

Complementary Alternative Medicine Manual for Nursing Homes

**Findings and Insights from a Project at the
Jewish Home and Hospital**

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WHY USE COMPLEMENTARY AND ALTERNATIVE MEDICINE FOR NURSING HOME RESIDENTS WITH DEMENTIA?

Our population is aging, but with more chronic health problems. Many of these ongoing problems significantly impact quality of life, including cognitive loss and chronic pain. Nursing home residents on Special Care Units (SCU) are often at increased risk due to agitation and communication problems. Staff on SCUs often find it difficult to provide care and support using traditional methods solely. The Complementary and Alternative Medicine (CAM) techniques described in this manual give staff additional options for reaching this needy, but challenging population. Utilizing the senses rather than a cognitive framework can allow access to the emotional reservoir of residents with dementia, and can establish connections in novel ways.

CAM is not only a group of techniques, however, it is a shift in the way that residents are viewed. CAM modalities focus on the strengths of residents rather than their illness or disability. This manual will outline four interventions successfully utilized on a SCU: breathing exercises, guided imagery, aromatherapy and hand massage. More importantly, however, is the underlying essence of CAM as a focus on the whole person. Correspondingly, CAM modalities benefit nursing home residents and staff alike, and provide opportunities to view our similarities rather than our differences.

HOW TO USE THIS MANUAL

Ultimately, the most important intervention we bring to our residents is ourselves, who we are in the relationship. We can have all the technical skills available, but if we are impatient and stressed, it will be difficult to provide relief or establish a connection with a confused and agitated resident. Staff who wish to best help their residents, therefore, should start by practicing the techniques themselves. By using aromatherapy, hand massage, guided imagery and breathing exercises, we become calmer and more centered. And, it is from our personal experience with these techniques that we will best be able to teach them and to understand their effect.

We hope that this information will be used as a starting point and an inspiration for those who work with similar populations. We also hope that this book will not be used as a blanket recipe but that the uses will be tailored to each specific population and their needs. We do recommend the following:

- While in general, CAM techniques are safe, there are some safety precautions noted- **READ THE SAFETY PRECAUTIONS AND TAKE THEM SERIOUSLY!**
- Read through the entire manual, or at least each chapter before proceeding with the intervention
- Practice the techniques yourself.
- Be creative and have fun!

NOTE: THIS MANUAL HAS FOUR SECTIONS
AROMATHERAPY
GUIDED IMAGERY
BREATHING EXERCISES
HAND MASSAGE

**THIS SECTION ONLY COVERS AROMATHERAPY. THE OTHER THREE
SECTIONS WILL BE POSTED AT A LATER DATE.**

AROMATHERAPY CHAPTER AT A GLANCE

<u>SECTION</u>	<u>PAGES</u>
What is Aromatherapy?	
What are Essential Oils?	
How Does Aromatherapy Work?	
Safety First	
The Benefits of Aromatherapy	
Frequently Asked Questions About Using Aromatherapy With the Elderly	
Choosing What Oils To Use	
Cinnamon Information Sheet and MSDS Sheet	
Lavender Information Sheet and MSDS Sheet	
Lemongrass Information Sheet and MSDS Sheet	
Peppermint Information Sheet and MSDS Sheet	
Ylang Ylang Information Sheet and MSDS Sheet	
Useful Techniques for Administering Aromatherapy in Nursing Homes	
Mixing Guidelines for Essential Oils	
Aromatherapy Highlights From Our Nursing Home	
Aromatherapy Resources	

WHAT IS AROMATHERAPY?

Aromatherapy is the skillful use of 100% pure, complete, and natural essential oils to restore or maintain physical, emotional, and aesthetic well being. (Sebastian Liew, 2003)

Contrary to popular belief, aromatherapy is not a new phenomenon. The use of essential oils for improving health and general well-being is dated back as far as the time of the ancient Egyptians. It is only in the last few decades however, that scientists have started

to record the evidence that proves what our ancestors knew instinctively: that nature offers natural remedies (Freund, 2002). Now a major part of today's alternative and holistic health systems, aromatherapy has a huge following, and for good reason, too.

