

# Rhythmical Einreibung

## FAQ and Bibliography

### ***What is Rhythmical Einreibung?***

Rhythmical Einreibung (**RE**) is an Anthroposophic nursing treatment that gently enlivens, warms and nurtures the whole human being through the conscious application of qualities of touch and therapeutic oils. *Read more at:* <https://www.anthroposophicnursing.org/re> and Monica Layer's RE handbook (1)

### ***What is Anthroposophic Medicine?***

Anthroposophic Medicine (**AM**) is an integrative whole system of healing. It was developed by Rudolf Steiner, PhD. and Ita Wegman, M.D. in the early 1900's, and is practiced in 80 countries worldwide. Built on a solid foundation of conventional medicine, it adds a holistic spiritual understanding of man and nature that deepens the understanding of illness and offers a broad range of supportive therapies that includes medication, art, movement, massage and specialized nursing techniques. (2)

### ***What is Anthroposophic Nursing?***

Anthroposophic Nursing (**AN**) is an expression of holistic nursing care developed by Rudolf Steiner and Ita Wegman. According to the International Association the special characteristics of Anthroposophic Nursing are:

- A holistic, integrative image of the human being which provides guidance to anthroposophic nursing activities.
- Support of recovery and healing processes with special attention to the individual developmental needs of the patient.
- The use of wraps, compresses, baths and embrocations to strengthen the self-healing forces within the patient.
- Takes into account biological, soul, and spiritual rhythms in nursing.
- Commitment by nursing staff to ongoing professional and personal development.

*Read more at:* <https://anthroposophicnursing.org>

### ***Why is Hospice and Palliative care a perfect place for Rhythmical Einreibung?***

Hospice and palliative care is based on a biopsychosocial-spiritual model, addressing the needs of patients with life-limiting illnesses. It's natural to include a gentle healing touch that honors the spiritual as part of care. This holistic encounter between two human beings benefits not only patients, but enlivens the work of staff, leading to greater job satisfaction and less burnout. Informally, an anthroposophic nursing colleague in Europe commented that anthroposophic hospitals have higher staff retention than other hospitals.

### ***Why is spirituality important?***

Spirituality has been broadly defined as a "dynamic and intrinsic aspect of humanity through which persons seek ultimate meaning, purpose, and transcendence, and experience

relationship to self, family others, community, society, nature and the significant or sacred. Spirituality is expressed through beliefs, values, traditions, and practices."(18)

Positive associations have been found between patient measures of spirituality and quality of life in serious illnesses. A 2013 International Consensus Conference on Improving the Spiritual Dimension of Whole Person Care concluded that "***Spiritual care is integral to compassionate care.***" (18)

### ***What creates compassionate care?***

The 2013 International Consensus Conference on Improving the Spiritual Dimension of Whole Person Care noted that a person's capacity for compassion was not just an attitude, but *intrinsically linked to a person's own spirituality*- including "a sense of transcendence, meaning and purpose, call to service, connectedness to others, and transformation." It is an "act of love." (18)

### ***What need are we addressing?***

Nurses and other care providers report that their education does not prepare them to provide spiritual care and thus they feel they aren't able to meet the spiritual needs of their patients. (18,19) Organizations are attempting to define curricula and training and develop standardized measures of good spiritual care.

It is not generally appreciated that nurses and nursing aides have a unique opportunity to enhance spiritual care in the ways they "touch" patients. Rhythmical Einreibung was created with that intention and *enhances spiritual care in at least two ways*:

1. Anthroposophic medicine revolutionizes the definition of spiritual care through its appreciation of the dynamics of soul and spirit that are also woven into the intricacies of human physiology and body. Rhythmical Einreibung is a gentler form of Swedish massage that better meets the needs of a weakened palliative or hospice patient. RE interacts with and supports the spiritualized levels of the human body, using special oils and techniques to promote balancing of spiritual physiology.
2. Anthroposophic medicine cultivates a professional culture that includes spirituality as part of daily patient care, and supports an individual provider's own spiritual path, both of which contribute to compassionate care.

### ***What is the evidence to support the incorporation of Rhythmical Einreibung into palliative or hospice care?***

Research shows that spiritual care is an important part of nursing care, and is even essential to reduce spiritual distress when individuals face a difficult diagnosis. Unfortunately it remains neglected in many cases, often because nurses feel uncomfortable and un-prepared to engage their clients in this way. (18,19) While spiritual care is a complex area, it is highly valued and is important to empower nurses and aides to provide spiritual care and foster a culture in which spiritual care is valued and prioritized.

