard statement, as repeated on webMD.com, says there “is little scientific evidence to support claims that aromatherapy effectively prevents or cures illness.”⁶¹ But aromatherapy may promote relaxation, relieve stress, and treat mental conditions (like depression and insomnia) and physical ones (such as burns, infections, high blood pressure).⁶²

- Mice fed large amounts of caffeine were calmed by smelling lavender and sandalwood.⁶³
- Elderly British patients fell asleep more easily and stayed asleep after smelling lavender.⁶⁴
- A New York hospital did a study which found patients undergoing MRI felt 63% less claustrophobic after smelling vanilla.⁶⁵
- In a double blind study, women after pregnancy had less discomfort than the control group when lavender was applied topically.⁶⁶
- ICU patients reported feeling better after receiving a topical lavender oil application than when they were given a massage or allowed simply to rest.⁶⁷

- Mistakes made by Japanese keyboard operators were cut in half when the fragrance of lemon was pumped into their area.⁶⁸
- Sixteen new mothers received aromatherapy massage two days after giving birth. Their post-partum depression was significantly less than the control group who received normal post-partum care.⁶⁹
- A Japanese study suggested that “aromatherapy massage could be beneficial in disease states that require augmentation of CD8⁺ lymphocytes.”⁷⁰ CD8⁺ lymphocytes “block HIV replication”⁷¹ so aromatherapy massage may have a real benefit for AIDS patients.

Aromatherapy supporters say the lack of more scientific studies is because pharmaceutical companies pay for such studies—since these companies cannot patent essential oils, there is no incentive for them to fund aromatherapy research.⁷²

France treats aromatherapy more seriously, restricting the use of some essential oils to doctors⁷³ and covering the cost of aromatherapy treatment through insurance.⁷⁴ Apparently the French regard at least some aromatherapy applications as effective. In many countries (but not the United States, Russia, Germany or

Japan), essential oils are included in the national pharmacopoeia,⁷⁵ a book listing medicines and compounds which is issued under government authority.⁷⁶

Essentials oils are claimed to be 75-100 times more powerful than dried herbs.⁷⁷

The fragrances stimulate nerves in the nose, sending impulses to the brain.⁷⁸ The roof of the nose collects 15% of the air we breathe.⁷⁹ Olfactory receptors then pass the odors to the limbic region of the brain, an area “connected with instinct, mood and emotion.”⁸⁰ Through this mechanism, aromatherapy is alleged to stimulate the release of chemicals in the brain which affect emotions.⁸¹ One article reports, unfortunately without citing details, that an EEG has traced a brain response four seconds after an essential oil was inhaled.⁸²

Richard Axel and Linda B. Buck published a paper in 1991 clarifying how we smell.⁸³ They were awarded the Nobel Prize for Medicine in 2004 for this work.⁸⁴ Olfactory receptor cells (OCR) are each keyed for only a few odors.⁸⁵ There are about 1,000 different types of OCRs.⁸⁶ The cells transmit nerves processes to glomeruli in the olfactory bulb; there are about 2,000 glomeruli.⁸⁷ OCRs for the same odor share the same glomerulus.⁸⁸ The olfactory bulb is the primary olfactory area of the brain.⁸⁹ From the bulb, information goes to other parts of the brain via mitral cells, where input from several OCRs is used to form a pattern.⁹⁰ This pattern equals an odor.⁹¹

While smell is important to humans, particularly for survival (suggesting one may not want to eat rotten fish), it is even more important in other species.⁹² Dogs, for example, have an olfactory epithelium forty times larger than that in humans.⁹³

Humans can recognize and remember about 10,000 different smells.⁹⁴ How these smells are gathered and interpreted is now understood. Whether the odors of essential oils have a cause and effect relationship (smell lavender, become calm) when they use this framework is less certain.

Applied externally, an essential oil's effect is said to be partially through the odor and partially through rapid absorption through the skin.⁹⁵ Purportedly, essential oils will “show up in the urinary system, [and] the lungs” soon after external application.⁹⁶ One article reports that five minutes after essential oils were massaged into an arm for five minutes, a blood test “found the major chemical constituents from that essential oil in the blood of the arm.”⁹⁷ Another source says it takes twenty to seventy minutes for the essential oil to be absorbed into the blood.⁹⁸

The bottom line is that while there is some evidence aromatherapy has an effect, the mechanism by which it does so is poorly understood. Most aromatherapy practitioners, it seems, feel that the oils do work and are relatively unconcerned about how or why the oils do so.

