


**Scent-sational  
Implementing a Successful  
Aromatherapy Program in your  
Institution**  
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- Coordinator Mather Hospital Northwell  
Health Chronic Pain NP Service  
June 1, 2018



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
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**Conflicts of interest/disclosures**  
- None



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
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**Objectives of program**

Participants will be able to:

1. Discuss Pain management THEN....and NOW
2. Discuss the benefits of aromatherapy in an acute care setting
3. Review the challenges associated with implementing an aromatherapy program in an acute care setting
4. List the key concepts in the clinical use of essential oils and their potential use within a health care
5. Essential Oil pharmacology
6. Examine protocols and policies for integrating aromatherapy into practice in an acute care setting



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### Mather Hospital Northwell Health (Mather)


- 248-bed, Magnet designated, non-profit community teaching hospital
- Suffolk County, NY
- Magnet designated facility
- Exemplar for nursing research activities from ANCC as a result of the re-designation for Magnet status in April 2018.

Mather's commitment to nursing research is apparent through the allocation of resources for the nurse researcher which includes:

- Full-time doctoral prepared nurse scientist
- Full-time nursing statistician
- Part-time librarian and nurse researcher
- Mather's Magnet model supports the vibrant nurse research council which meets monthly to support research activities.

Mather serves the residents of Suffolk County, drawing primarily from the north and central portions of the Town of Brookhaven.

- Nearly 80 percent of the patients discharged from Mather Hospital reside in 20 zip codes located no more than 10 miles from the hospital.
- In 2016 - ED logged 41,270 patient visits.
- Out-patient Interventional Pain management center, Back and Neck Pain center, and out-patient physical therapy program
- In-patient "chronic pain management" NP Service
- Interdisciplinary Pain and Integrative Practice Committee



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[http://www.northwell.org/2013\\_04\\_21\\_100143.html](http://www.northwell.org/2013_04_21_100143.html)

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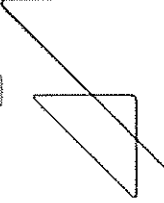
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## Pain management THEN....and NOW



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Mark Day, MD

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We should appreciate the Here and Now cause it's only here now!




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### Aromatherapy

- Defined as the intentional use of Essential Oils (EO) to promote or improve health, well-being and hygiene.
- Aromatherapy uses volatile concentrates extracted from plants, called Essential Oils (EO), which are natural chemical compounds, complex and highly volatile characterized by a strong aroma and produced as secondary metabolites of aromatic plants
- Aromatherapy refers to the medicinal or therapeutic use of essential oils absorbed through the skin or olfactory system (Shaheen E. Lakhani, 2016)
- The term "Aromatherapy" was first used in 1928 by French perfumer Rene Maurice Gattefossé.
- Reports in the literature state that in his initial studies with EO for perfumes, Gattefossé would have gone through a working incident. After a burn in his hands during a distillation process in the laboratory, feeling pain, he plunged the affected area in the near jar containing lavender oil.
- He perceived that in addition to the almost immediate relief from painful sensation, the wound healed quickly, almost without any scars left

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### Historical Use of Aromatherapy

- Essential oils have been used for centuries with the earliest reference around 4500 B.C.3
- Aromatic plants and oils were written in Egyptian hieroglyphics.
- Egyptians used essential oils for perfume, sacred ceremonies, dental pain, and health and wellbeing.
- Aromatic plants are mentioned in the Holy Bible, the Qur'an, and the Torah.
- "The way to health is to have an aromatic bath and a scented massage every day." –Hippocrates (460-370BC)
- In the 1980's, aromatherapy began to grow in popularity in the United States.
- The National Association for Holistic Aromatherapy was founded in 1990.
- Today, aromatherapy is fairly well-established in many countries worldwide, but regulations, and practices vary.

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### Aromatherapy has always been a Nursing Intervention

- Florence Nightingale was a pioneer in Nursing when she introduced EO in the care process.
- She used the essential oil lavender (*Lavandula angustifolia*) for wounded soldiers during the Crimean War in order to calm them
- First aromatherapist Nurse was Marguerite Maury, currently seen as an icon of modern Aromatherapy.
- Born in Austria in 1895, Graduated in Nursing and surgical assistant - moved to France, where she came into contact with Aromatherapy.
- Recognized as a reference in Aromatherapy because she integrated the principles of holistic Nursing, the preparation of individual therapeutic prescriptions EO, massage and developing the idea that a blend (mixture) of single EO could be developed for each person
- She demonstrated the performance of EO on the nervous system, especially in the Ulnic System
- Best known as a biochemist rather than a Nurse.