Research has built a case for the efficacy of the whole system of Anthroposophic Medicine in managing symptoms that palliative and hospice care about.

The largest study is the **AMOS trial** (3) (Anthroposophic Medical Outcomes Study), a prospective 4 year observational multi-center study of 1631 outpatients starting anthroposophic therapy (AM) (*including rhythmical massage therapy*) for **anxiety, asthma, ADHD, depression, low back pain, migraine** and **other chronic indications** under conditions in Germany. The positive results demonstrated the value of its integrative whole system approach to chronic illnesses.

AMOS outcomes and other research relevant to hospice and palliative care patients are summarized here with bibliography at the end:

- AMOS Disease Score, Symptom Score, Health Related Quality of Life Scores were all improved by 6 months and sustained at 48 months, with a significant reduction in inpatient hospitalization and clinical investigations, and an increase in anthroposophic medication and psychotherapy. (3)
- Adverse reactions to AM treatment in AMOS were infrequent and mostly mild-to-moderate intensity. (3)
- AMOS RHYTHMICAL MASSAGE THERAPY subgroup of 85 patients had long-term reduction of chronic disease symptoms and improvement of quality of life. Only 4 of 85 RMT patients had adverse reactions (mild cardiac palpitations, moderate arterial hypotension; moderate pain and vertigo in 3<sup>rd</sup> patient, moderate symptom aggravation in 4<sup>th</sup> patient, which led to stopping therapy in those two cases) (8)
- AMOS LOW BACK PAIN subgroup (*13/75 patients received Rhythmical Massage therapy*) receiving anthroposophic treatment had sustained improvement of symptoms, back function and quality of life. (5)
- RE therapy with Solum Oil in a prospective observational study of 100 patients with CHRONIC PAIN showed high effect sizes indicating that repeated rhythmic embrocation with Solum oil may improve mood, pain perception (sensory PPS), and ability to cope with pain (affective PPS). (9)
- Australian study of patients with moderate to severe OSTEOARTHRITIS were treated with anthroposophically inspired topical ginger treatment for 1 week and showed notable decline in pain, fatigue, global effect, and functional status and improved health satisfaction, which continued to improve over 24 weeks if they chose to continue treating themselves. (10)
- AMOS analysis of 97 patients with DEPRESSION had long term clinical improvement in outcomes of CES-D, SF-36 Mental Component Summary, SF-36 Physical Component Summary

at 12 months and maintained at last follow-up at 4 years. (Only 6/97 were referred to RMT) (7)

- AMOS patients with ANXIETY had long term improvements of symptoms and quality of life (but only 2/64 were referred to RMT) (6)
- Dutch study of elderly nursing home patients with DEMENTIA found anthroposophic nursing homes had significantly higher scores on Symptom management and Comfort Assessment in Dying scales than in regular nursing homes. (12)
- AROMATHERAPY, which is part of RE, has been shown to benefit ANXIETY in the DEMENTIA population. (11)
- Improved QUALITY OF LIFE is well documented in research of anthroposophic ONCOLOGY CARE. One study showed significant QOL in emotional, global, physical, cognitive-spiritual and social aspects, whereas benefits of conventional cancer therapy were only tumor-focused. (12) A 5-year study of breast cancer patients showed improvements in overall QOL and in emotional and social functioning in the first year with anthroposophic care, but only minor improvements in the matching group. (13)
- With respect to sustainability and financial aspects of improving spiritual care, the 2013 International Consensus Conference recommended that measures such as health care costs, patient satisfaction, and staff retention would be important to track.
  - HEALTH COSTS in AMOS did not increase in the first year, and were reduced in the second year, largely explained by a decrease of inpatient hospitalization. (4)
  - AMOS patient satisfaction was high. (3)

### ***What are the Objectives for this RE Workshop?***

Our Part I Course is reaching out to nursing assistants, nurses and interested physicians who care for hospice and palliative care patients.

Students will be introduced to the theory of rhythmical and life processes through instruction and practice and will learn:

- The qualities of rhythmical touch and how to provide them.
- The meaning of the warmth organism and its importance in therapy.
- Application of the rhythmical qualities in other nursing situations.
- Indications and contraindications of Rhythmical Einreibung.
- Rhythmical Einreibung of the sitting back, legs and feet.

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