

Introduction

Global Network newsletter is written to help reflexologists understand the conception and development of Facial and Neuro foot reflexology therapy's so that trained therapists may have confidence in its application.

The articles will inform students and other readers about the fantastic work done by some students around the world as well as letters from happy patients.

Global Network and the International Institute collects cases from students and patients around the world.

Please help us with more cases.

You can find more than 300 case studies linked to all our web pages:

www.facialreflex[|[* ^ • &@ [| \overline{E}] { www.reflexologiafacial.es www.temprana.org

Letters I got from patients

Mrs Kim Povey Hook Hampshire, UK wrote

After suffering from very heavy periods for many years, I decided to try a course of reflexology to try and relieve my monthly problem as an alternative to heading to the doctors for a potential treatment involving taking medication.

I approached Kirsten Workman MAR (Facial and Foot Reflexologist) and booked a home appointment. On her visit Kirsten carefully explained how reflexology worked, followed by a one hour facial reflexology treatment. I continued to have weekly one hour sessions and within 8 weeks there was a significant decrease in the amount of blood I lost during my period. Within 12 weeks I considered my periods to be normal and I was extremely pleased with the results. Due to my personal success with this treatment, I booked a course of treatments for my 14 year old daughter who like me experienced heavy periods and would bleed for up to 14 days each month. Again the treatment was successful and within a couple of months her periods were lighter and shorter.

Unfortunately due to financial reasons I had to stop having treatments and within months my periods became heavy again with me, I believe, haemorrhaging on my second/third day. Five weeks ago I started having reflexology treatments once again with Kirsten and I was delighted that when my period arrived last week, not only was the bleeding lighter but I never had the haemorrhaging experience on the second/third day.

Personally reflexology has worked not only for me but also for my teenage daughter and I encourage others to try it for themselves as an alternative to conventional medicine based remedies.

Thank you Kirsten from UK

Ulla from Denmark wrote

Facial Reflexology is a wonderful form of therapy that I am currently due to serious illness, having great benefit.

Thank you Marianne from Denmark

My first experience with Temprana Reflex Therapy in India.

Lone Sorensen

It was a great experience to bring Temprana Reflex therapy to India. This was my first trip to India. The city was Bangalore in the south India.

I made the trip to India together with Christian filming a documentary film about Temprana Relex therapy and Christian did photos too.

I had many advance ideas about India and they were not wrong, as expected India is an incredibly different and very poor country. Of course, as everywhere else, some people are not as disadvantaged as the most of the population. The Indian population is very poor on material goods and the economy is very bad for the local people but the Indians are very rich in culture.

It was very exciting to live among the local Indians. Experience giving a real picture of how the local Indians live. We got a great insight into the Indian culture, food and a lot of information about proper use of every seed and spices used in everyday cooking for the health.

Every time I start work in a new country, I study how people use folk medicine from ancient times up to now. India has a rich culture in the use of herbals and I got many recipes on how people in India still today use such as herbs, seeds and spices to cure cancer and other serious illnesses.

Our meeting with the family and 12 year old XXXX was also exciting and as always, sad too. As almost always, I met a family with many daily complications. No matter where in the world parents for disabled children have the same problems, same conditions the same difficulties in holding together family life.



Description of Case: Seizures with autism as consequence.

Name: XXXX Sex: Female

Age: 12 years 5 months

Child born out of a non-consanguineous marriage

XXXX was full term baby, born out of c-section with good appears. Her initial mile-stones like neck control, rolling over ,creeping, crawling, sitting up and standing with support were normal like any typical child (but was able to walk independently only at the age of 2yr 3 months). She got a febrile seizure (first one) when she was 5 months old baby. This seizure lasted for more than ½ hour. Subsequent to that she had another febrile seizure after one month. The third seizure was a febrile (without fever). She went through 8-10 seizure attacks (generalized tonic-colonic) in a span of 7 months before she went to a regular pediatric neurologist at the age of 1.5 years. The neurologist has diagnosed her condition as Epilepsy based on the following tests/data. A). EEG done at the age of 8 months (indicating mildly abnormal and the findings suggest bilateral parietal seizures-Report is attached), CT scan done at 8 months of age MRI done at 1.6 years of age. Based on these reports the neurologist has started her medication.