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**AROMATHERAPY IN NURSING: THEORETIC FRAMEWORK**

- Using EO is in accordance with the practical philosophy of the theories and the ethical principles that composes Nursing, allowing the integration of Aromatherapy into the values of our profession.
- Due to the emphasis on individual choice and uniqueness, choosing an essential oil, the Nurse must focus her/his attention in particular interaction with each person, acting as a partner with her/his customer, developing a treatment plan aimed at health promotion and well-being
- Aromatherapy, based on Nursing Theories, should follow the assumption that the EO must support the harmonious Int relationship
  - Florence Nightingale
  - Jean Watson
  - Martha Rogers
  - Comfort Theory, described by Katharine
  - Theory of Interpersonal Relations, deve



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List the key concepts in the clinical use of essential oils and their potential use within a health care

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Essential Oil Pharmacology

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### Clinical Aromatherapy

The use of essential oils (EO) to target specific symptoms.

Goal :

- promote physical, emotional and or spirltual well-being
- Promote relaxation
- Reduce stress or anxiety
- Complement symptom management such as pain or nausea
- The use of essential oils for expected and measurable outcomes (RJ Buckle)



Mathew Hospital Northwest Health

Mathew, Tim

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### Essential Oils

Essential oils are the by-product of water or steam distillation that produces

- Volatile, non-oily liquid = essential oils
- Botanically named
- One pound of any given plant creates one drop of essential oil.
- Over 350 oils marketed
- Vary in price
- Quality=therapeutic value



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### Why do plants make essential oils?

- The function of essential oils in plants is not fully understood.
- Some may protect the plant from being eaten by plant-eating animals or insects by repelling them.
- *Artemisia vulgaris*, Mugwort, repels the mosquito that carries Yellow Fever
- Many animals find the aroma and taste of essential oils repellent.
- Some Essential Oils are thought to promote pollination.
- Odor is thought to be more important to a pollinating insect than color
- Some plants such as *Datura innoxia* or moonflower, produce a narcotic, so the hawkmoth becomes addicted and returns regularly for "fixes".

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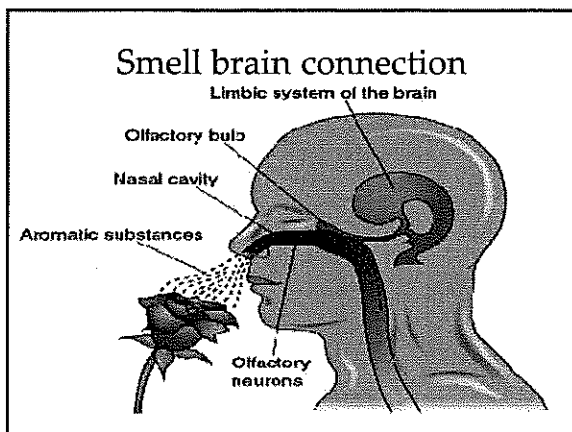
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**Essential oils (EOs)**

- Concentrated hydrophobic liquid containing volatile aroma compounds which are extracted from herbs, flowers, and other plant parts.
- Oil is "essential" in the sense that it contains the "essence of" the plant's fragrance.
- They are recommended for or encouraged to be applied as a complementary therapy for people with anxiety, pain, bipolar disorder, attention deficit hyperactivity disorder, and depression
- EOs can be absorbed into the body by oral administration, inhalation, diffusers, baths, and massages.
- Many studies show that EOs were effective in reducing pain, anxiety, and stress symptoms in animal models and humans with different CNS disorders
- EO constituents belong mainly to two chemical groups: terpenoids (monoterpenes and sesquiterpenes) and some phenylpropanoid derivatives.
- (Z. Wang & T. Heinbockel )

