

## Shiatsu and Pain Management

Andrea Barr, MRSS, has taken over over Mike Lowe, a Shiatsu practitioner and nurse, in delivering Shiatsu as part of the pain management team at Boston Pilgrim Hospital in Lincolnshire. Andrea is part of a multi-disciplinary team working with people with any type of chronic pain. Patients are referred by either their GP or more commonly a consultant. The doctors in charge of the team determine an appropriate treatment programme for them.

Patients referred for Shiatsu receive a series of six sessions and then return to the doctor for re-evaluation. This can lead onto further Shiatsu treatment. Andrea says patients often return for more sessions. “The pain has usually been long-term and it can take a while to fully respond to treatment.”

Andrea’s patients have a wide range of conditions but the most common is **fibro-myalgia**. She finds that most back pain has a significant emotional aspect and is interested in the way Shiatsu can work with this. Whilst sometimes Shiatsu leads to complete pain relief often it doesn’t completely take the pain away but patients find they can deal with the pain better. She works with the patients on things they can do to support themselves and finds they respond well to this empowerment.

The Shiatsu sessions are fully integrated into the hospital service and Andrea completes notes on the patients’ files and writes to their GP to update them on the treatment that has taken place. She also attends the regional pain management team meetings which give an opportunity to share information with teams working in other local hospitals.

Andrea is starting to find doctors using language more commonly associated with treatments such as Shiatsu when they refer patients, a recent example being a doctor sending someone to her as the patient seemed to have ‘some energy stagnating’.

The pain management team has recently introduced a group treatment session run by Andrea, this is expected to develop into 2 groups of 10 people in each. Andrea will work with patients on a range of self-help approaches based on Shiatsu techniques, breathing exercises and stretches.

Doctors at the hospital are recommending Andrea to the National Pain Society, recognition of the value they place on her work.

### RESEARCH:

#### Acupressure for Pain

Research: Pre-hospital Acupressure Relieves Pain

By Deborah Valentine Smith, Dipl. ABT (NCCAOM), AOBTA®-C1

Researchers at the University of Vienna Department of Anesthesia and Intensive Care conducted a study with the Vienna Red Cross to determine if acupressure applied by paramedics for minor trauma (simple fractures, small wounds and contusions) was effective. Patients were given acupressure after their blood pressure and heart rate were measured and initial medical intervention had been given at the site. They were asked to rate their pain and anxiety and their belief in acupressure for treatment. They then were given “true acupressure” or “sham acupressure” for 3 minutes or no acupressure at all. The paramedic applying the acupressure was not aware that one form of acupressure was “sham” only that there were two acupressure techniques using different points. After arrival at the hospital, follow-up data was collected out of his/her presence. Belief in acupressure did not differ significantly among the three groups.

The researchers reported that “After treatment the three groups differed in a highly significant way in pain, anxiety, and heart rate. In summary, our results could show that acupressure is an effective and easy-to-learn treatment for pain in first aid and emergency trauma care. We recommend this technique for emergency physicians and also for non-academic personnel, such as nurse, paramedics, fire fighters, or emergency medical technicians.”

The study: Alexander Kober, M. D., Thomas Scheck, M.D., Manfred Greher, M.D., Frank Lieba, Roman Fleischhackl, Sabine Fleischhackl, Frederick Randunsky, and Klaus Hoerauf, M.D., *Anesthesia & Analgesia*, 2002, Issue 95, pp. 723-727.