Chapter's Important Points:

- ❖ Although aromatherapy is not seriously regarded by science, there is circumstantial or anecdotal evidence that it works.
- ❖ Our understanding of how aromatherapy works is speculative.

Chapter 4:

Treatment

The selection of essential oils is a large concern. An oil can be labeled “FCC” (Food Chemical Codex), indicating it has standardized component.⁹⁹ However, the source of that content was may be synthetic as opposed to being harvested from the plant material.¹⁰⁰ While the chemicals from either source are identical (and indeed indistinguishable from one another),¹⁰¹ some aromatherapists feel that only essential oils derived from plants are suitable for aromatherapy.¹⁰² If the vendor is selling all oils at the same price, this may indicate the oils are synthetic.¹⁰³

Another term bandied about is “therapeutic grade” but in a country where aromatherapy is unregulated, this classification means anything the seller wants.¹⁰⁴ Similarly, “pure” means whatever the seller says it does, so is of little use to the buyer.¹⁰⁵

Oils should be in brown or dark colored glass bottles when purchased.¹⁰⁶ This prevents the oil’s deterioration from light exposure or it becoming contaminated from the breakdown of plastic.¹⁰⁷ Likewise, the bottle should not have a rubber eyedropper on top since the oil might disintegrate the rubber and become altered.¹⁰⁸

Chemicals from a plastic container might simply leach into the oil. In December 2007, a Canadian retailer removed polycarbonate plastic water bottles and food containers from grocery shelves.¹⁰⁹ The fear was bisphenol A would leach from the plastic into the water or food.¹¹⁰ Bisphenol A's original use was going to be as a synthetic estrogen. Instead it was decided to use it in bottles and as a liner in canned foods. Tests indicate bisphenol A can potentially cause "cancer and reproductive problems in animals."¹¹¹ As of this writing, manufacturers are holding fast and attempts to get bisphenol A banned has mostly been defeated.¹¹² This is another reason to stay away from plastic bottles whenever possible including when buying essential oils.

Some vendors attempt to get into the aromatherapy market by selling items that are not (or not entirely) essential oils. Products marked "fragrant oil," "perfume oil" or "aromatherapy oil" may suggest additives.¹¹³ Sometimes essential oils are diluted with vegetable oil—if a couple of drops on paper leave an oily stain, this is probably the case.¹¹⁴

Port wine from 1860 can still be enjoyed today.¹¹⁵ Essential oils don't last that long, with citrus oils being the first to go in a matter of months.¹¹⁶ Thus if there's any suggestion the essential oil for sale has been on the shelf for a while, it might be well to choose another vendor.

Once purchased, essential oils should be stored away from heat, light, or moisture.¹¹⁷ Avoid touching the inside of the lid or bottle when using to avoid

contamination.¹¹⁸ Keep bottles tightly shut and inaccessible to children.¹¹⁹

The scent can be administered

- through the air generally¹²⁰ (diffusion)
- by inhaling directly¹²¹
- by topical application (through bath, massage¹²² or cosmetics¹²³)
- or through application to a body orifice (such as the mouth)¹²⁴

Aerial distribution can be achieved by boiling two Cups of water and pouring them into a bowl,¹²⁵ then up to ten drops of essential oil are added to the water.¹²⁶

A candle can be lit for five minutes and, after extinguishing, a drop of essential oil added to the melted wax.¹²⁷

Commercial diffusers include lamp rings, clay pot diffusers, candle diffusers and electric heat diffusers.¹²⁸ In all of these, there is a place to put drops of essential oil while the heat carries the scent into the room or area. The electric heat diffuser also uses a fan to circulate the scent.¹²⁹ One problem with heat-based diffusion is that the heat may change the properties of the oil, lessening its effect.¹³⁰ Another is that essential oils are flammable, therefore, care must be taken that they are not exposed to flame.¹³¹

One diffusion device which does not use heat is the fan diffuser.¹³² The drops are placed on a tray or

pad and the fan diffuses the scent through the room.¹³³ Heat is not a factor so the effect is not compromised.¹³⁴

Or fill a one ounce glass spray bottle with purified or distilled water and add 10-15 drops of essential oil.¹³⁵ Shake well before misting over the client's body.¹³⁶ This preparation will last 1-2 weeks.¹³⁷ Remember that sunlight can deteriorate the oils making it is best if the mister is made of brown or dark colored glass.¹³⁸

A small unit called a nebulizer claims to disassemble the essential oil into molecules and spread these throughout the room.¹³⁹ The name "nebulizer" may be somewhat misleading. A medical nebulizer has the patient use a mask or mouthpiece to inhale the mist;¹⁴⁰ the aromatherapy nebulizer sends the mist to a whole room.¹⁴¹ The two machines are different and use of the same name does not imply that the aromatherapy version has the same (or any) status in the medical profession as does the other kind.