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**Physiological mechanism**

- The of action of essential oils – Aromatherapy - was not well established in the past
- Has been inferred and now supported by research that these molecules produce a system capable of releasing neurotransmitters stimulus, such as enkephalin and endorphins, which generate an analgesic effect and produce a sense of wellness and relaxation
- Researches indicate that the olfactory stimulation produces immediate changes in physiological parameters such as blood pressure, pulse rate, muscle tension, pupil dilation, body temperature, blood flow, electrodermal activities and cerebral activities.
- When an essential oil molecule is inhaled, it crosses the upper respiratory tract, reaching the lower airways where it is absorbed by the pulmonary blood vessels and spread in the body through the bloodstream to organs and tissues
- When administered it through the skin, the molecules penetrate the skin or mucous membranes, where they are absorbed and distributed throughout the body tissues via the bloodstream.
- When ingested, their molecules penetrate the intestinal mucosa, reach the bloodstream and are distributed in the body

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### Essential Oils

- Substances with unique chemical properties due to the characteristic of being made of numerous substances, which give them peculiarities that cannot be replaced by other synthetic substances, despite the olfactory similarity.
- Synthetic products are called "essences" and act in a restricted manner in the body by the fact they have a particular chemical composition, while the EO act more comprehensively
- The action of an essential oil in the body will depend on the pathways by which the molecules are administered, which can occur through inhalation, ingestion or cutaneous pathways.
- When contact is made through inhalation, the molecules of EO stimulate the olfactory nerves which, in turn, have a direct link to the Limbic System
- Responsible for emotions, feelings and motivational impulses.
- The "olfactory memory" results from an identification olfactory process, a specific aroma associating it with any memories triggered by the Limbic System.

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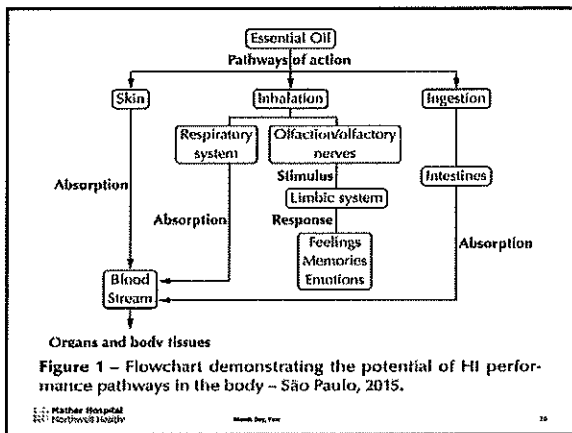
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### EO's for Pain Management

- Recently, many studies have addressed the potential of natural EOs for treatment of anxiety, convulsion, and pain in humans and in rodents or fish neuropathic models, and the mechanisms underlying the pharmacological profile.
- The main constituents of EOs were isolated and chemically elucidated.
- Recent studies indicate that many EOs and their constituents exert pharmacological properties through interactions with the GABAergic system and voltage-gated Na<sup>+</sup> channels.
- An increasing number of studies show that:
  - Many EOs used for the treatment of anxiety affect the function of the GABAergic system
  - Many EOs with antinociceptive and anticonvulsant properties inhibit the function of neuronal voltage-gated Na<sup>+</sup> channels
  - Some EOs affect the function of both the GABAergic system and voltage-gated Na<sup>+</sup> channels

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**Effect on GABA**

- Borneol is a bicyclic monoterpene present in the EOs of numerous medicinal plants, including valerian (*Valeriana officinalis*), chamomile (*Matricaria chamomilla*), and lavender (*Lavandula officinalis*).
- It is used for analgesia and anesthesia in traditional Chinese medicine
- Remarkable anti-hyperalgesic effects on neuropathic and inflammatory pain in animal models
- Both (+)-borneol and (-)-borneol demonstrated a highly efficacious positive modulating action at GABA<sub>A</sub> receptors
- The results suggest that (+)-borneol may ameliorate mechanical hyperalgesia by enhancing GABA<sub>A</sub>R-mediated GABAergic transmission in the spinal cord and could serve as a therapeutic for chronic pain
- In vivo, (+)-borneol displays significant antinociceptive effect in models of chronic pain in mice without producing a motor deficit.
- These findings suggest that borneol may ameliorate mechanical hyperalgesia by enhancing GABA<sub>A</sub>R-mediated GABAergic transmission in the spinal cord and could serve as a therapeutic for chronic pain

(Granger et al.)

