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INTEGRATING HEALING/ REIKI INTO THE NHS

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I have been employed as a Spiritual Healer/ Reiki practitioner on the Hematology Unit at University College London Hospital (UCLH) for the past five years. This is an acute care 40 bed unit which is based over two floors. Our patients are generally having treatment for hematology diseases. These include leukemia, myeloma (bone marrow cancer), sickle cell disease and thalassemia (potentially debilitating and disabling genetic blood disorders). Most of the treatments for these conditions require the patient to be hospitalized for treatment protocols which include chemotherapy as well as bone marrow and stem cell transplants.

My desire to work as a healer within the NHS came about as a result of illness within my own family. My son Sam was diagnosed with Acute Myeloid Leukemia at the age of seven in 1995. Sam was treated at Great Ormond Street Hospital and his diagnosis was considered very poor. The medical opinion was that Sam would be fortunate to live more than a few months, because statistically his type of leukemia did not respond to treatment. Sam lived for a further three years, during which time he enjoyed a quality of life that unfortunately his peers in with this diagnosis did not. I know that this extra time we had with Sam was due to the complementary therapies care he received. He had very little problem with side effects and the usual life threatening infections that chemotherapy can bring. I believe that healing supported him to be able to tolerate the conventional medicine he received.

When Sam passed into spirit in 1998 I continued to work privately at home with children, adults and many four-legged patients. I also began to focus my attention on a more personal goal: convincing the medics that Healing/Reiki could be a very useful tool for patients undergoing conventional cancer treatment. Sam's life had been so dramatically improved by healing that I wanted other children to benefit in the way that he had.

I began to approach various hematology units, armed with the knowledge that Healing would be of benefit to their patients. I was invited to speak at several cancer charities about the role that Healing could play alongside conventional medicine, and took up several invitations to speak to interested medical parties, however small the audiences.

There were several doors that I knocked on during this time which remained firmly closed. Sadly, one of them was Great Ormond Street Hospital, where Sam had received his treatment. Eventually, in 1999 I was given the opportunity to speak to the nurse manager of the Hematology Unit at University

College Hospital. I was told straight away that there was no money available to pay me, to which I responded that for now that was fine. I merely wanted to be given the opportunity to ‘prove a need.’ Money could come later!

The manager agreed to this, and I began work on the unit the following week - initially for one full day weekly. Within a month, the ‘need’ had been proved beyond any doubt. I was interviewed once again by the manager, who said that patients, staff and relatives had given the service a huge ‘thumbs up.’ I was to be given a day’s paid work a week, and an Honorary contract.

Needless to say, I was ecstatic. Since then my work has expanded steadily, an extra day each year, to the point that last year I was appointed Complementary and Counseling Team Manager. I am now responsible for five other therapists: two aromatherapist/reflexologists, a hypnotherapist, a counselor, and another healer.

We are a truly integrated team, writing in the patients’ /doctors’ notes, attending nurse handover meetings, and multi-discipline meetings. All therapists teach on our nurse induction courses, and presented an ‘in - house’ study day for the UCLH Trust. We have also held a national study day entitled ‘Complementary Therapies in Cancer Care.’

My working week at the hospital now involves time spent dealing with the managerial duties that I have recently acquired, the remaining time being for treatments to patients, patients’ families and staff.

Working at the hospital is the most rewarding and challenging part of my life. I believe that there should be courses available to teach the necessary skills for being an effective healer in a hospital setting. It is very different from working from home – where clients choose to come to you – compared to working in a hospital – where every room has a patient or a skeptical doctor who might well say ‘no’ to your treatment.

There is a need to be very flexible in your approach, as a conventional healing session is usually impossible. Various machines, wires, and high tech medicine are usually being delivered to the patient, along with interruptions by doctors, nurses and even cleaners – making it a challenging environment to work in. Healing in hospitals is a specialized field and should be recognized as such.

You will have noticed that I used the terms ‘Healing’ and ‘Reiki’ throughout this article. I have trained with the National Federation of Spiritual Healers as well as in the Usui Reiki System. I have found similar blocks to both labels, especially within a hospital setting – due to the multi-faith society of our patients. I therefore try and avoid labels as much as possible, talking to patients of ‘energy’ rather than more holistic phrases that could be ‘mumbo jumbo’ to the layperson. However, I believe we should not be ashamed to call what we do ‘healing’ and am comfortable with the term ‘healer.’ I am of course aware that in the English dictionary, to heal is ‘to restore to health,’ or ‘cure,’ or ‘become sound’, but if you look at the word therapy it is a ‘curative medical treatment.’ Not much to choose between the two, but most people are quite comfortable with the word therapy. My experience is that the hundreds of patients I have seen over the years are quite comfortable with the word Healing or Reiki as long as the therapist is comfortable with herself or himself.

