

Ontario College of Reflexology

History and Theory of Hand Reflexology

N201 - Hand Reflexology Course

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History of Hand Reflexology

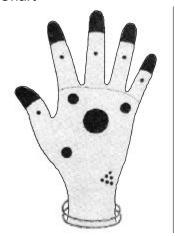
he oldest documentation of the use of reflexology is found in Egypt. Early Egyptian artists observed and recorded scenes of daily life, which included the medical practices of the times. Ed and Ellen Case of Los Angeles toured Egypt in 1979. During their travels, they discovered and brought back an ancient Egyptian papyrus scene depicting medical practitioners treating the hands and feet of their patients in approximately 2,500 BC. The tomb of Ankhmahor (a physician of high esteem) at Saqqara is where the scene depicting the practice of reflexology is to be found.

Figure 1-1 - Egyptian Papyrus



A hand chart as shown in Figure 1-2, from India (circa 1900), depicts the zones which are known as cross-points of the cosmos and also as chakras.

Figure 1-2 - India Hand Chart



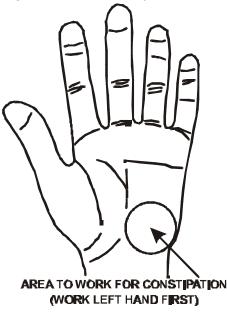
Dr. William Fitzgerald (1872 - 1942) is credited with being the father of modern reflexology. His studies brought about the development and practice of reflexology in the United States.

In the early years, Dr. Fitzgerald worked mainly on the hands, and only later with the feet. The feet became very popular, and over the years, hand reflexology was not used very much. In his book on zone therapy in 1917, Dr. Fitzgerald spoke about working on the palmar surface of the hand for any pains in the back of the body, and working on the dorsal of the fingers for any problems on the anterior part of the body. The distal joints were squeezed, then the medial, and then the proximal joints by clasping the hands. Dr. Fitzgerald said he could cure lumbago with a comb. His advice was to press its teeth in the base of the palm beneath the second and third fingers.

Dr. Fitzgerald related the story of *Signor Umberto Sorrentino*, a noted tenor, who claimed to be able to relieve the tightness in his throat by squeezing the lateral aspect of his forefinger and the thumb, as these points helped and governed the vocal cords. Another remarkable hand reflex that Dr. Fitzgerald found was for helping morning sickness in pregnancy, or for stomach upset generally. This was by working the first and second zones on the backs of the hands with deep pressure, and also the palmar surface of the wrist and forearm. He spoke further of finger squeezing for eye and ear troubles. Thyroid problems were also helped, he said, by pressing upon the joints of the thumb, first and second fingers.

Early pioneers involved with Hand Reflexology include Dr. Harvey Lampell, a podiatrist from San Francisco, California (Figure 1-3) and Dr. Joe Shelby Riley of Washington, D.C. (Figures 1-4 and 1-5). Eunice Ingham and Mildred Carter have also published books on hand reflexology.

Figure 1-3 - Dr. Harvey Lampell



DR. HARVEY LAMPELL

Dr. Harvey Lampell, who practises in San Francisco, recommends that one start on the foot or hand that corresponds to the side of the body with the least symptoms. In this way, by the time one has worked on the other foot, or hand, many of the symptoms will have been lessened.

Figure 1-4 - Dr. Shelby Riley



Figure 1-5 - Dr. Shelby Riley



Dr. Joe Shelby Riley was taught zone therapy by Dr. Fitzgerald. Dr. Riley used Fitzgerald's method extensively in his varied practice for many years. He carried the techniques out to finer points and made the first detailed diagrams and drawings of the reflex points located on the feet and hands. He added to Fitzgerald's longitudinal zones with his discovery of eight (8) horizontal divisions which also govern the body. His first book, Zone Therapy Simplified was published in 1919. During his lifetime, he wrote four (4) books in which a large portion of space was devoted to zone therapy. In addition, he wrote several correspondence courses on the subject and, in all, brought out twelve (12) editions of his various works.