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**How do EO's work for pain management**

- Activation of the  $\gamma$ -aminobutyric acid (GABA) receptor system and the blockade of neuronal voltage-gated sodium channels (Na<sup>+</sup> channels) are essential for the overall balance between neuronal excitation and inhibition which is vital for normal brain function and critical for the central nervous system (CNS) disorders.
- It has been suggested that EO constituents could exert their biological activities through modulating the GABAergic system and inhibiting Na<sup>+</sup> channels
- GABA is the major inhibitory neurotransmitter in the CNS and the GABA receptor system exerts a major inhibitory function in the brain.
- The dysfunction or deficiency of the GABAergic system has been implicated in epilepsy, pain, and anxiety
- Neuronal voltage-gated Na<sup>+</sup> channels mediate the propagation of action potentials along axons, and thus, are thought to be important targets of antiseizure drugs.
- Local anesthetics and analgesics prevent the transmission of nerve impulses via their binding to Na<sup>+</sup> channels.
- Two main types of Na<sup>+</sup> currents, termed tetrodotoxin (TTX)-sensitive and TTX-resistant, have been identified in the dorsal root ganglion
- Studies on Na<sup>+</sup> channels have demonstrated a greater involvement of Nav1.7, a predominant subtype of TTX-sensitive sodium channels expressed principally in peripheral neurons, in inflammatory pain and in pain sensation

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**EOs with Antinociceptive and Anti-Inflammatory Activities  
Int. J. Mol. Sci. 2017, 18, 2392**

- EOs that originate from different plants display antinociceptive and anti-inflammatory properties.
- Bergamot (*Citrus bergamia*) is a fruit best known for its EO used in aromatherapy to minimize symptoms of stress-induced anxiety and mild mood disorders and cancer pain
- The antinociceptive effect of EOs of *Salvia sclarea* (clary sage), *Thymus vulgaris* (thyme), and *Lavandula angustifolia* (true lavender), were examined in the capsaicin test
- The capsaicin test in mice is a reliable model of peripheral nociception, which produces nociceptive behavior similar to that elicited by the intraplantar injection of formalin.
- Among these EOs, the intraplantar injection of bergamot EO produced a significant antinociceptive effect in mice [29,47].

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**Antimicrobial effect**

- Some essential oils also have antimicrobial effect
- Role in the cell wall structure of the microorganism, denaturing and coagulating proteins.
- The action would occur because it would alter the permeability of the cytoplasmic membrane
- Due to its lipophilic characteristic
- Interrupting the vital processes of the cell
  - Electron transport, translocation of protein phosphorylation and other enzyme dependent reactions
- Such actions would result in loss of chemiosmosis control of the affected cell, destroying it

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**More on the pharmacology of EOs**

- EOs that originate from different plants display antinociceptive and anti-inflammatory properties.
- EOs from the genus *Artemisia* demonstrated antinociceptive and anti-inflammatory effects. *Artemisia dracunculoides* (tarragon) has been used for the treatment of pain and gastrointestinal disturbances in Iranian traditional medicine (Maham et al.)
- EO from *Artemisia ludoviciana* (Prairie Sage) was also reported to possess antinociceptive activity, which was partially mediated by the opioid system
- Bergamot (*Citrus bergamia*) is a fruit best known for its EO used in aromatherapy to minimize symptoms of stress-induced anxiety and mild mood disorders and cancer pain
- The antinociceptive effect of EOs of *Salvia sclarea* (clary sage), *Thymus vulgaris* (thyme), and *Lavandula angustifolia* (true lavender), were examined in the capsaicin test
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**Linalool**

- Enantiomer monoterpene present in essential oils of various aromatic plants, such as lavender, rosewood and bergamot and possesses several pharmacological activities including anti-inflammatory, anxiolytic, anticonvulsant and antinociceptive
- It is believed that these effects are related to possible inhibition of substance P release or blocking effect on its receptor neurokinin-1 (NK-1).
- In addition, the electrophysiological analysis revealed that (-)-linalool inhibited the field potentials activated by the antidromic stimulation of the hilus, suggesting that this compound affects the activation of the voltage-dependent sodium channels present in the granular neurons of the hippocampal dentate gyrus
- Similar results were observed with the *O. basilicum* leaf essential oil, indicating that both the oil and (-)-linalool display modulatory action on neurogenic and inflammatory pain, and that the antinociceptive effect could be related to reduced peripheral and central nerve excitability