Because essential oils used in aromatherapy are pure, made only by nature as nature intended, our bodies are evolutionarily prepared to encounter such substances. This sets essential oils apart from the many other human-made substances we use every day to alter our well-being and the well-being of our environment, including things like hand/body lotions, perfumes, hair dyes, and chemical cleaners.

WHAT ARE ESSENTIAL OILS?

Essential oils are the oils used in aromatherapy. They are extracted from plants by using a complicated distillation process. Once an essential oil is isolated during distillation, it is then packaged into a dark-colored glass bottle to protect its chemical properties from excessive light and air, which may alter or lessen the oil's effectiveness.

HOW DOES AROMATHERAPY WORK?

When 100% essential oils are inhaled, they trigger the olfactory (smell) nerves which are directly connected to the limbic system (the emotional and memory part of our brain). We react to aromas before we can even identify them. When essential oils are added to creams, carrier oils, and lotions, many of their benefits can be absorbed right through the skin. Depending on the oil's particular chemical make-up, it can have a variety of helpful effects on both an individual's body and mind.

While generally beneficial, essential oils should be used with care. Many oils can have just as pronounced effects as pharmaceuticals. Some people may have allergic or harmful reactions to an essential oil. Some oils, when used on a long-term basis, may cause chronic toxicity. Therefore, it is very important to consult a fully qualified aromatherapist before attempting to use them on yourself or on others.

Aromatherapy is not exact and predictable, but with a little patience and experimentation, it can yield great results.

SAFETY FIRST

SPECIAL NOTE: This handbook is not meant to be a comprehensive explanation on the use of aromatherapy. Instead, it provides some basic guidelines for how to begin incorporating aromatherapy into your nursing home setting in a safe and manageable way. Nonetheless, before such efforts are attempted, please be sure to consult with appropriate medical and administrative staff at your hospital about the proper procedures that must be used to ensure the safety of the patients and staff at your hospital. It is also a very good idea to consult with a certified aromatherapist before getting started.

Some important safety facts you should know about essential oils and aromatherapy:

- Aromatherapy is not a replacement for qualified medical care.
- Essential oils are highly concentrated and potent (on average about 50 lbs. of plant material is distilled per 6 mL bottle of oil). Because of this, only very small amounts of oil are needed in the use of aromatherapy. Follow directions for oil amounts carefully.
- Increasing the suggested dose of an essential oil does not increase the effect. In fact, overuse may cause headaches or nausea.
- Avoid placing essential oils near or on sensitive membrane areas of the body, especially eyes, mouth, and any open wounds.
- Never apply an essential oil undiluted to your skin, unless directions specifically state to do so.
- If irritation develops, discontinue use immediately.
- Essential oils are for external use only. Do not ingest or take orally.
- Essential oils must be stored in dark-colored glass jars. Plastic bottles may alter the chemical properties of the oil and render it useless. Light or exposure to air for prolonged periods of time may have the same effect.
- Essential oils should be stored in a secure place and kept out of the reach of children, residents, and elderly.
- Buy essential oils only from trusted and reputable suppliers. Several providers are listed at the end of this chapter.
- Essential oils can be irritating to the eyes. If an oil gets in your eye, rinse the eyes with a few drops of jojoba oil or almond oil on a piece of tissue. Essential oils dissolve in fat.

Think you might be allergic? There is a patch test you can use to find out for yourself. Just place a drop of the essential oil on your forearm. If you have very sensitive skin, first dilute the oil by half with a neutral carrier oil, like almond oil. Loosely cover the area and wait 24 hours. No redness or burning means you are not sensitive to that essential oil.

It is important to note that every person will react in their own unique way to aromatherapy. For some elders, it may appear that the oil has no effect on their mood, behavior, or level of pain. For others, the oil may work wonders. You should proceed with caution and realize that though aromatherapy has proven highly successful in many cases, there is no guarantee that it will solve all the ailments or problems of the residents in your nursing home. Aromatherapy is not a replacement for qualified medical care. It is a complementary practice that may enhance the well-being of your residents.

Here is some more useful advice on safety when using aromatherapy with elderly in nursing homes:

- Keep a copy of an MSDS sheet for every essential oil you decide to use on a unit. Examples of these can be seen at the end of this chapter.
- Thoroughly educate staff on the uses and safety information of aromatherapy. Hold

in-services lead by a certified aromatherapist who can help you select appropriate oils to use at your nursing home.