Healee reports

The following words are from patients who have received healing within the hospital setting.

Susan Hyde was diagnosed with Multiple Myeloma in 2004. Her husband, David, shares this report.

Just a few words about our experiences and how Healing/Reiki has helped us both, (Susan, my wife, has multiple myeloma), at the most terrible time in our lives.

Before Susan's illness we knew nothing about Reiki, I do have a colleague where I work who is a martial arts expert and he has mentioned the points where the chi runs through the pressure points he uses with his art, but the rest is / was mumbo jumbo to us both.

Susan's first experience of healing was when a reiki healer came to visit her at home prior to her admission into UCLH. He held his hands above her head and did not actually touch her but she said that her entire spine got hot from her bottom up to the base of her skull. When he put his hands either side of her shoulders she had the same experience across her shoulders. Over the first few months of Susan's illness I noticed her mood would change and I would then call the healer, he would then send Susan remote healing and she would become positive once again.

At the end of August, 2004 Susan and I went to a re-staging meeting to discuss her options but we were told that the only option was a bone marrow transplant as Susan's disease was the most aggressive form. It was also stated that this procedure is very high risk and terminal in one in four attempts, but the future was guaranteed just three years at best without the transplant. We were also told that the disease could still return after the transplant, but it should be considered a possible cure.

Soon after we arrived at the UCLH we were told that the transplant unit had a complementary medicine team headed up by Angie, who just happened to be a Reiki master. I cannot explain what this meant to us both because Reiki had been keeping Susan motivated for the last few months by remote healing and now she could have one to one healing from a master not an apprentice, but in fairness the healer we had been using at home had served us well for months.

The hospital allowed me to stay with Susan for the six weeks she was an in-patient and they think that she is quote, "a super star" because of the way she responded to the chemotherapy and three days of total body radiotherapy – she had little or no side effects apart from her hair falling out.

After the transplant it was a waiting game to see if the 8.2 billion stem cells provided by Susan's brother had set up home and started making the blood cells that she needed. After seven days of flat line readings we saw the first flicker and a few new cells showing, three days later the count was off the scale, never seen anything like it.

A couple of days after the actual transplant they started various drugs to dampen down the graft verses host syndrome. These drugs have an extreme effect on mucus membrane. As a result Susan was feeling quite poorly, her mouth and throat were very sore and she was very sick for days. As bad as she was feeling she was up and about every day and her consultant said "I know that you are feeling very bad but I cannot believe how much better you are than other patients at the same stage as you. Some of them have not been out of bed in weeks".

I know exactly why Susan was so much better than the other patients: Reiki healing Don't forget that we knew the power of this healing before we came to the hospital and to fall into the hands of a true expert with years of hands on experience was more than we could possibly hoped for.

It was at this time that I first met Graham, Angie's husband. He looked in on us and offered to give me Reiki healing as he is also an accomplished master. This was to be my first experience of Reiki healing and to be honest I was stiff with apprehension and my mind was full of terrible and conflicting thoughts concerning my wife - in truth I was in a bit of a state.

Graham took me to the therapy room provided by the unit. It was very small, had no windows or natural light and the word dungeon came to mind. I lay on the bed terrified with my fists clenched tightly and Graham started the healing. As his hands moved from my head down as far as my chest I started to relax and I felt warmth under his hands which left a trail as he moved down my body. This was the first time that my mind had emptied of thoughts in months. My mind turned off. I felt safe, relaxed and positive again also for the first time in months.

When the doctors said that Susan was to be discharged from hospital to finish her recovery at home we were both very worried as we had become dependant upon Angie and Reiki healing, I asked Angie how we could find a reliable Reiki healer once we were at home. It was then that Angie made us a kind offer for which we will always be grateful. She asked us where we lived and said that we were near enough to visit her and Graham at their home.

We have been to see Angie and Graham at their home a number of times now. They have a lovely treatment room which is peaceful and flooded with natural light, the room is full of lovely things, crystals and minerals each piece having been found at a particular point in their lives and it is lovely that they share these personal possessions with the people that they help.

If I was asked to describe Reiki healing I would say it would be very difficult as each healing session is different as indeed it is with different masters, but I would say that total relaxation and a sense of warmth and well being is consistent with each treatment, as is the effect of clearing the mind of all thoughts. Sometimes I sense bright light at the point when I am so relaxed that I am on the point of sleep but I really could not recall a single negative thing about Reiki healing. We will continue to use healing as preventative medicine which we hope will give us an extra tool in the fight against Susan's disease."

– Susan & David Hyde.