Vasboto, A.M.; Murchio, M.; Graven, C.S.; Melo, M.A.; Saito, M.T.; Oshiro, A.C.; Colman, A.S.; Oliveira, M.E.B.; Alves, P.B.; Pimental, N.C. et al. Osmium basilicum leaf essential oil and (-)-linalool reduce peripheral nociception in rodents: A behavioral and electrophysiological approach. *Bras. J. Pharmacol.* 2011, 31, 104–105. |

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*Mandarin*  
CITRUS DELICIOSA



**Uplifting**

- Calming and uplifting effect
- Relaxation
- Stress reduction
- Nausea
- Difficulty sleeping
- Freshens and deodorizes air

From: peel of the fruit  
Avoid with citrus allergies.

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*Peppermint*  
MENTHA PIPERITA



**Refreshing**

- Decreases nausea
- Relieves sinus/nasal congestion
- Promotes mental alertness
- Deodorizes
- Relieves headaches
- Relaxes smooth muscles

From: stems, leaves

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**Peppermint**

- Menthol (2-isopropyl-5-methylcyclohexanol), which is contained in peppermint or other mint oils, is well-known to induce analgesia by activating the transient receptor potential (TRP) melastatin-8 (TRPM8) channels
- By recording the compound action potentials (CAPs) and examined the effects of menthol and its related compounds on CAP peak amplitude. (-)-Menthol and (+)-menthol concentration-dependently reduced the CAP peak amplitude. (-)-Menthone, (+)-menthone, (-)-carvone, (+)-carvone, (+)-carveol, and (+)-pulegone inhibited CAPs with extents similar to that of menthol
- They found that menthol and its related compounds reduce CAP peak amplitude in a manner specifically related to their chemical structures and that menthol activity is not mediated by TRPM8 channels
  - (Kawasaki et al. )

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# Peppermint

## Peppermint research

- Increased glutathione after radiation
  - Glutathione is the most important antioxidant enzyme found in the body (produced by the pituitary)
- Reduced tension headache
- Reduced irritation
- Increased focus, memory & cognitive function
- Increased athletic performance, productivity, speed and accuracy
- Digestive issues
  - 1 drop of peppermint is equal to 26 cups of mint tea

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# Lavender

LAVANDULA ANGUSTIFOLIA



## Relaxing

- Difficulty sleeping
- Stress reduction
- Relaxation
- Pain
- Headaches

From: flowers, stems, leaves  
High altitude

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# Lavender

- Improved sleep cycle
- Improved cognitive ability & mood
- Reduced blood pressure
- Reduced depression - increased beta waves
- All skin issues

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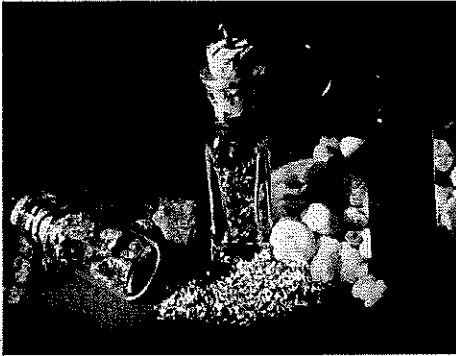
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### Frankincense



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### Frankincense

Frankincense Frankincense (*Boswellia carterii*)

- DNA repair and cancer research
- Protects the nervous system
- Acts upon pathways that regulate emotions
- topical antinociceptive and anti-inflammatory properties of frankincense by inhibiting COX-2 activation
- Reduces depression
- Skin healing properties
- Respiratory support

- Historical Medicine*
- Ancient religious/cultural ceremonies
  - Most prized aromatic gums/resins
  - Given to the Christ child/royalty

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### The Effectiveness of Aromatherapy in Reducing Pain: A Systematic Review and Meta-Analysis

This study found a significant positive effect of aromatherapy in reducing pain. These results indicate that aromatherapy should be considered a safe addition to current pain management procedures as no adverse effects were reported in any of the included studies. Additionally, the cost associated with aromatherapy is far less than the cost associated with standard pain management treatment. Although the present meta-analysis indicates a large positive effect for the use of aromatherapy for pain management, the sample size is small. Given the prevalence of aromatherapy, more research is necessary to fully understand clinical applications for its use.