Theory of Reflexology

and Reflexology

Hand Reflexology shares the same theory and benefits as Foot Reflexology in the N101 Foot Reflexology course.

hat Is Reflexology?

Reflexology is a focussed pressure technique, usually directed at the feet or hands. It is based on the premise that there are zones and reflexes on different parts of the body which correspond to and are relative to all parts, glands and organs of the entire body.

ow Does It Work?

When the reflexes are stimulated, the body's natural electrical energy works along the **nervous system** to clear any blockages in the corresponding zones. A reflexology session seems to break up deposits (felt as a sandy or gritty area under the skin) which may interfere with the flow of the body's electrical energy in the nervous system.

Manipulating specific reflexes removes stress, activating a parasympathetic response in the body to enable the blockages to be released by a physiological change in the body. With stress removed and circulation enhanced, the body is allowed to return to a state of **homeostasis**.

Homeostasis is the "automatic" process that the body incorporates to bring it back to the "normal" state. For example, if the blood pressure is abnormal, the kidneys will secrete the hormone, erythropoietin and the enzyme, renin to regulate the blood pressure back to the proper level.

hat Are the Benefits?

Reflexology demonstrates four (4) main benefits.

- 1. Relaxation with the removal of stress.
- 2. Enhanced circulation.
- 3. Assists the body to normalize the metabolism naturally.
- 4. Complements all other healing modalities.

R eflexologists Do Not:

- 1. Diagnose medical conditions unless qualified to do so.
- 2. Prescribe medications unless qualified to do so.
- 3. Treat for specific conditions except in emergencies.
- 4. Work in opposition to the medical or other fields.
- 5. Encourage the client to cease taking their prescribed medication.

Reflexologists do not diagnose medical conditions unless qualified to do so. The only diagnosis made is a "tender reflex." A reflexologist will refer to other qualified health care practitioners when services required are outside the reflexologist's scope of practice.

Similarly, **reflexologists do not prescribe medications unless qualified to do so**. The therapeutic intervention is limited to "working the reflexes."

Practical Applications:

When to Use Hand Reflexology:

and Reflexology can be used alone or in conjunction with a foot reflexology session.

Hand Reflexology can be used:

- 1. as an alternate or referral area where a foot condition exists that should not be worked on:
- 2. as a supplement to a foot reflexology session in cases such as an amputated foot or feet;
- 3. as an adjunct to complement foot reflexology or other health modalities;
- 4. as "assigned homework" as suggested by the reflexologist for the client to help alleviate his or her condition(s) between reflexology sessions.

Frequency of Visits:

hen a client asks when the next visit will be, the reflexologist explains to the client that the benefits of the session will go on working for five or more days. Beyond this, the reflexologist cannot guess the client's requirements. The frequency of the client's next visit(s) will be determined by the client based on their requirements and expectations. The client may decide to return in a week, a month or six months. The reflexologist has no way to measure how much stress the client has gathered or the state of their health since the last visit

Length of Session:

A complete session is performed on both hands unless it is used as an adjunct to a foot reflexology session. Depending upon the reflexologist's level of experience and the client's requirements, complete hand reflexology sessions will last between 45 and 60 minutes. If used as an adjunct to complement a foot reflexology session, factor in approximately 15 to 30 minutes to a regular foot reflexology session.

Pressure:

Reflexes are worked according to the body's requirements. Stress removal is the first priority; followed by enhanced circulation with attention paid to reflexes relative to body requirements. Pressure exerted by the reflexologist usually ranges from 0 to 10 or 20 pounds. Common sense dictates when less pressure is required.

