THE LINK — NEWSLETTER

Issue 49 Autumn 2016



- We are all human 2016 Conference report
 - Acupuncture Case Study
 M Technique
- Abdominal massage for the relief of constipation
 - Velindre Cancer Centre award

from the editor

Dear Reader,

Firstly, I would like to join all the members of NACTHPC in thanking the Joint Chairs, Sarah Holmes and Gaenor Evans, for their dedication and service to our members. But now someone else must "take up the baton" (– relax, it's not Donald Trump). We proudly welcome Elisabeth Nuttall as our new Chair and Sally Woods as Vice Chair. I also would like to thank those who continue to serve on the Committee, and particularly the delegates and indeed reviewers of the conference for providing material, support and feedback. Finally, I really want to thank our speakers for the excellent job they have done talking about 'Sexuality and Changing Relationships at End of Life' especially our inspirational Keynote Speaker, Bridget Taylor, and indeed Lorraine Grover.

Over the past 3 years, NACTHPC has evolved to become a Committee involved in sharing best practice and showcasing all the wonderful work that we undertake. For us, it is important that what our members have to communicate is shared among us all. Articles are welcomed in multiple areas. We are not accumulating many case reports or reviews of study days or relevant new publications that were originally submitted to the previous editorial team, and I ask our readers to help us to explore new ways to make *The Link* useful: please share your ideas and thoughts with us. We look forward to hearing from you soon.

Jo Dorling – Editor, The Link Email: nacthpceditor@hotmail.co.uk

Please send all contributions to NACTHPC either by post or by e-mail:

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YOUR LINK NEEDS YOU!

The Link is YOUR newsletter and I need YOUR contributions!

If you can provide an insight into your therapy; or would like to write an article on complementary therapy; or report on events that have happened in your region; an experience you would like to share or send in some poetry then I need to hear from you.

Please send all contributions to NACTHPC either by post or by e-mail

THANK YOU

Inside this issue:

Letter from the Chair	1
South West Regional Group	1
Velindre Cancer Centre award	1
We are all human – 2016 Conference Report	2
Abdominal massage for the relief of constipation	4
Case Study: acupuncture to treat a 44 year old woman with breast cancer suffering with hot flushes	5
The 'M' Technique® is in safe hands	6
Nicky Forbes Communications Lead	6
Poetry and Prose	7
FHT Excellence Awards winner gives presentation in Parliament	8
Executive Committee	9
Regional Groups	9
The Link Notice Board	10

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Letter from the Chair

The falling leaves and changing colours certainly indicate Autumn is well and truly upon us, my favourite season of the year by far.

I took on the role as Treasurer last September and after much 'gentle persuasion' from Sarah, I agreed to take on the role as Chair, with Sally Woods kindly acting as Vice Chair.

Gaenor and Sarah handed over to me at the 16th AGM and conference which took place at Birmingham University on 13 September. Although fewer delegates attended than hoped for, the overall feedback was positive and insightful.

I would like to say a very big Thank You to both Sarah and Gaenor who led the association with professionalism and ease and for their warm welcome when I joined the committee. I hope to be able to continue in their footsteps.

I chaired our first committee meeting on Monday 17 October and we looked at the following areas; National Guidelines, Leads Day and Conference 2017.

We have already agreed a theme for next year's conference and are looking at moving the date to October time. We urge you to consider attending the conference, it always proves to be a thought provoking day and of course is excellent for networking.

We are your association – aiming to serve you, our members Please feel free to contact us with any questions, suggestions, comments and ideas.

Elisabeth Nuttall, Chair



South West Regional Group

NACTHPC South West Regional Meeting was held at Prospect Hospice on Monday 11th July 2016. Represented at the meeting were therapists from Prospect Hospice, Velindre Cancer Care, North Devon Hospice, Dorothy House and Longfield Hospice. The meeting included an update on Lymphoedema Management at Prospect Hospice and an overview of the service. There was also a talk on Jin Shin Jyutsu presented by Astrid Kauffmann. Astrid has been a Jin Shin Jyutsu Practitioner and Self Help teacher since 2001. More information can be found on her website: astrid@ flowsforlife.com.

Velindre Cancer Centre Complementary Therapy Team recognised with special excellence award

The Complementary Therapy Team at Velindre Cancer Centre has won a Special Recognition Award for FHT Employee of the Year, at a national awards ceremony.

The event, organised by the **Federation of Holistic Therapists** (FHT), was held on Wednesday, 26 October at One Whitehall Place, London, to bring much deserved recognition to high calibre practitioners, students and tutors working in the complementary, sports and holistic beauty industries.