Lakhan, S. E., Srinivas, H., & Tepper, D. (2016). The Effectiveness of Aromatherapy in Reducing Pain: A Systematic Review and Meta-Analysis. *Pain Research and Treatment*, 2016, 8158693. <http://dx.doi.org/10.1155/2016/8158693>

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Month Day, Year

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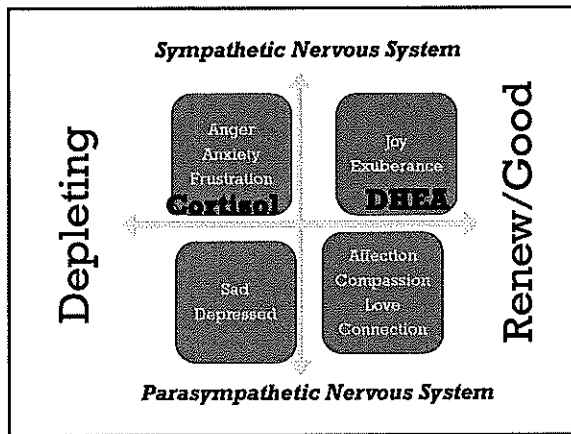
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### Benefits of aromatherapy in an acute care setting

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### Joint Commission 2018 Pain Management Requirements

**Perspectives**

**Joint Commission Enhances Pain Assessment and Management Requirements for Accredited Hospitals**

The Joint Commission announced today its new requirements for pain assessment and management for hospitals. The new requirements are designed to help hospitals improve patient safety and quality of care.

The new requirements are effective January 1, 2018. Hospitals that are not yet accredited will have until June 1, 2018, to meet the new requirements.

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**Contents**

- 1. Introduction
- 2. Pain Assessment
- 3. Pain Management
- 4. Patient Education
- 5. Quality Improvement
- 6. Compliance
- 7. Accreditation
- 8. Contact Information

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**Standard 2**

- The hospital provides non-pharmacologic pain treatment modalities

**Standard PC.01.02.07 #3**

- The hospital treats the patient's pain or refers the patient for treatment. Note: Treatment strategies for pain may include nonpharmacologic, pharmacologic, or a combination of approaches.

**Standard PC.01.02.07 #4**


- The hospital develops a pain treatment plan based on evidence-based practices and the patient's clinical condition, past medical history, and pain management goals.

**Standard PC.01.02.07 #6**

The hospital monitors patients identified as being high risk for adverse outcomes related to opioid treatment.

**Standard PC.01.02.07 #7**

Progress toward pain management goals including functional ability (for example, ability to take a deep breath, turn in bed, walk with improved pain control), Side effects of treatment, Risk factors for adverse events caused by the treatment




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**Bring aromatherapy to a bedside near you!!!**

- You need a plan
- Develop a proposal
- Who's who in your organization
- Stakeholders
- Decision makers
- Who is in your army?
- Where you do you fit?
- Committee, Unit council, Nursing operations???
- Funding