Diffusion is an easy addition to a massage. But the use of aromatherapy in the massage setting requires a couple of caveats. The therapist cannot diagnose, according to NCBTMB (Standard of Practice I:1 "be knowledgeable of his/her scope of practice and practice only within these limitations").¹⁴² Also the US Food and Drug Administration prohibits the therapist from making any claim as to the effectiveness of aromatherapy.¹⁴³ So if a client comes in, complaining of a medical issue, the therapist cannot say, "Ah, that is ----- and I have an essential oil that will cure it."

On the other hand, the therapist cannot administer aromatherapy without the client's consent. The NCBTMB's Standards of Practice require the therapist to "obtain voluntary and informed consent from the client prior to initiating the session" (Standard I:i) and to "accurately and truthfully inform the public of services provided" (Standard IV:d).

One shop addresses these concerns by simply saying the massage includes aromatherapy.¹⁴⁴ This avoids making any claims about effectiveness and informs the client what is going on. Presumably the client has the choice to ask that aromatherapy not be included.

The therapist using aromatherapy will probably need to ask more questions of a client than for simply a massage. There are a number of conditions where aromatherapy is contraindicated (see Chapter 5), such as asthma, epilepsy, allergies, high blood pressure, or varicose veins. Aromatherapy should not be used immediately after surgery or while breastfeeding.

Additionally, the therapist will want to warn the client (before the session begins) that aromatherapy may cause drowsiness. The super-cautious therapist may want to put these disclosures on an intake form the client signs.

The second technique of aromatherapy is direct inhalation. This can be as simple as putting three to four drops of an essential oil onto a tissue near the nose and breathing it in.¹⁴⁵ Or two cups of water can be boiled

and poured into a bowl.¹⁴⁶ Up to ten drops of essential oil are added to the water and the aroma is breathed from twelve inches away.¹⁴⁷

One site suggests direct inhalation by placing a drop of essential oil in cupped hands. Generally, full strength essential oils are not placed directly on the skin.¹⁴⁸ A carrier oil (discussed later in this chapter) is usually used.

Direct inhalation may not be very useful in the massage setting unless one is practicing as an aromatherapist as opposed to being a massage therapist using aromatherapy. Because the essential oil is so close to the nose, the therapist will have to maintain especial care as to the client's reaction. Two other aromatherapy techniques (diffusion and massage) can occur in tandem with the massage and perhaps are less distracting to the therapist.

The third technique for aromatherapy is topical application, such as massage. Marguerite Maury is credited with being the first to use massage in applying essential oils (see Chapter 2 for details).¹⁴⁹

Since essential oils are too strong to be placed on the skin,¹⁵⁰ a carrier oil is necessary. This is a plant base (usually oily) that dilutes the essential oil so the oil can be placed on the skin.¹⁵¹ An example of a carrier oil is sweet almond oil.¹⁵² The carrier oil also provides lubrication to allow the essential oil to disperse evenly on the skin.¹⁵³ Up to twenty drops of an essential oil are added to one ounce of the carrier oil.¹⁵⁴ Care should

be taken to keep this mixture out of the eyes.¹⁵⁵ Carrier oils commonly around the house are olive oil and unrefined sunflower oil.¹⁵⁶

The fourth technique is the oral/rectal/vaginal use of aromatherapy. This is done in Germany and France (sometimes by medical professionals) and in the United Kingdom.¹⁵⁷ Since the massage therapist without colonics licensing or certification is generally prohibited from touching the rectum by most jurisdictions¹⁵⁸ and one of the standards state (“not touch the genitalia”—Standard VI:d), the only application of the fourth technique in the massage setting is oral.