Major areas of concern June 2011/ now 12 years old:

- 1. No meaningful social interaction with peers.
- 2. Eye contact lessens or lack of interest in people when in a crowd of people.
- 3. Inappropriate singing in loud voices at public places and even at home.
- 4. Repetition of rhymes, phrases over and over like 10 times.
- 5. Poor concentration. Will typically switch three activities in a span of 5 mins.
- 6. Poor play skills. (Slowly improving with Sunrise therapy)
- 7. Solitary play with loud singing. (Little pretend play like phone conversation has started)
- 8. Open mouth when concentrate.



After 2 days Temprana Reflex Therapy Prerana can already close her mouth when concentrate. After 5 days it was possible to realize a full treatment for first time; Facial Reflexology, Neuro-Foot Reflexology, Neuro Hand Reflexology and Bali brain training. It is possible to observe some changes in her behavior too. The mother and grandfather are getting treatment too. The mother for cancer in kidney and grandfather for Parkinson's. After 10 days treatment I left the Family in much better condition. My little Temprana patients were accepting for everyday more and more the touch on the face. She took my hands and placed herself both my hands on her face. From second day she accepted a full neuro-foot reflexology and neuro-hand reflexology. Grandpa was shaking less and mother in better conditions with her health and mind and now she have a fantastic tool to help her daughter. The first seed for future Temprna Reflex Therapy in Bangalore in a school for special needs has been planted. Global facial Network will support the project as well as Lone Sorensen.

The documentary film about Temprana Relex therapy in India will be showed during the additional Temprana Therapy course in Barcelona 23th-25th of Sep. 2011, learning how to train parents in

groups.



NB!

The International Institute of Facial reflexology has permission from parents to use the case/text/photos/Film for intern information and teaching but NOT for public or any popular information.

Missing respect can have legal consequences. It is not possible to add this newsletter in web pages or to use this newsletter in any other public way. Lone Sorensen

Case study written by

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About Mrs Sylvia

Health status: Suffers from multiple dementia Resident: Care Home for Dementia since 2008

Sylvia has 2 daughters, a lawyer and a dementia specialist.

She was an academic intellectual, a pianist and a Councillor later in life till her accident.

Date treatments commenced: June 2009 – officially.

Type of treatment given: Facial Reflexology Sorensensistem TA , plus massage therapy for hands,

feet, legs.

Music used: Japanese Zen Garden therapy music

Medical history:

Sylvia was diagnosed with multiple dementia in 2005. She is a registered as blind person. She has suffered from Stroke and has had repetitive mini strokes in the past 3yrs. Over a period in care in the Care Home she has lost all her memory and became very confused despite daily visits by husband to keep company. She has zero mobility, had very poor eye sight due to Juvenile Macular degeneration, speech has been only random words said very occasionally but related to some past event, has suffered from blood clot in her right leg 18mths ago. Have metal plates in left shoulder. (Due to somebody smashing into her car head on collision just before Christmas 11 years ago.)

FRS treatments were started in May 2009, with agreement with her husband, who also helped Sylvia in her Wheelchair / room chair. All treatments are given in his presence in her room on a weekly basis. [Private arrangements are allowed with agreement of family].

Officially her treatments commenced in June 2009 with the Care home, after officially receiving a contract as Complementary therapist and had a therapy room. Henceforth, all treatment therapies had to be recorded in her file, and GP notified. Records files continue to be updated in both [Care homes, my files] when treatments are given.



TREATMENT PROCESS

Each treatment is adopted according to Sylvia's suitability at that particular moment of time. Shorter time is taken. If the process becomes too much than I stop momentarily and after reassurance re-commence the therapy.