**Start small and dream BIG**




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**SWOT ANALYSIS**

Primary factors

<p><b>S Strengths</b></p> <ul style="list-style-type: none"> <li>Pain Management NP firm service with a passion for enhancing holistic services</li> <li>Magnet Hospital that is a well respected or position in the community</li> <li>CHO sits on the medical board</li> <li>Current research study program that has been ranked by the University and local companies</li> <li>Partnership with other hospitals and community organizations</li> </ul>	<p><b>W Weaknesses</b></p> <ul style="list-style-type: none"> <li>Limited number of non-pharmacologic modalities in use at present time</li> <li>Gap in training for the use of available non-pharmacologic modalities</li> <li>Difficult to provide training to enhance services</li> <li>Medical Record system housing holistic modalities is not linked to other systems</li> <li>Lack of a if of potential funding sources in other departments</li> <li>Lack of support for Pain Service and their patients</li> <li>Researcher/clinician assigned to other areas</li> </ul>
<p><b>P Opportunities</b></p> <ul style="list-style-type: none"> <li>Joint Commission and CDC supports use of non-pharmacologic modalities for control of pain in hospitals</li> <li>Small number of Mather Health who demonstrates acceptance of complementary treatments (Center for Integrative Health)</li> <li>Optimal crisis link to that of pain medication for both patients and providers</li> <li>Professional Organizations offer grant funding for public research</li> <li>MHI has an arm for CAM modalities</li> </ul>	<p><b>T Threats</b></p> <ul style="list-style-type: none"> <li>Our competition offers a wide range of integrative Modalities (Southampton Hospital, MSK, NYC based hospitals)</li> <li>Patients are looking for options and expect healthcare providers to be in the forefront of treatment</li> <li>Joint Commission, Health department, and Board of Nursing regulations on provision of integrative services</li> <li>Employee turnover after training in integrative practices</li> <li>Insurance, Medicare, Medicaid reimbursement</li> </ul>

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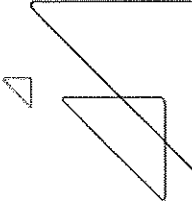
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Examine protocols and policies for integrating aromatherapy into practice in an acute care setting



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**A frequent and considerable concern**

- State boards of nursing are increasingly acknowledging the use of integrative therapies within the scope of nursing practice
- The use of essential oils in a clinical are not FDA regulated and cannot claim to treat disease.
- In a medical facility, they may be used only for very specific indications, and the language surrounding their use must be monitored.
- For example
  - Essential oils can be said to "minimize discomfort" but not to "treat pain"
  - They can be used to "promote a sense of calm and well-being," but not to "treat anxiety."

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**Your policy**

- Who
- What
- Where
- When
- Why
- How
- Documentation

- Support safe and sustainable use of essential oils in hospitals and other health care settings, a well-developed protocol is required.
- It's necessary to have clear guidelines for training staff on the safe use of essential oils, identifying a reputable supplier of therapeutic-grade oils, filing MSD sheets, disseminating plans for rollout of the use of essential oils, determining routes of administration of the oils, and establishing documentation practices.
- Administrative areas requiring formal infrastructure include the following:
  - policy and procedures
  - required approvals from institutional committees, such as the nurse practice committee
  - budget
  - proper storage and handling of supplies

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### Healthcare Implications

- Essential Oil advertisements not following FDA regulations may mislead both the public and healthcare practitioners.
- Aromatherapy practitioners do not want the public to quit taking all of their prescription medications, and rely solely on essential oils.
- Aromatherapy is a great complementary therapy.
- It is important for healthcare providers to know what their clients are using (herbs or essential oils) – including: company, amount, frequency, length of use.
- This is very important.
- For example:
  - If you are taking Warfarin, do not use the essential oil of Wintergreen.
  - If you are taking Salicylates, do not use the essential oil of Wintergreen.
  - If you have a history of hormone-linked cancer, do not use the essential oil of Clary Sage.
  - If you have HTN – no Spiked Lavender

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### SAFETY

- Since essential oil manufacturers are not regulated by the U.S. Food and Drug Administration (FDA) or any other regulatory body, it is the responsibility of the practitioner to investigate any supplier from which an essential oil is obtained to ensure that the oil has a known botanical origin, is of high quality, and has been tested for chemical makeup between batches.
- Without standardization, it's impossible to guarantee the therapeutic value and safety of any product.
- Practitioners need to be vigilant to avoid acquiring adulterated essential oils. Adulteration, the practice of adding extraneous and possibly harmful substances such as ethanol, mineral oil, glycol, and others to a solution to increase the profit margin, is common among disreputable manufacturers.
- Adulteration of an oil with such substances increases the risk of adverse reactions, typically skin reactions.
- Because lavender and tea tree are popular oils with a tremendous presence in the marketplace, they are frequent targets of adulteration.

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### The problems researchers face.