- Always consult with a resident's doctors and regular caregivers to find out the resident's medical history before administering any aromatherapy techniques. Many essential oils have contraindications.
- Keep a log of what oils you have used with each resident. Be sure to write details notes on any negative reaction the person may have had to any oil so that other staff is clearly alerted not to use it again on that resident.
- Keep bottles of essential oils out of reach of residents at all times.
- Always wash your hands between uses of essential oils. Also wash resident's hand after use of essential oils, as they are more likely to touch their eyes and mouth and cause irritation.
- Some residents have a harder time breathing, and essential oils may irritate the breathing process. Keep close watch and use extra caution with residents who have respiratory concerns.
- If a resident is particularly sensitive or has allergies, do a patch test on a small portion of skin with the diluted essential oils. Dab a very small amount of the diluted essential oil on the patch of skin. Monitor that area, looking for any irritation or redness over the next 24 hours before proceeding with other use.
- Look out for open sores on resident's skin. Elders' skin is often less elastic and thinner and can be more sensitive to potent essential oils.
- Do not leave aromatherapy diffusers unattended or in a place where residents/residents can touch them.
- We recommend not using candle-lit diffusers in a hospital setting due to fire hazard.
- Be extra observant and cautious. It can never hurt to be extra careful when working with this population.

FREQUENTLY ASKED QUESTIONS ABOUT USING AROMATHERAPY WITH THE ELDERLY

I heard that as we get older, we lose our sense of smell. If a resident can't smell anymore, will the aromatherapy still have an effect?

Even if a resident can't smell anymore, the aromatherapy can still have an effect on the body and mind state. Essential oils are 100% pure, and they have a physiological effect on the body. Once certain nerve endings in a resident's nose come into contact with aromatherapy molecules, those nerves send a particular message to the brain. In other words, even if residents can't identify what they smell or even know that they smell anything at all, the smell receptors in the nose will still sense the molecules and send a message to the brain. Depending on what molecules are entering the body, it can have varied biochemical effects, for example: increasing appetite or lowering blood pressure. A person doesn't have to be cognitively aware of the aromatherapy in order for the essential oil to have a positive effect on the body. This is one of the many wonders of aromatherapy and one of the reasons it makes such a good alternative therapy for residents with dementia.

How will I know if the aromatherapy is having a positive or negative effect on the resident if they can't verbally communicate with me?

Nonverbal cues will tell you a lot. Smiles, laughs, taking deeper breaths, and relaxing muscles are all signs that the aromatherapy is having a positive effect. On the other hand, if the resident is grimacing, pulling away from you, sneezing, coughing, or groaning uncomfortably, this is a good sign that the aromatherapy is not helping them. In fact, it may just be agitating them. In such a case, stop using the oil immediately. Aromatherapy can sometimes bring out reactions in people who may have previously seemed non-communicative. So, pay close attention to all the possible signs and follow your intuition. Often, it will be quite clear whether or not the resident is reacting positively around the aroma.

How often should I use the aromatherapy technique in order to create a real benefit?

There is no one answer as to how often you should use an aromatherapy technique to see its effectiveness. Some aromatherapy can be used as an emergency tactic when the occasion calls. For example, spraying a lavender room spray near a highly agitated resident may help calm the resident down in a matter of minutes and help you avoid an unpleasant outburst.

Other aromatherapy can be used over an extended period of time to help have more long-lasting effects on a person's mood, behavior, and level of pain. You may have to experiment with the frequency for a while to see what works best for that particular resident. A good rule of thumb to follow is to use aromatherapy in moderation. If you have been using a particular aroma regularly with a resident for a while and then it seems to stop working, take a break from using that scent for a few weeks. The resident's body may have become desensitized to its effects. After a few weeks, try using the oil again with less frequency and you may find it still can be useful for that resident when used less frequently. Be careful of overusing some oils. If overused, some oils may become an irritant to the resident. For example, too much inhalation of ylang ylang can cause headaches.