The Complementary Therapy Team at Velindre supports patients, both physically and emotionally, at all stages of their journey – from the point of diagnosis, throughout treatment and onto rehabilitation or end of life care. By helping patients to cope with anxiety and a range of symptoms, in turn, the team help to ensure medical treatments are successfully completed, which means efficiency in terms of cost and time within the NHS.

The team educate patients in self-help techniques and work with other agencies in promoting support networks and group activities. Furthermore, the team are fully committed to specialist training and high standards, and have worked together to develop an excellent service which they continue to push forward in order to gain more recognition for the benefits of complementary therapies alongside mainstream healthcare.

Paul Battersby, President of the FHT, says: 'these awards are designed to recognise individuals – and teams – that are excelling in therapy practice and education. Angela and her team should be exceptionally proud to be selected from a pool of high calibre peers, in a ceremony that is recognised across the industry. Well done.'



FHT President Paul Battersby (left) presenting the FHT Special Recognition award for Employee of the Year to Complementary Therapy Team members Jason Hoffman, Jess Stephens (middle) and Angela Green (right), Clinical Lead.

We are all human

The programme for this year's conference was entitled 'Changing Relationships and Sexuality at End of Life Care'. There were three amazing speakers who did indeed tackle this subject with knowledge, understanding and humour. A number of incredibly strong messages emerged during the course of the day. I found, within my own notes from each presentation, the word 'humanity' cropping up, specifically the need to consider the 'human' when in conversation with, or treating, a patient and their partner within palliative care. We are all, every one of us, a person, with a body, with emotions, with conscious thoughts and our own individual experiences.

Bridget Taylor (our Key Note Speaker) has researched the effects of a terminal diagnosis on relationships between couples and spoke passionately that more support and help should be devoted to this area, especially as the connection between two people in a couple may change. A patient's body may look different during/post treatment or surgery or they may feel different about their body and experience sensations in a different way. How do they feel about that? How does their partner feel about that? Is that an appropriate conversation for the couple to have?

Communication was another strong theme to emerge from this day. Lorraine Grover (Psychosexual Nurse) spoke of the different ways that couples can still enjoy whatever level of intimacy they wish or are jointly are able to experience. There is value in explaining how yoga, mindfulness, breathing exercises, visualisations can offer relaxation and just the freedom to focus on each other rather than every second being about the condition one of them has. The partner is travelling the road with the patient. And they may have been together for a month or decades. They are still a couple until end of life is reached. Bridget called it 'being-towards-death-of-the-couple': a very deep and thought-provoking statement.

Nick Owen (A Journey through Grief) spoke of his wife's death and how expressing himself on the written page, creatively through poetry and song, helped. He also spoke about 'adjusting behaviour according to signals received.' It was my first time at conference and I thoroughly enjoyed every minute. The presentations were very interesting and thought-provoking, the lunch was beautiful and the opportunity to connect with others within in our industry was a true 'heart chakra' moment.

Thank you to the organisers and I hope you've enjoyed my rather potted notes from the day!

Alison Smith, Complementary Therapist, The Myton Hospices.











Abdominal massage for the relief of constipation in palliative care - backwards or forwards?

infrequent bowel movements and impacted faeces, is a big prob-

lem in our Hospice, even though we are pretty good at finding solutions - and we are not alone. In fact 45% of people receiving hospice care suffer with constipation. As people approach the end of life and become chronically ill, their appetite reduces as does fluid intake, and decreased activity impedes the strength of the abdominal wall muscles. In addition, our clients are often receiving opioids for pain relief or other medication which induces constipation. Within Hospices we are quick to prescribe laxatives, but what about mechanical stimulation - massage - of the colon?

Abdominal massage is something which comes in and out of fashion, becoming common practice and then being seen as 'alternative' for a period of time, but among complementary therapists work-

ing in Hospice and Palliative care, there appears to be a renewed interest and increase in its usage, although gentle techniques vary. I interviewed two therapists, **Anne** and **Sue**, to discuss how they go about abdominal massage and the benefits to their clients. Anne massages backwards and Sue massages forwards. I don't like to be anal about this but ... which way gets the best result?

Anne described "massaging through the colon" but almost "going backwards" although working towards the point of elimination and being "slow and gentle" with our frail patients. She started with the sigmoid area (end segment) for five minutes working up, transverse colon and back to the ascending colon. She then applies light strokes the opposite way to close the treatment. She states that this way any hard, impacted faecal mass will be closer to the point of elimination. Anne has adapted her technique from Swedish and Aromatherapy training.

Sue, who is also a Reiki practitioner, starts from the ascending colon and works round the bowels in a circular motion and also uses light effleurage strokes to encourage peristalsis and then uses sweeping movements around the whole abdomen. Even if she feels tension or "hard areas" she maintains a very light pressure.