A firm pressure is used when working the reflexes on the palmar side of the hands. On the dorsal side, less pressure is used because of the presence of many tendons which can become painful if worked on too hard. We work within the pain threshold of the client. As an indicator, use a scale from 1 to 10, with 1 being sensitive and 10 being painful. Encourage the client to let you know when they experience any discomfort, and adjust your pressure accordingly. Reflexology is not meant to inflict pain. You can test this on yourself by applying pressure on your arm until it becomes uncomfortable

How Much Pressure?

Pressure used in reflexology ranges from 0 to 10 or 20 lbs. Try pressing on a bathroom scale with your finger or thumb to get a feel for the pressure required.

Communication with the client is essential. Ask whether the pressure is too light or too great. It is important to remember that when tender reflexes are located, they must be worked with a degree of pressure to effect the desired result. Massaging or pampering the hand may feel good but does nothing to stimulate the reflexes and to assist the body's natural response to normalize the metabolisms. Well-worked reflexes prove to the client the necessity of pressure by the process that homeostasis has brought to the body. The reflexologist always works within the pain tolerance threshold of the individual.

Tenderness:

What affects tenderness?

- 1. *Injury*.
- 2. *Surgery* both pre-surgery and post-surgery.
- 3. General or specific *stress* (more than 80% of North American disease is related to stress). Stress can affect all reflexes.
- 4. *Drugs* prescription or non-prescription. They may numb reflexes.
- 5. *Illness*.
- 6. *Hand Conditions*: eczema, callouses, arthritis, etc.

Therapy Setting:

The optimum location is a quiet, relaxing environment with the client comfortably seated. A recliner chair is most suitable as the reflexologist and the client can see eye-to-eye. Have a pillow for the client's arm to rest comfortably on when administering a hand reflexology session. In reality, reflexology can be administered anywhere - sitting up or lying down. Receiving the therapy when necessary is more important than waiting for optimum session conditions.

Client's Responsibility

- 1. The client practises cleanliness.
- 2. The client removes hand jewellery if possible.
- 3. The client sits comfortably in a reclining chair for the session for eye-to-eye contact with the reflexologist.
- 4. The client gives the reflexologist a completed Reflexology Health Record and accepts responsibility for the session
- 5. The client tells the reflexologist the pain tolerance threshold.
- 6. The client is encouraged to rest upon returning home while the body is in the *parasympathetic response*.
- 7. The client is encouraged to practise "assigned homework" as suggested by the reflexologist between sessions.

Reflexologist's Responsibility

- 1. The reflexologist practises hand cleanliness.
- 2. The reflexologist keeps finger nails trimmed.
- 3. The reflexologist keeps long hair under control and is aware of any jewellery that may retard the session.
- 4. The reflexologist provides a professional and comfortable environment.
- 5. The reflex ologist provides warmth, tissues and wet-cloths for the client's requirements if necessary.
- 6. Relaxing music may be played.
- 7. A Reflexology Health Record is taken and the client signs a consent or waiver on the form accepting responsibility for the session.
- 8. It is the responsibility of the reflexologist to keep all client records and sessions **confidential**. Records are to be dated and recorded in ink only.
- 9. The client's bare hands are worked on (feet where necessary).

- 10. A thorough hand examination is done by the reflexologist.
- 11. Conversation is encouraged and the reflexologist is a good listener (Reflexologists are not psychologists).
- 12. The reflexologist works within a time frame by which the client does not feel rushed and has time for questions.
- 13. Use of oils or creams on the hands **are discouraged** due to possible allergies and common usage of the hands.
- 14. The reflexologist documents the results of the reflexology session.

Occupational Hazards

eflexologist-related injuries can result if proper techniques are not practised:

- 1. The finger nails of a reflexologist's hands usually grow faster than normal due to the stimulation of the fingers during a session.
- 2. Contagious disease can be collected beneath the reflexologist's finger nails if not washed properly after each session.
- 3. Long finger nails can inflict scratches or cuts on the client's hand.
- 4. Cuts or open sores on the reflexologist's hands could expose the reflexologist to any pathological conditions that may be present on the client's hand.
- 5. **Carpal Tunnel Syndrome** can result if the reflexologist strains the hands, fingers and wrists. Take frequent breaks and exercise as often as necessary.
- 6. Improper posture will result in discomfort or pain in the shoulders, neck and arms.
- 7. Lack of back support can result in low back and/or hip pains.
- 8. Cleanliness of the work environment and supplies are very important to prevent contamination of both reflexologist and client.