Also note that if you start to regularly use a particular scent at a particular time that may increase the effect you want to have. For example, if you only use lavender at bath time for a certain resident to help calm her down, her body and mind may begin to think that it's time to take a bath and relax whenever she smells lavender. Smells are strongly linked to memory, and if used intentionally, residents may associate certain smells with certain times of days or certain activities.

What signs will I see that suggest a negative reaction to the use of a particular oil?

If a resident or residents starts coughing, sneezing, or has watery eyes, these may be signs that the oil is too strong for them. Remember that, in most cases, elderly are more sensitive to oils than younger people are because their bodies are more frail and less resistant. You may also notice other non-verbal cues that suggest a negative reaction to an oil. If a resident starts groaning unpleasantly, grimacing, or crying when using an oil,

then stop using that oil immediately. That aroma may bring up bad memories for them.

If you are using diluted essential oils in a hand massage and you notice a resident's skin gets red and irritated, stop using the oil immediately. They may be sensitive to that particular oil. In most cases, common sense will tell you whether or not a person is having a negative reaction to an oil.

Should I consult with a doctor or caregiver before using aromatherapy on a resident?

Absolutely. If used properly, essential oils can be safe and very beneficial to resident, but it is advised that you always check with their physician and caretakers first. Certain oils are contraindicated for people with certain conditions like high blood pressure, epilepsy, etc. Not only should you check out the resident's history and allergies first, but you should also make sure you check out the essential oil and determine any special warnings for its use.

What do I do if I notice a person has a negative reaction to the oil I am using?

The five oils described in this manual were chosen because of their strong safety records. It is highly recommended that you consult with a certified aromatherapist and consider very carefully what oils to use before beginning your program.

However, even after you have carefully selected your oils, it is possible that a resident may still have a negative reaction to its use. If this happens, stop using the oil immediately. Seek appropriate medical attention immediately. Try to remove the person from the area where the oil was being used or diffused. If you can open a window or use a fan to clear the aroma out of the room, do that as well. If you were giving a hand massage to the resident with the diluted oil, dab some neutral carrier oil (like almond oil or jojoba oil without the essential oil) onto the affected area. The carrier oil will absorb the remaining essential oil and dilute it to lessen the reaction.

You should also have an MSDS sheet on hand for every oil you are using. Consult this MSDS sheet for more safety information.

CHOOSING WHAT OILS TO USE

There are hundreds of essential oils to choose from, and it can seem like a daunting task selecting which ones to use at your nursing home. Whatever essential oils you choose to use, make sure to carefully check the effects of that oil and any contraindications it may have. Also, be sure to review and understand the safety precautions needed to be used with that oil. As mentioned earlier, an MSDS sheet should be created for every oil. A copy of this sheet should be kept on the floors where essential oils are being used.

In this manual, we carefully outline and describe the details of five essential oils that we found particularly beneficial to use with elders because of their strong safety records, ease of use, and their potential effects. We consulted with a certified aromatherapist to

select these oils. The oils chosen were lavender, lemongrass, ylang ylang, peppermint, and cinnamon.

Here are some tips to follow when choosing your own oils:

- **Start small.** It's easier to start with fewer oils, rather than purchasing several different kinds. Remember, for each oil you choose, you and your staff will have to become responsible for understanding how to use that oil, what its safety information is, and what its benefits are. Starting small can help you master a few of the basics and help get your facility more used to the idea of using aromatherapy before diving into more choices.
- **Select well-known oils that have been thoroughly researched.** Try not to choose obscure oils that have had little research about them supporting their use with elders. Many oils, like lavender and peppermint, have been well researched and documented on safe use with elders.
- **Consider price as a factor too.** If you know that you want to continually use essential oils at your nursing home, it's important to consider cost. There are many very helpful oils to use that are also cheaper. Do your homework first to see which ones would make the best economic sense for you.
- **Buy only high quality oils from reputable companies.** We recommend several good vendors at the end of this chapter in the Resource Section. Many vendors will try to sell you oils that have been tainted or mixed with other oils, reducing or eliminating their effectiveness. Be careful of such false marketing.
- **Consult with a certified aromatherapist.** This is the best way to ensure that you are picking high quality oils that are right for your particular needs. The resource Section in this chapter lists some websites and organizations where you can get in touch with certified aromatherapists.