While Anne states that normal motility can be "kick started" as soon as twenty minutes after a treatment, Sue states it generally takes hours to have an effect, sometimes only relieving flatulence or easing the abdomen, rather than inducing a bowel movement, but that feedback is always good. She believes that general relaxation therapies, meditation and simple exercises can have an effect

Constipation, characterised by painful or difficult defecation, . on constipation, including breathing exercises, such as breathing out and tightening the abdominal muscles. We discussed the 'two

> sphincters' - one is loud and vivacious and we all know about, and the other one - the ani internus - is a much more shy. sensitive and complicated fellow, operated unconsciously, that needs peace, calm and relaxation before it can do its job.

> Sue alluded to the energy chakras of the body, linking emotional blockages with physical blockages. Work to the abdomen can involve work to the "root chakra" which deals with identity, survival and connection. When Reiki is performed to the abdominal region, we have a sense of grounding, support and calm. Both therapists agree that the abdomen is an intimate area and it is important clients feel at ease with their therapist before commencing a treatment.

Further study of the benefits of abdominal massage and most effective techniques in the relief of constipation for palliative clients is needed.

Josephine Dorling, John Taylor Hospice



Case Study: acupuncture to treat a 44 year old woman with breast cancer suffering with hot flushes and night sweating

Medical acupuncture is a form of therapy involving the insertion of fine needles to specific points, and is adapted from Chinese acupuncture. It acts mainly by stimulating the nervous system. Impulses are sent to the spinal cord, leading activation of chemicals in the brain and spinal cord, which in turn have an anti-inflammatory effect, block pain impulses and help relax the patient.

Visweswaran Ramasamy, physiotherapist at John Taylor Hospice, Birmingham, this year conducted a study to assess the effectiveness of acupuncture to treat intractable cancer-related hot flashes and night sweats, a common disruptive clinical problem affecting two thirds of all breast cancer survivors (Carpenter *et al*, 1998). Where pharmacological treatment had failed to improve the patients' symptoms, she responded well to a course of acupuncture. Assessing her symptoms using a visual analogue scale (VAS), Ramasamy noted her score decreased from 9/10 to 2/10. In addition, her quality of sleep and overall sense of wellbeing improved over a course of eight sessions. Ramasamy concludes that acupuncture may have potential as a therapy modality since current therapeutic options available to treat hot flashes and night sweats are limited, especially for patients with hormone-sensitive carcinoma.

An abstract of this article was presented at the World Cancer Congress, Paris and National Cancer Research Institute, Liverpool, 2016.



Visweswaran Ramasamy qualified as a chartered physiotherapist in 2000, initially working in India prior to moving to the UK in 2005. He graduated from Sheffield Hallam University with an MSc in Musculoskeletal Physiotherapy and now works as a clinical specialist physiotherapist at John Taylor hospice in Birmingham. He uses acupuncture for complex pain management and to treat various cancer-related symptoms. His case study was published in *Acupuncture in Physiotherapy*, Volume 28, Number 1, Spring 2016, 93-98.



The 'M' Technique® is in safe hands

Delegates at the Primary Care and Public Health Conference 2016, gave Jane Buckle a warm reception for her last presentation of the 'M' Technique *, at the NEC in May.

Jane has now retired and will be much missed by many in the hospice movement who have been inspired by her enthusiastic, and warmhearted teaching. The registered therapeutic system of touch developed by her, has been taught in the UK for over ten years. Her dedication, energy and communication skills mean that the 'M' Technique * is now widely used in hospices, care homes and NHS hospitals across the UK.

'M' Technique Instructors Loretto Cattell and Philippa Hunter also addressed the conference. They gave examples of how hospice patients and their families have benefited from the technique. And of how it is now used more widely with adults and children with learning disabilities.

Now that Jane has taken well deserved retirement she has handed on the reins of the 'M' Technique * to her team of UK Instructors.

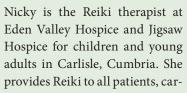
'M' Technique * courses are taught across the UK. They include a four hour, certified hand and foot course, and the two day Practitioner course. For more information go to www.mtechnique.co.uk , or contact Philippa Hunter, 'M' Technique Sectretary (UK), at pharomaoı@sky.com



Loretto Cattell, Jane Buckle and Philippa Hunter speaking at the Primary Care and Public Health Conference, May 2016



Nicky Forbes – Communications Lead





ers, staff and volunteers and is very passionate about research supporting the benefits of Reiki in palliative and supportive care.

She also runs her private therapy practice in the Lake District and teaches Reiki and courses for qualified therapists who wish to adapt their therapy for statutory settings such as hospitals, hospices, care homes as an accredited tutor of the Sam Buxton Sunflower Healing Trust.