Oral administration of essential oils is best left to medical professionals¹⁵⁹ (oral doses require a prescription in European countries.)¹⁶⁰ Swallowing them is listed as a caution in Chapter 5. If applying essential oils directly to the skin is discouraged, swallowing them does not make much sense. There are practitioners who insist there are essential oils which are safe to swallow. It is probably a high risk venture for the massage therapist.

Particular essential oils have been certified kosher by an Orthodox Jewish rabbi.¹⁶¹ If the therapist has Jewish clientele and kosher is a concern, check with the supplier.

One source reports using aromatherapy topically and through diffusion for dogs.¹⁶² A wounded cat was treated topically (using a poultice).¹⁶³ A naturopath

cautions aromatherapy has caused severe dermatitis in pets.¹⁶⁴

Aromatherapy through scent was used to calm a Siberian tiger at the Wildlife Heritage Foundation in Kent, England in 2004.¹⁶⁵ Oral and topical aromatherapy were used on a wounded horse.¹⁶⁶ A seven year old female orangutan, depressed by the death of her mother, was successfully treated with aromatherapy, although the technique used is not reported.¹⁶⁷ A school for animal aromatherapy was founded in England in 1995.¹⁶⁸

An animal may not be able to signal concern as easily as an adult human. Thus, the therapist practicing pet massage who wants to incorporate aromatherapy should have more in depth training than one adding the skill to a human practice where problems are more easily recognizable.

Essential oils can be blended, or combined, to achieve a therapeutic purpose.¹⁶⁹ In the beginning, the therapist should limit blending to 25 total drops.¹⁷⁰ The container with the blended oils should be labeled (which may be required by local ordinance) and the proportions noted in a notebook, so the effect can be duplicated if required later.¹⁷¹

While, as discussed earlier in this chapter, a therapist cannot diagnose nor claim any particular effectiveness for an essential oil, the oils are commonly held to have certain properties, some of which are described here.¹⁷²

There is not enough room to go into each oil in depth and a therapist should do additional research before utilizing an oil in a particular situation. Especially look for any circumstances where this oil should not be used (in addition to the general contraindications given in the next chapter.) Also, there may be a preferred technique (out of the four described above) for administering an oil to achieve a specified result (massage may be more effective than inhalation when using oil “A” for purpose “B”).

If the client appears to be suffering from a serious medical condition, the therapist should refer the client to an appropriate medical practitioner and not attempt to treat with aromatherapy. Later, with the practitioner’s approval, aromatherapy may be an appropriate complimentary modality.

✚ **Acne:** cajeput, lavender, tea tree

✚ **Aging skin:** franklin, neroli, rose

✚ **Allergies:** chamomile, lavender, lemon balm, melissa

✚ **Alopecia:** rosemary, thyme

✚ **Anger:** basil, bergamot, chamomile, clary sage, cypress, frankincense, geranium, hyssop, jasmine, juniper, lavender, marjoram, melissa, neroli, rose, rosemary, ylang-ylang

- ✚ **Antibacterial:** cinnamon, clove, lime, rosemary, tea tree oil
- ✚ **Antifungal:** clove, juniper, lavender, tea tree oil, thyme
- ✚ **Anti-inflammatory:** bay leaf, black cumin, cinnamon, clove, eucalyptus, sage
- ✚ **Antiviral:** ginger, hyssop,¹⁷³ lemongrass, peppermint, sandalwood, tea tree oil, thyme
- ✚ **Anxiolytic (anti-anxiety):** angelica, basil, bergamot, black pepper, Borneo camphor, cajeput, camphor, cardamom seed, cedarwood, chamomile, cinnamon, clary sage, clove, coriander, cypress, eucalyptus, fennel, frankincense, garlic, geranium, ginger, grapefruit, hyssop, jasmine, juniper, lavender, lemon, lemongrass, marjoram, melissa, neroli, myrrh, neroli, nutmeg, onion, orange, palma rosa, patchouli, peppermint, pine, Roman chamomile, rose, rose otto, rosemary, rosewood, sage, sandalwood, sweet marjoram, tea tree, thyme, ylang ylang
- ✚ **Apathy:** basil, grapefruit, peppermint
- ✚ **Arthritis:** benzoin, camphor, chamomile, cypress, eucalyptus, ginger, hyssop, juniper, lavender, rosemary

