

Aromatherapy is given a nod of validity through modern over-the-counter remedies. We all know certain medicines have specific smells, albeit at this time often synthetic: Tummy problems use Pepto-Bismol or Tums, both have a peppermint flavor (Peppermint oil is used for digestion); Chest cold go for Vicks which has a distinct smell (Rosemary and eucalyptus are used for upper respiratory issues); night-time baby bath and lotion are in light purple bottles with a familiar smell (Lavender can be calming/sedative); and after a 5K run, lather on some Ben-gay which is pungent (Wintergreen, eucalyptus and peppermint can soothe the muscles). Those associative smells help sell the products. These "man-made" products took over when synthetic replacements became cheaper and more effective than their plant based predecessors. As modern medicine has evolved so has the essential oil industry. The oils of today are exponentially more powerful and pure than they were previously.

Like medicines, essential oils use multiple modalities. The field is called "Aromatherapy" which piggy backs on the ability of the "aroma" of some of the oils to cause emotional responses often due to the ability of the small lipid soluble molecule to penetrate cells and the blood brain barrier. We all know that a certain smell might bring us back to our mother's kitchen or an old friend. I know evergreen goes with Christmas and gun power with the Fourth of July. I smile when I smell them both. There is much bio-chemistry behind that phenomenon. In fact, there is some science behind scented candles and fragrant incense. But essential oils are also used topically and in some cases, internally.

Consider smoking cigarettes and trying to quit. One smokes and inhales the tobacco. When trying to quit, the smoker might chew gum (internal) or wear a patch (topical). The greatest times of temptation will be when in a room with smoke – remembering the smell or inhaling the tobacco.

Consider vaccines or allergies. Vaccines need to get into the blood stream. At one point they were given orally, then by a shot, and now there is a nasal spray even for the flu vaccine. <http://www.cdc.gov/flu/about/qa/nasalspray.htm> For those with peanut allergies, inhalation or consumption of a nut is life threatening. However, touching one is not always a problem (although most definitely is for some). If exposed a shot or pill might stop the reaction. A new dermal patch has also shown success in testing for peanut allergies. <http://www.today.com/health/peanut-patch-may-protect-against-life-threatening-allergy-2D80506626>

For pneumonia one might take a pill, some cough syrup, place Vicks on their chest, and inhale eucalyptus in steam. If someone throws up or has a cough, we might spray Lysol on the surface when cleaning or in the air. We understand airborne pathogens and the potential infectiousness of body fluids.

You might not be familiar with the field of Aromatherapy per se, but I'd be willing to guess that most people are familiar with the underpinnings of the wisdom which crossover to our markets today.

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