Chapter Summary

History of Reflexology

- C Oldest documentation of reflexology was found in Egypt in approx. 2,500 BC in an ancient papyrus scene depicting reflexology. Figure 1-1.
- A hand chart from India, circa 1900, depicts the zones which are known as cross-points of the cosmos and also as chakras. Figure 1-2.
- C Dr. William Fitzgerald, "father of modern reflexology," introduced reflexology in the United States.
- C Dr. Fitzgerald worked mainly on the hands and then the feet later on.
- C Foot reflexology became more popular than hand reflexology.
- C Dr. Fitzgerald used instruments such as a comb.
- C A noted tenor claimed to relieve throat tightness by squeezing the lateral aspect of the forefinger and the thumb.
- C Dr. Fitzgerald was able to help morning sickness, upset stomach, and thyroid problems.
- C Early pioneers of Hand Reflexology include Dr. Harvey Lampell and Dr. Joe Shelby Riley.
- C Eunice Ingham and Mildred Carter have also published books on hand reflexology.
- C Dr. Lampell recommends that the reflexologist start on foot or hand of the side of the body with the least symptoms. Figure 1-3.
- C Dr. Joe Shelby Riley was taught zone therapy by Dr. Fitzgerald.
- C Dr. Riley developed detailed diagrams and drawings of the reflexes on the feet and hands. Dr. Riley added to Dr. Fitzgerald's longitudinal zones with his discovery of 8 horizontal divisions which also govern the body. Figures 1-4 and 1-5.

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How Does It Work?

When the reflexes are stimulated, the body's natural electrical energy works along the **nervous system** to clear any blockages in the corresponding zones. A reflexology session seems to break up deposits (felt as a sandy or gritty area under the skin) which may interfere with the flow of the body's electrical energy in the nervous system.

Manipulating specific reflexes removes stress, activating a parasympathetic response in the body to enable the blockages to be released by a physiological change in the body. With stress removed and circulation enhanced, the body is allowed to return to a state of **homeostasis**.

Homeostasis is the "automatic" process that the body incorporates to bring it back to the "normal" state. For example, if the blood pressure is abnormal, the kidneys will secrete the hormone, *erythropoietin* and the enzyme, *renin* to regulate the blood pressure back to the proper level.

Four (4) Benefits of Reflexology:

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Practical Applications:

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C Hand Reflexology can be used alone or in conjunction with a foot reflexology session.

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- as an adjunct to complement foot reflexology or other health modalities;
- as "assigned homework" as suggested for the client to help alleviate his or her condition(s) between reflexology sessions.

Frequency of Visits:

- C The benefits of a session will usually go on working for 5 or more days.
- C The frequency of the client's next visit(s) will be determined by the client based on their requirements and expectations.

Length of Session:

A complete session is performed on both hands unless it is used as an adjunct to a foot reflexology session. A complete hand session will last between 45 and 60 minutes. If used as an adjunct, factor in approx. 15 to 30 minutes to a regular foot reflexology session.

Pressure:

- Work within the client's pain tolerance with exerted pressure which ranges from 0 to 10 or 20 pounds.
- C A firm pressure is used when working the reflexes on the palmar side of the hands. **Less pressure is used on the dorsal side** because of the number tendons present which can become painful if worked on too hard.
- C The client should tell the reflexologist their pain threshold level of their tender reflexes.
- Reflexes are worked according to the body's requirements.

Tenderness:

- C Stress
- C Surgery
- C Injury and illness
- C Drugs
- C Hand conditions eczema, callouses, arthritis, etc.