- ✚ **Asthma:** *(some sources say aromatherapy is contraindicated for people with asthma)* clary sage, frankincense, lavender
- ✚ **Athlete's foot:** geranium, tea tree
- ✚ **Back pain:** birch, black pepper, clary sage, ginger, lavender, marjoram, rosemary
- ✚ **Blackheads:** eucalyptus, lavender
- ✚ **Boils:** lavender, tea tree
- ✚ **Bronchitis:** cedarwood, lavender, peppermint
- ✚ **Bruises:** lavender
- ✚ **Burns:** lavender
- ✚ **Candida:** patchouli, tea tree
- ✚ **Catarrh:** cedarwood, eucalyptus, ginger
- ✚ **Cellulite:** geranium, lemon, juniper
- ✚ **Chilblains:** black pepper, chamomile, lavender
- ✚ **Childbirth:** clary sage, jasmine, lavender
- ✚ **Chronic fatigue syndrome:** basil, bergamot, geranium, lavender, peppermint, thyme
- ✚ **Circulation:** geranium

- ✚ **Colds and flu:** basil, eucalyptus, tea tree
- ✚ **Cold sores:** bergamot, tea tree
- ✚ **Combination skin:** chamomile, lavender, ylang ylang
- ✚ **Concentration:** basil
- ✚ **Constipation:** basil, marjoram, rosemary
- ✚ **Corns:** lemon
- ✚ **Dandruff:** lavender, lemongrass, rosemary
- ✚ **Depression:** basil, bergamot, camphor, cedarwood, clary sage, cypress, frankincense, geranium, grapefruit, jasmine, lavender, lemon, lemongrass, marjoram, melissa, myrrh, neroh, neroli, orange, patchouli, rose, rosemary, sage chamomile, sandalwood, spruce, vetiver, ylang-ylang
- ✚ **Dry skin:** lavender, rose, sandalwood
- ✚ **Dyspepsia:** peppermint
- ✚ **Earache:** chamomile, lavender
- ✚ **Eczema:** chamomile, geranium, lavender
- ✚ **Endometriosis:** chamomile, jasmine, lavender, neroli, rose

- ✚ **Exhaustion:** geranium, lavender, rosemary
- ✚ **Feet:** peppermint
- ✚ **Fibromyalgia:** basil, black pepper, elemi, eucalyptus, frankincense, geranium, jasmine, juniper, lavender, myrrh, neroli, peppermint, pine, tea tree
- ✚ **Flatulence:** basil, fennel, rosemary
- ✚ **Gingivitis:** geranium, lemon, tea tree
- ✚ **Grief, bereavement:** frankincense, hyssop, lavender, marjoram, neroli, rose
- ✚ **Hay fever:** juniper, lavender, lemon
- ✚ **Headaches:** basil, chamomile, lavender, peppermint
- ✚ **Hemorrhoids:** cypress, frankincense, myrrh
- ✚ **Immune system:** lavender, lemon, tea tree
- ✚ **Indigestion:** chamomile, fennel, peppermint
- ✚ **Infertility, women:** clary sage, lavender, rosemary, tea tree
- ✚ **Influenza:** eucalyptus, ginger, peppermint
- ✚ **Insect bites:** chamomile, lavender, tea tree
- ✚ **Insecurity:** frankincense, sandalwood

- ✚ **Insomnia:** basil, benzoin, chamomile, geranium, German chamomile, jasmine, lavender, mandarin, marjoram, melissa, neroli, petitgrain, Roman chamomile, rose, sandalwood, sweet marjoram, thyme, ylang-ylang

- ✚ **Irritability:** chamomile, lavender, neroli

- ✚ **Irritable bowel:** chamomile

- ✚ **Loneliness:** marjoram

- ✚ **Low self-esteem:** sandalwood, ylang ylang

- ✚ **Menopause:** basil, benzoin, bergamot, camphor, chamomile, clary sage, cypress, geranium, hyssop, jasmine, juniper, lavender, lemongrass, myrrh, neroh, neroli, peppermint, rose, rosemary, sage, sandalwood, thyme, ylang-ylang

- ✚ **Menstruation:** basil, clary, jasmine, juniper, lavender, melissa, peppermint, rose

- ✚ **Mental fatigue:** lavender, peppermint, rosemary

- ✚ **Migraines:** basil, chamomile, eucalyptus, lavender, lemon, marjoram, melissa, peppermint, rosemary, sweet marjoram