Once you have chosen your oils, you'll need to make MSDS sheets and information sheets for each oil, and place them on the unit where staff can access them readily. We have included such sheets below for samples.

CINNAMON INFORMATION SHEET

Botanical Name: Cinnamomum zeylanicum

Common Method of Extraction: Steam Distilled

Color: Golden Yellow/Brown

Consistency: Slightly oily feeling

Strength of Initial Aroma: Strong

Aromatic Description: Much richer in aroma than ground cinnamon. Peppery, earthy, spicy, bright yet slightly woodsy.

Possible Uses: Cinnamon is a physical and emotional stimulant. Research has found that just having the aroma in the room reduces drowsiness, irritability, and the pain and frequency of headaches. The warm smell can help relax tight muscles and soothe painful joints and increase lower blood pressure. Cinnamon is also an appetite stimulant and can aid in the breakdown of food, helping with problems like constipation. It can also boost the immune system by fighting viral and fungal infections. [Julia Lawless, [The Illustrated Encyclopedia of Essential Oils](#) (Rockport, MA: Element Books, 1995), 58-67.]

Possible ways to use cinnamon with elders include:

- Diffuse cinnamon up to half an hour before meal time in areas where residents will readily smell the aroma. Continue to diffuse cinnamon through the meal hour in order to increase people's appetite and aid in their digestion.
- Attach a cinnamon scented cotton ball to the shirt of those residents who suffer from drowsiness or frequent headaches and muscle aches.
- If a resident suffers from dangerously low blood pressure, try diffusing cinnamon in their room daily to keep them alert and responsive.
- Diffuse cinnamon in common areas, especially during those times of the year where lots of people are getting sick. The cinnamon can help boost the health of the immune system and ward off certain viruses.

Safety Information: Cinnamon is a mucous membrane irritant and strong skin sensitizer. **Therefore, you should avoid using cinnamon directly on people's skin. Do not use it in any massage technique, even diluted with a carrier oil.** It is best used just in diffusing. Avoid using cinnamon with hemophiliacs, people with prostate cancer, and with kidney and liver problems. Also, avoid using it with those residents who take anticoagulants. Only the oil from the leaf should be used, the oil from the bark is too hazardous. [Robert Tisserand, [Essential Oil Safety](#) (United Kingdom: Churchill Livingstone, 1995), 130.]

LAVENDER INFORMATION SHEET

Botanical Name: Lavendula officinalis

Common Method of Extraction: Steam Distilled

Color: Clear with a Tinge of Yellow

Consistency: Thin

Strength of Initial Aroma: Medium

Aromatic Description: Fresh, sweet, floral, herbaceous, slightly fruity.

Possible Uses: Lavender is a gentle, yet powerful oil. Out of all five of the oils explained in this manual, lavender is the most general all-purpose relaxer and balancer. It can be used for a variety of purposes, and is often thought to enhance the effectiveness of other oils when used together. Some suggested uses of lavender to help with care of elders:

- Diffuse lavender oil in common rooms or bedrooms to encourage a relaxing, calming environment. Lavender can help reduce agitated behavior.
- Give a lavender oil hand massage (diluted with a carrier oil) to ease tension, tiredness, and depression.
- Lavender can sometimes help with insomnia or restlessness. Diffuse lavender by a resident's bedside to encourage restful sleep.
- Gently waft a lavender perfume stick under the nose of an agitated resident to calm him or her down.
- Add a few drops of lavender oil to bath water to calm the resident down.
- Use a lavender room spray to reduce unpleasant room odors and encourage a peaceful, balanced environment.
- Attach a lavender cotton ball to the shirt of a frequently agitated resident to provide them with this soothing aromatherapy throughout the day.
- If a resident suffers from persistent headaches, sometimes diffusing lavender near them can help reduce the pain.
- If you have to perform a painful or distressing procedure with a resident, the diffusion of lavender during, before, or after such a procedure can help make the experience less traumatic for both you and the resident.

Specific Safety Information: There are not any special precautions when using lavender as long as regular safety procedures for using all oils is followed. [Robert Tisserand, [Essential Oil Safety](#) (United Kingdom: Churchill Livingstone, 1995), 207.]