Therapy Setting:

- C Optimum location is a quiet, relaxing environment.
- C A recliner chair is most suitable for eye-to-eye contact.
- Use a pillow for the client's arm to rest comfortably on.
- C Reflexology can be administered anywhere and anytime.

Client's Responsibility:

- 1. Client practises cleanliness.
- 2. Client removes hand jewellery if possible.
- 3. Client sits comfortably in a reclining chair for eye-to-eye contact with the reflexologist.
- 4. Client gives the reflexologist a completed Reflexology Health Record and accepts responsibility for the session
- 5. Client tells the reflexologist the pain tolerance threshold.
- 6. Client is encouraged to rest upon returning home while the body is in the *parasympathetic response*.
- 7. Client is encouraged to practise "assigned homework" as suggested by the reflexologist between sessions.

Reflexologist's Responsibility:

- 1. Practises hand cleanliness.
- 2. Keeps finger nails trimmed.
- 3. Keep long hair under control and is aware of any jewellery that may retard the session.
- 4. Provides a professional and comfortable environment.
- 5. Provides warmth, tissues and wet-cloths for the client's requirements if necessary.
- 6. Relaxing music may be played.
- 7. A Reflexology Health Record is taken and the client signs a consent or waiver on the form accepting responsibility for the session.
- 8. All client records and sessions are kept **confidential**. Records are to be dated and recorded in ink only.
- 9. The client's bare hands are worked on (feet where necessary).
- 10. A thorough hand examination is done by the reflexologist.
- 11. Conversation is encouraged and the reflexologist is a good listener. (*Reflexologists are not psychologists*).
- 12. Works within a time frame by which the client does not feel rushed and has time for questions.
- 13. Use of oils or creams on the hands **are discouraged** due to possible allergies and common usage of the hands.
- 14. The results of the reflexology session are documented

Occupational Hazards:

- 1. The finger nails of a reflexologist's hands usually grow faster than normal due to the stimulation of the fingers during a session.
- 2. Contagious disease can be collected beneath the reflexologist's finger nails if not washed properly after each session.
- 3. Long finger nails can inflict scratches or cuts on the client's hands.
- Cuts or open sores on the reflexologist's hands could expose the reflexologist to any pathological conditions that may be present on the client's hands.
- 5. **Carpal Tunnel Syndrome** can result if the reflexologist strains the hands, fingers and wrists. Take frequent breaks and exercise as often as necessary.
- 6. Improper posture will result in discomfort or pain in the shoulders, neck and arms.
- 7. Lack of back support can result in low back and/or hip pains.
- 8. Cleanliness of the work environment and supplies are very important to prevent contamination of both reflexologist and client.









		Student Na	ame:
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and		on different parts of the body wh	nich correspond to and are relative to all
		and	of the entire body.
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Reflexologis	sts Do Not:		
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" True " I	-aise	blockages in the corresponding	0, 0
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" True " I	alse	- Only reflexologists can prescril	be medications.
" True " I	alse	- Dr. Lampell developed 8 horizo	ontal divisions on the hand and foot charts.
" True " I	alse	- Reflexologists can determine t	the frequency of visits.
" True " I	alse	- A complete hand session can t	take as little as 30 minutes.
" True " I	alse	- Pressure on the reflexes can b	pe as much as 50 pounds.
" True " I	alse	- Stress can affect the tenderne	ess of the reflexes.
" True " I	-alse	- The use of a pillow can be ben	neficial for the client to rest their arm on.
" True " I	-alse	- Less pressure is used on the p	palmar aspect of the hands.
" True " I	alse	- Assigned homework on the hands is a necessity between reflexology session	
" True " I	alse	- A thorough hand examination is done by the reflexologist.	
" True " I	-alse	- Hand reflexology is used where worked on.	e a foot condition exists that should not be
" True " I	alse	- Strain on the hands, fingers, a	nd wrists may cause Carpal Tunnel Syndroi
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