- ✚ **Mouth ulcers:** geranium, lemon, tea tree

- ✚ **Muscle aches:** black pepper, ginger, marjoram

- ✚ **Nausea:** fennel, ginger, peppermint
- ✚ **Nervous exhaustion:** basil, cinnamon, citronella, coriander, ginger, grapefruit, hyssop, jasmine, lavender, lemon grass, nutmeg, peppermint, rosemary, ylang-ylang
- ✚ **Nervous tension:** basil, bergamot, cedarwood, chamomile, cinnamon, frankincense, geranium, jasmine, lavender, marjoram, melissa, neroli, palmarosa, rosemary, vetiver, ylang-ylang
- ✚ **Neuralgia:** cajeput, geranium, ginger
- ✚ **Palpitations:** chamomile, clary sage, lavender
- ✚ **Panic attack:** frankincense, lavender, neroli, ylang ylang
- ✚ **Periods, heavy:** cypress
- ✚ **Periods, irregular:** chamomile, clary sage, lavender
- ✚ **Periods, painful:** chamomile, clary sage, rosemary
- ✚ **Periods, scant:** clary sage, juniper, rose
- ✚ **PMS:** clary sage, geranium, lavender
- ✚ **Poor memory:** rosemary
- ✚ **Post-natal depression:** bergamot, chamomile, neroli

- ✚ **Psoriasis:** bergamot, cedarwood, geranium
- ✚ **Rheumatism:** chamomile, lavender, rosemary
- ✚ **Sadness:** bergamot, neroli
- ✚ **Scarring:** lavender, neroli
- ✚ **Sciatica:** chamomile, eucalyptus, rose
- ✚ **Sharpen, stimulate mind:** rosemary
- ✚ **Shingles:** bergamot, chamomile, eucalyptus, geranium, lavender, lemon, peppermint, tea tree
- ✚ **Sinusitis:** bergamot, eucalyptus, peppermint
- ✚ **Skin, Mature:** frankincense, geranium, rose
- ✚ **Skin, Normal:** chamomile, lavender, rose
- ✚ **Skin, Oily:** cedarwood, lemon, rosemary
- ✚ **Skin, Sensitive:** chamomile, lavender, rose
- ✚ **Sore throat:** lavender, lemon, tea tree
- ✚ **Sprains:** chamomile, lavender, rosemary
- ✚ **Stress—see Anxiolytic**
- ✚ **Stretch marks:** lavender, neroli

✚ **Sunburn:** chamomile, lavender

✚ **Tinnitus:** basil

✚ **Toothache:** clove, peppermint

✚ **Vaginal thrush:** bergamot, lavender, rose

✚ **Varicose veins:** *(some sources say aromatherapy is contraindicated for people with varicose veins)*
chamomile, cypress, myrrh, rosemary

✚ **Warts:** lemon, patchouli, tea tree

✚ **Wrinkles:** frankincense, neroli

For the therapist wanting to get a foot wet in aromatherapy, there are several “super” essential oils—ones which are said to have a wide variety of uses. Lavender, for example, is listed in 50% of the conditions above. Chamomile (29%) and rosemary (23%) are also multi-taskers. So a relatively inexpensive way to experiment with aromatherapy would be to buy an oil which has multiple applications and test it out.

Something You Can Try

If you have acne, allergies, anger, anxiety, arthritis, back pain, blackheads, boils, bronchitis, bruises, burns, chilblains, childbirth, chronic fatigue syndrome, dandruff, depression, dry skin, earache, eczema, endometriosis, exhaustion, fibromyalgia, fungus, grief, hay fever, headache, insect bite, insomnia, irregular period, irritability, menopause, mental fatigue, migraine, nervous exhaustion, nervous tension, palpitations, panic attack, PMS, rheumatism, scarring, sensitive skin, shingles, sore throat, sprain, stretch marks, sunburn or vaginal thrush.

Place 4 drops of lavender essential oil onto a tissue. Hold the tissue close to your nose and inhale. Or else take one ounce of olive oil or unrefined sunflower oil. Add 20 drops of lavender essential oil. Massage into the affected area.

Does the problem improve given a reasonable period of time?

Chapter's Important Points:

- ❖ Essentials oil should be bought in dark glass containers and stored away from heat, light or moisture.
- ❖ There are 4 techniques to apply aromatherapy—diffusion, inhalation, topically and through an orifice.

Chapter 5:

Cautions and Contraindications

Some people will disagree with specific contraindications and say aromatherapy can be safely administered even in those suspected circumstances. Nonetheless, reputable sources say essential oils should not be used under the following circumstances or by the following methods. At the very least, these situations should trigger especial care and caution.