LEMONGRASS INFORMATION SHEET

Botanical Name: Cymbopogon citratus

Common Method of Extraction: Steam Distilled

Color: Yellow

Consistency: Thin

Strength of Initial Aroma: Strong

Aromatic Description: Fresh, lemony, earthy.

Possible Uses: Lemongrass is a tonic for the nervous system and body in general. It has pain killing and antidepressant properties, which are excellent for headache and symptoms of stress. The other benefits of using this oil are as follows: reduces muscle soreness, arthritic pain, strengthens immune system, fights infections, and is used to reduce fever. It helps reduce sweating, and its astringent properties fight athlete's foot and other fungus. It's also a great digestive aide.

Some suggested ways to use lemongrass with elders:

- Give a lemongrass hand massage to those residents that suffer from arthritic pain or muscle soreness due to such things as a stroke, rheumatoid arthritis, general immobility, etc. Even if it is not their arms that hurt, the lemongrass oil will be absorbed into the blood stream and help reduce pain throughout the body.
- Waft a lemongrass perfume stick under the nose of an agitated resident to help reduce stressful behavior.
- Diffuse lemongrass or use lemongrass room spray in common rooms and bedrooms during cold or flu seasons to help reduce spread of certain infections.
- Diffuse lemongrass near bedside of a resident recovering from a fever to help reduce the fever and promote a stable, quick recovery.
- Attach a lemongrass cotton ball on the shirt of those residents who have chronic constipation to promote better digestion.
- Diffuse lemongrass while doing deep breathing exercises with a resident who regularly suffers from headaches. Encourage them to breathe in the lemongrass scent to help reduce their headache.
- Attach a lemongrass cotton ball to the shirt of those residents who suffer from profuse sweating. This may help eliminate excess sweating.

Safety Information: Avoid using directly with residents who have glaucoma. Use caution in those cases where a resident has skin hypersensitivity or damaged skin. [Robert Tisserand, [Essential Oil Safety](#) (United Kingdom: Churchill Livingstone, 1995), 146.]

PEPPERMINT INFORMATION SHEET

Botanical Name: *Mentha piperita*

Common Method of Extraction: Steam Distilled

Color: Clear with a Yellow Tinge

Consistency: Thin

Strength of Initial Aroma: Strong

Aromatic Description: Minty, reminiscent of peppermint candies, but more concentrated. More fragrant than spearmint.

Possible Uses: Peppermint Oil is both soothing and energizing. The distinctive coolness of the oil stimulates the body and mind, often capable of waking people up out of a lethargic state. Peppermint invigorates, revitalizes, refreshes and also brings mental clarity. It can soothe muscular aches, reduce or eliminate headache/migraine pain, and combat mental exhaustion. It also can reduce nausea.

Some ways to use peppermint with elders include:

- For residents who are always lethargic, diffusing peppermint near him or her can be a good way to encourage more active behavior.
- For a particularly nice and gentle way to wake up a resident, wave a peppermint perfume stick under the nose for about a minute.
- Elders who suffer from migraines or regular tension headaches might be good candidates for peppermint hand massages. The peppermint can seep into the bloodstream and help reduce the symptoms associated with migraines.
- Peppermint hand massages (always dilute in a carrier oil) can also be given to those residents who suffer from boredom and need some more stimulation in their daily routine.
- If a resident is suffering from muscle aches or nerve spasms due to a previous ailment or injury, like a stroke, diffusing peppermint can help soothe the nerves and reduce agitation.

Safety Information: Avoid in cardiac fibrillation, epilepsy, fever. Peppermint is a mucous membrane irritant and neurotoxic (toxic to the nerves). So it is important to keep peppermint away from the eyes, nose, mouth, open sores, and any other mucous membrane areas. It tends to have a relatively strong impact in waking people up. If you have highly agitated residents, it is probably best to not use peppermint with them as it may just make them more agitated or incensed. [Robert Tisserand, [Essential Oil Safety](#) (United Kingdom: Churchill Livingstone, 1995), 160.]

YLANG YLANG INFORMATION SHEET

Botanical Name: Cananga odorata

Common Method of Extraction: Steam Distilled

Color: Clear with a Yellow Tinge

Consistency: Medium

Strength of Initial Aroma: Medium - Strong

Aromatic Description: Fresh, floral, sweet, slightly fruity, fragrant yet delicate.