Linda Moore was diagnosed with Non-Hodgkin's Lymphoma in 2001.

As soon as I found out about the cancer, I started having conventional treatment. It hadn't occurred to me to try any other therapies but, whilst in hospital having chemotherapy and radiotherapy, a nurse suggested I try healing. They had a very open-minded approach to therapy on the unit and she said it may help with pain relief and stress, so I thought I'd try it.

I had no idea what to expect but the healer, Angie Buxton, quickly put me at my ease. She practices hands-on-healing, I always felt very comfortable and would just lie down whilst she worked on me. During the first session, I experienced some strange sensations. I could see a red light and I felt a

powerful tingling in my hands and pins and needles in my feet. I ended up having sessions twice a week and although I'm in remission now, I still go every week. It has helped me in so many ways. I always feel cleansed and relaxed after healing. I believe it gave me the strength to cope with the chemotherapy, which lowers your immune system. Many people lose lots of weight during treatment, but I didn't lose a pound. Now, healing helps me to relax and not worry about the cancer returning. Angie also treats patients' families because they go through so much stress as well.

I would advise anyone with cancer to try healing. The doctors are good but you need all the help you can get to fight cancer, I believe the healing Angie gave me played a big part in my cancer going into remission.'

– Linda Moore

In summary

As you can see, no two patients' experiences are the same, but the benefits can be seen on many levels.

We as a complementary therapy team are very fortunate to be funded in our roles. Currently we are funded 60% from National Health Service (NHS) budget, and 40% by the hospital from 'soft money funds.' We have an overall policy for the team's work and individual treatment policies for the different therapies. As we move into our new hospital, based in central London, in 2005 we hope to expand services to include cancer services in general so that many more patients at UCLH can benefit. This is in line with the Calmaine /Hine report in 1995, which stated that appropriate complementary therapies should be available to all cancer patients. In 2005 we also hope to run a pilot research project in the therapy of healing.

Last words should come from my clinical lead/head nurse Stephen Rowley, who provided the foreword for my book *The N.H.S.Healer* which was published in July 2004 by Virgin Books. I wrote this book to show how healing is being used effectively alongside conventional medicine and to encourage other cancer centers to do the same. I have received a number of invitations from other centers to come and talk about our work at UCLH and was invited to present at the European Bone Marrow conference in Barcelona this year. We now have one of our healers seconded to the pediatric oncology unit within our Trust and they are now in the process of securing funding for 2005 to expand the current two days a week that healing is currently on offer.

University College London Hospital's hematology unit treats patients with leukemia and other life threatening diseases. Treatments are highly intensive and carry risks of morbidity and mortality in themselves.

For the last five years the unit has developed a complementary therapy team, initially providing conventional therapies such as reflexology and aromatherapy to patients. Introducing a spiritual healer into this pressure cooker environment was considered a risk.

I am pleased to say that over the last five years that Angela Buxton has been in the team the therapy of healing has become not only accepted but imperative to many of our patients. Although clinically healing remains little understood, the clinical effects are most evident, and certainly tangible enough to satisfy the skeptical minds of doctors and nurses.

We have seen patients with uncontrolled pain find more relief from healing than from intramuscularly opiates. We have seen patients in psychological states of utter desperation find huge comfort and coping abilities through healing,. We have seen patients report significant reductions in chemotherapy related side effects. We have seen the positive effect healing can have on the troubled dying patient. Working in this field is demanding and many staff have felt the need for healing themselves and have found significant benefit from doing so. Healing is the most popular and well-received complementary therapy we provide on the unit.

All the healing is provided on the unit by Angela Buxton who is now an integral member of the medical and nursing team. Her drive and personality alone has had a positive effect on the unit.

– Stephen Rowley
Clinical Nurse /Manager

Obviously to have Stephen's seal of approval helps enormously, but this approval has come from clinical experience of seeing how healing can be a very valuable, supportive tool for his patients and staff on the unit. My goal remains the same as it was in 1999: to spread the therapy of healing within the statutory sector and to encourage healers to approach units to enable more patients to benefit from healing as a supportive therapy.

Reference

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I am a guest tutor on the Palliative Care Course and Childhood Cancer Course run by South Bank University, teaching nurses the benefits of healing alongside conventional medicine. I have also spoken many times over the past five years to medics and cancer charities, putting the case for the therapy of healing to be used alongside conventional medicine. I teach and practice healing and other related topics privately.

There have been numerous appearances on national TV and many articles in the national and local press about my work in hospitals and at home, as well as presentations at professional meetings.

Member of Reiki Federation, Member of the Doctor Healer Network

Author of *The NHS Healer*, Virgin Books, 2004

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