Nicky has been a Reiki Master Teacher since 2003, having also qualified in Massage, Emotional Freedom Technique (EFT) and Matrix Reprogramming. Prior to working full time in therapy, Nicky has 15 years' experience in marketing and brand management. She has joined the NACTPHC committee as the member responsible for communications, developing and managing the association's website and social media (facebook and twitter).

If you have any ideas on how the association can improve their communications and would like to help further, then please email Nicky on nacthpccomms@hotmail.co.uk or call o7833 771177

Poetry and Prose

Slow Dance

Have you ever watched kids
On a merry-go-round?
Or listened to the rain
Slapping on the ground?
Ever followed a butterfly's erratic flight?
Or gazed at the sun into the fading night?
You better slow down.
Don't dance so fast.
Time is short.
The music won't last.

Do you run through each day
On the fly?
When you ask How are you?
Do you hear the reply?
When the day is done
Do you lie in your bed
With the next hundred chores
Running through your head?
You'd better slow down
Don't dance so fast.
Time is short.
The music won't last.

Ever told your child,
We'll do it tomorrow?
And in your haste,
Not see his sorrow?
Ever lost touch,
Let a good friendship die
Cause you never had time
To call and say, "Hi"
You'd better slow down.
Don't dance so fast.
Time is short.
The music won't last.

When you run so fast to get somewhere
You miss half the fun of getting there.
When you worry and hurry through your day,
It is like an unopened gift...
Thrown away.
Life is not a race.
Do take it slower
Hear the music
Before the song is over.

by David L. Weatherford

Autumn Movement

I cried over beautiful things knowing no beautiful thing lasts.

The field of cornflower yellow is a scarf at the neck of the copper sunburned woman, the mother of the year, the taker of seeds.

The northwest wind comes and the yellow is torn full of holes, new beautiful things come in the first spit of snow on the northwest wind, and the old things go, not one lasts.

Carl Sandburg





FHT Excellence Awards winner gives presentation in Parliament

Member and FHT Excellence Award winner, Angela Green, and her colleague, Dr Anne Johnson, were recently invited to give a presentation about the complementary therapy service at Velindre Cancer Centre at an All-Party Parliamentary Group (PGIH) meeting.

Angela Green and Dr Anne Johnson at House of Commons.

Held on 18 October at the House of Commons and chaired by David Tredinnick MP, the meeting was attended by representatives from professional therapy organisations and other advocates of complementary and integrated healthcare, including a number of MPs.

Dr Johnson, Macmillan Consultant Clinical Psychologist, opened the presentation by providing an overview of Velindre Cancer Centre, the prevalence and impact of cancer, and the importance of an integrated model of care to support patients every step of their cancer journey.

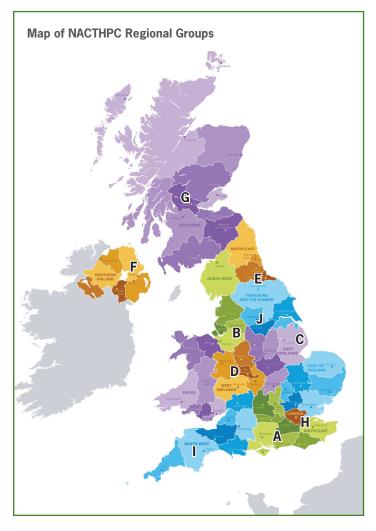
Angela Green, Clinical Lead Complementary Therapies, then provided in-depth information about Velindre's complementary

therapy service including staffing and service delivery, therapy interventions available, the referral process, case studies, service evaluation, therapist training and the challenges of running the service.

Throughout the presentation, both ladies illustrated time and again the many physical and psychological benefits complementary therapy interventions have to offer patients, carers and staff in the field of cancer care. Similarly, the presentation highlighted that by reducing anxiety in patients, the complementary therapy team help to ensure challenging medical treatments are successfully completed, creating cost and time efficiencies within the NHS.

Both Angela and Dr Johnson were praised for their insightful presentation, which sparked debate in the room about how to harness further support and recognition for services like Velindre's and roll out this successful healthcare model into other NHS hospitals and settings.

The FHT would like to thank Angela Green and Dr Johnson for delivering this presentation at the PGIH meeting, helping to stimulate well-informed debate on integrated healthcare and contributing to the development of knowledge and policies on the subject.



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Your association needs your help and expertise!

We are looking for new committee members to help us develop the NACTHPC

This is open to all team leaders, co-ordinators and volunteers

Please pass this message onto any of your team who do not have access to email

For more information please email nacthpcchair@hotmail.com