- undiluted on the skin.¹⁷⁴ If exposure occurs, wash the area with whole milk.¹⁷⁵ It may be a good idea to close the eyes when inhaling during aromatherapy.¹⁷⁶
- Swallowed¹⁷⁷
- Without testing. (A new oil should be diluted, placed on the inside of the elbow, and covered with a bandage. Wait 24 hours to see if any reaction occurs.)¹⁷⁸
- for people with asthma or epilepsy¹⁷⁹
- for people with allergies or high blood pressure¹⁸⁰
- for people with “varicose veins, deep vein thrombosis or contagious skin conditions”¹⁸¹
- for people with broken skin¹⁸²

- if person under prescription medication until doctor confirms use of aromatherapy is safe¹⁸³
- immediately following surgery¹⁸⁴
- immediately after chemotherapy or radiation unless a doctor OKs¹⁸⁵
- by children without adult supervision¹⁸⁶ or administered around young children or babies unless caution is exercised.¹⁸⁷ One source says children under 5 should not use aromatherapy.¹⁸⁸
- while breastfeeding¹⁸⁹
- anywhere near something which might ignite them¹⁹⁰
- Used near bedtime if the particular oil (such as mint) causes insomnia¹⁹¹

Aromatherapy may cause drowsiness.¹⁹² Therefore driving or operating heavy machinery should not be attempted immediately following a treatment according to some writers.¹⁹³

Aromatherapy during pregnancy is controversial. The spectrum goes from the opinion it is completely safe to it should be completely absent during pregnancy.¹⁹⁴

No claim for the effectiveness of aromatherapy may be made in the United States (such as it will help one to quit smoking or to sleep or it will aid in preventing or

curing a disease) unless Food and Drug Administration approval has been secured.¹⁹⁵

Chapter's Important Points:

- ❖ Essential oils are not harmless; there are some circumstances when they should not be used.
- ❖ No claims as to the effectiveness of aromatherapy may be made in the United States.

Chapter 6:

Licensing and Professional Resources

The practice of aromatherapy is not licensed in the United States, although it often is in Europe.¹⁹⁶ Applying essential oils to another person's skin may require a massage license in some jurisdictions.¹⁹⁷

There are two professional organizations for aromatherapists in the United States.

The National Association for Holistic Aromatherapy (NAHA) requires professional members to have 200 hours of education or 4 years experience or to pass an examination.¹⁹⁸ The NAHA has a code of ethics.¹⁹⁹ The association does not say how many members it has.

The Aromatherapy Registration Council (ARC) requires one year of education and a 4 hour examination.²⁰⁰ Registrants must complete continuing education. There is reference to a Disciplinary Policy²⁰¹ which may be the equivalent of a code of ethics but the text is apparently not on their web site. The Council does not state how many aromatherapists have been registered. A check of the ARC Online Registry shows 21 registrants in California, 19 in Pennsylvania and 12 in New York so it is probable the overall number is small.²⁰²

In France, some of the essential oils are available by prescription only.²⁰³ Aromatherapy practiced by doctors is covered by insurance in many European countries.²⁰⁴

There are two international professional magazines for aromatherapists. The *International Journal of Aromatherapy*, published four times a year, claims to publish peer-reviewed articles and to be read in forty countries.²⁰⁵ The *International Journal of Clinical Aromatherapy* is published twice a year and states its articles are peer-reviewed "where possible."²⁰⁶

Peer review subjects an article to examination by two or three experts in the field.²⁰⁷ This is designed to improve and increase the reliability of the article.²⁰⁸ The use of peer review in aromatherapy is probably primarily to enhance the discipline's credibility. Academic, medical and scientific journals are typically peer-reviewed. Aromatherapy would like to be viewed on the same level of seriousness or, more importantly, mainstream acceptability.

Chapter's Important Points:

- ❖ The practice of aromatherapy is unlicensed in the United States.
- ❖ Aromatherapy is regarded more legitimate by the medical profession in Europe than in the United States.

Easiest: take the test online at

<http://mansfieldfc.com/massage/1/aroma/autotest.html>

14 correct answers are required to pass.

Expect a confirmation the same day I receive your test.

Once you have passed the test successfully, proof of completing this course will be mailed to you.
Congratulations!

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