Sylvia found it difficult to deal with the treatment in the beginning but as treatments progressed and she was feeling the sensation of the strokes she began to enjoy the therapy. After five months she appeared to have gained more confidence. She was not so much withdrawn her clarity in speech improved. It was noticed by her husband and me that if an appointment was missed she would partially relapse. This manner of routine continued to be noticed each time treatment was missed.

But it was noticed that her short term memory improved slightly.

In the beginning although Sylvia 's response was minimalist or none to my questions, I would continue to talk to her and try and engage her thought process but her response often was that of slurpy Yessss.... or mentioning fire often. But her sight clearly showed that she could not see. It seemed that she was responding via her sense of hearing and had a very strong grasp of my hand when I held. She continues to do so though over the years she has become very teasing.

Prior to commencing treatments I will always ask her directly if she would like to see me and I would gently hold her hand and she would respond by squeezing my hand tightly and have a great teasing smile and say, Yes or knod her head. If, she doesn't wants to have therapy than I would respect it.

During treatment she would sigh frequently. At several sessions I would try and get her to breadth in/out with me and practiced with her playfully by blowing at her to get some reaction. She would breadth out too. But now she anticipates automatically before we start as she knows the routine.

End of treatment I always ask her if she enjoyed the therapy. She would think about what was said and take her time to reply and say, 'Yes and often said, 'Super Duper.

Occasionally say,' Yes, thank you'. Her husband looked at me surprisingly and says, 'Well at least she talks to you.'

To date as the treatment has progressed she has become quite jovial with me and we exchange private jokes but she seem to like clenching my hand each time quite tightly but teasingly. She looked at my brightly coloured jackets/jumpers and when I ask her do you like this colour she say, 'Yes'. On occasions she has stretched her hand and touched the scarf to feel the material. This shows that her brain cortex nerves have been stimulated for her brain to respond in order for her to think, respond, see, and hear and to touch.

Often she looks at the therapy room big window and says,' Window is open,' we would observe what she has said and her eyes looking in the direction of the window confirm that she could see.



To date as the treatment has progressed she has become quite jovial with me and we exchange private jokes but she seem to like clenching my hand each time quite tightly but teasingly.

I often quiz her about her children and recently she mentioned her daughter's names in conversation and her husband and friend were so amazed. So this is an evidence of her past memory returning. She is thinking about her past life, what she did, but more importantly that she her brain has recovered the ability to think and engage in past and present events in her thought process making again. Visually her sight has improved as she does watch TV but spends lot of time observing what is going on around her. She seems more alert, her response time to answering is quicker to people. She looks happier and has smile most of the time.

People passing by will engage her in conversation and are very surprised at her progress in comparison to seeing her just sitting head down with eyes closed all the time and in somewhat a vegetative state.

Now she can say her likes and dislikes to people dealing, situations with her assertively. She will not stand for any nonsense. It is wonderful to observe her functioning like a person in herself in control as much as she can.

Recent, change observed during treatments is the change in her hair colour [also pointed out to her husband {see photopg.1}] .Sylvia has always been totally silvery/white haired lady, but it is changing on the back of head to dark colour almost black. [I will continue to observe this closely to see how far it happens on the head]

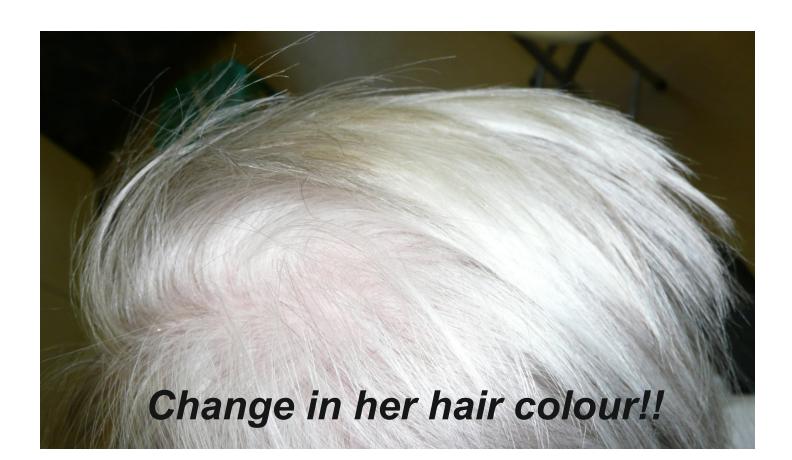
As for her husband he is very pleased with her progress and fully believes in the treatments, he himself has now reduced visiting times as she is able to communicate with carers. He can give himself some time improve his restrictive lifestyle by taking time off to visit friends. But he misses her company at home.