- In response to criticism, aromatherapy practitioners have countered that the gold standard randomized controlled trial may be an impractical means of studying essential oils, as it is impossible to blind study participants to aromas.
- Furthermore, practitioners and patients who use essential oils argue that the randomized controlled trial doesn't capture the "essence" of aromatherapy, often described "in esoteric terms as 'energies,' 'vibrations,' 'subtle effects.'"
- Aromatherapy involves the impact of caring and compassion on both the patient and caregiver
- In addition, professional, certified aromatherapy practitioners generally have little training in research methodology.

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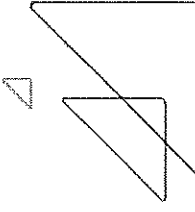
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Review the challenges associated with implementing an aromatherapy program in an acute care setting



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Month, Day, Year

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**Pain Committee**

Morphed into the Interdisciplinary Pain/Holistic Nursing Council January 2016  
 Changed again to Interdisciplinary Pain and Integrative Practice Committee in February 2018 and continues to encourage an interdisciplinary attendance at our monthly meetings.  
 We are striving to incorporate effective, evidence based interventions for the relief of pain and suffering which relies heavily on non-pharmacologic and mind-body techniques (new CDC Guidelines)

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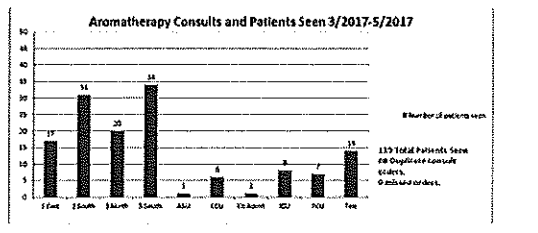
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**Mather Hospital Aromatherapy consults**

Aromatherapy Consults and Patients Seen 3/2017-5/2017



Month	Number of Patients Seen
March	14
April	31
May	20
June	35

113 Total Patients Seen  
 68 Outpatient consults  
 64 Inpatients  
 0 miscellaneous

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**Please enjoy the use of your own personal aromatherapy inhaler**

- > If you are allergic to lavender or mandarin or peppermint – do not take the aromastick you are allergic to.
- > Refer to the safety instructions provided with your aromastick
- > Do not share with pets unless approved by your veterinarian
- > Do not share with children unless approved by your pediatrician
- > Do not use if you are pregnant unless cleared by your OB/GYN
  
- > DO...
- > Use your aromastick with intention
- > Allow yourself to experience the positive benefit of aromatherapy
- > Take time for your self and practice self-care
- > If you don't allow your self the time to nurture and honor you – how can you expect your patients and those for whom you care for to do the same for themselves
- > SET A GOOD EXAMPLE

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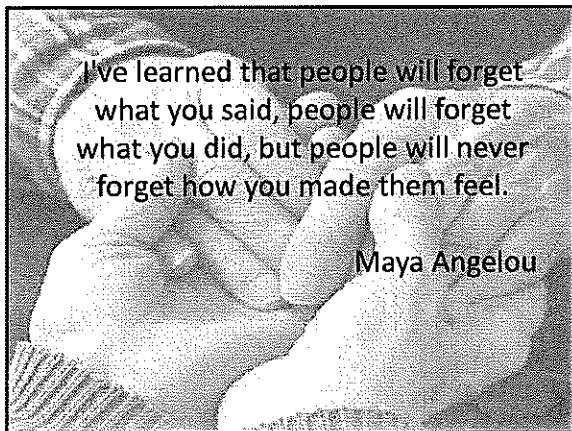
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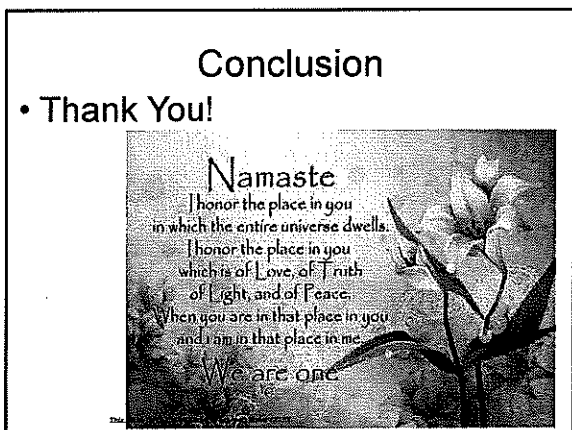
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