Medically I am informed by her husband that her case is now discharged by all her various consultants, which she had been seen, for years since her accident.

My recent meeting with the Care Home new manager, who had been manager here few years ago, when Sylvia 1st came remarked, the change in her and acknowledged how she is able to speak now.

To conclude Sylvia has climbed a great mountain in mental recovery from vegetative state to being a lively person and she continues her treatment in particular of cranial therapy on a fortnightly basis.

[personal details and Care Home name has been prohibited for clients confidentiality]





Research has shown that many useful essential oils have a devastating effect on cancer cells.

Some of these oils are:

Geranium: Therapeutic properties of geranium oil can be used to relieve acne, bruises, burns, cuts, dermatitis, eczema, hemorrhoids, such as insecticides, ringworm, ulcers, breast tenderness, edema, poor circulation, sore throat, tonsillitis, PMS, menopauseproblemer, stress and neuralgia

Frankincense: A study in the journal "BioMed Central journal" about complementary alternative medicine in March 2009 revealed "Frankincense oil.

The study indicated that the oil used to control bladder cancer is effective and the oil is an inexpensive way to eradicate cancer without harming healthy cells in the same body. Since Frankincense is a natural substance, there will be no adverse reactions associated with use of chemotherapy. The oil seems to be able to distinguish cancer cells from normal bladder cells and reduce cancer cell viability."

Tsuga: In cancer research conducted by Brigham University in 2003, it was found that Tsuga essential oil showed anticancer activity against breast and cervical cancer.

The study showed that the essential oil with a 99.1% inhibited cervical cancer at 200 ppm. (Dissolution). It is amazing that a very small concentration of the oil produced these results.

Lemon Oil: Help the immune system, promotes the formation of white blood cells, improves circulation, elevates the mind and tones skin. Lemon Oil is infection resistant, antibacterial, antiviral, antiseptic, and an excellent disinfectant. Can support the immune system in cancer prevention.

The University of Arizona (H-H. Sherry Chow, Ph.D.)

Lemongrass Oil: Lemongrass oil has been extensively studied for its cancer-inhibiting properties. A study published in the chemical-biological interactions finds that colon cancer can be reduced with lemon grass oil. The study showed that lemongrass oil induces cancer cell death through a natural process called the apoptotic process.

Sweet Linalool: Linalool is a sweet, relaxing aroma, which is found in many essential oils. It has been discovered that Linalool completely eliminate liver cancer cells when used in very low concentrations. Besides its cancer inhibitory effect has Linalool also anxiety-relieving and sleep-inducing properties.

Sandelwood: Sandelwood is good in the fight against breast cancer, prevents the development of skin cancers and tumors. Alpha-santalol in Sandeltræolie is remarkably effective at reducing skin tumors. This has been proven in a study published in "Journal of anticancer Research" in January 2008. For breast cancer showed sandalwood essential oils is most effective.

Sweet Orange peel oil: is the most important of citrus oil.- limonene is the main component of this oil. Leaves and peel have strong healing effect ... remarkable anti-cancer and anti-tumor and is based in the high 85% -96% limonene. Orange oil has been shown to combat tumor growth in over 50 clinical trials.

Spice Oils: Spice Oils as thyme and oregano are also effective in preventing cancer. They do this by protecting the breakage of DNA strands when exposed to strong oxidative stress. Some oils are not directly anti-cancer drugs, but prevents tumor growth by enhancing the immune system.