Possible Uses: Ylang ylang is best known for being an antidepressant, relaxing to both body and spirit. It also relieves anxiety, frigidity, hypertension (high blood pressure), palpitations, and stress. It is also thought to balance the hormones. [Julia Lawless, [The Illustrated Encyclopedia of Essential Oils](#) (Rockport, MA: Element Books, 1995), 61-67.]

Possible uses of ylang ylang with elders include:

- Diffuse ylang ylang near those residents who suffer from high blood pressure and high levels of anxiety, as well as depression.
- Give a daily ylang ylang hand massage (diluted with a carrier oil) to those residents who suffer from high blood pressure. This daily treatment may complement their medications in helping keeping their blood pressure low. Ylang ylang hand massages are also good for those chronically depressed residents. The touch along with the ylang ylang during the hand massage can be an effective tool for lifting their spirits.
- Place a dab of ylang ylang on a cotton ball and attach it to the shirt of a resident who regularly suffers from high blood pressure, anxiety, or depression.
- A few drops of ylang ylang in a bath can help calm a resident who is particularly agitated at bath time.
- Wave an ylang ylang perfume stick under someone's nose if they seem aggravated or really distraught. This may calm them down.
- Diffuse ylang ylang and play some soft music near those residents who seem to be constantly agitated or depressed. This may lull them into a calmer, happier state.

Safety Information: Frequent, prolonged use of ylang ylang can cause headaches and nausea. Ylang ylang is best used in moderation. [Julia Lawless, [The Illustrated Encyclopedia of Essential Oils](#) (Rockport, MA: Element Books, 1995), 104.]

USEFUL TECHNIQUES FOR ADMINISTERING AROMATHERAPY IN NURSING HOMES

In our nursing home, to administer aromatherapy, we used essential oils in bath water, room sprays, stone diffusers, fan diffusers, on perfume sticks, cotton balls, paper pyramid diffusers, and in massage oil. Below, we describe the procedures for using each of these items. Following this, in the Aromatherapy Resource section, we provide information on where you can purchase many of these items for your own use.

Using Essential Oils In Bath Water

It is safe to use some oils in bath water. Remember, because essential oils are so strong, only a few drops in a whole tub of water are enough to have an impact. Because of their frail skin, **we suggest using only lavender in the bath water for elderly residents**. This is the gentlest of the oils we describe in this manual, and it is the safe to use in small doses in bath water. Place about 10-13 drops of lavender in full tub of water before letting resident enter the bath. With residents who have extra sensitive skin, use less lavender.

How to Make Aromatherapy Massage/Body Oil

Never apply an essential oil directly on a resident's skin, always dilute with a neutral carrier oil. Carrier oils have no scent and do not alter the chemical make-up of essential oils. We suggest using 100% pure jojoba oil or almond oil for the carrier oil. These can be purchased at most health food stores. For every ounce of almond oil or jojoba oil (approximately 300 ccs), you can place 5 drops of the preferred essential oil into the mixture. Do not use more than this. It should be a 1% dilution or less when working with residents. Once you have added the appropriate amount, make sure to shake the bottle well before using. **Remember, certain oils, like cinnamon, are not to be used on skin even when they are diluted because they are skin irritants.** Read labels carefully.

Remember, if someone gets the oil in their eye, you should place a drop of the plain carrier oil on a tissue and run the tissue over the eyeball and under the eyelid. The carrier oil will neutralize the essential oil in the eye. Use extra caution in avoiding mucous membrane areas, as well as open sores, when applying massage oils.

Aromatherapy Room Spray

To freshen up a room, lighten a mood, or remove an unpleasant odor, aromatherapy room spray might be a good alternative. To make an aromatherapy room spray, find a clean plastic bottle that has not been used before for anything else. Clearly mark the bottle as an aromatherapy room spray bottle and label the particular oil that is in it. Rinse the bottle out with water and then add 4 ounces of water and 20 drops of the essential oil.

When you are ready to use, shake vigorously and then spray away from people and furniture. Make sure that the room spray doesn't leave wet splotches on the floor where someone can slip. Store the bottles out of reach of nursing home residents.

Using Fan diffusers

When you use fan diffusers, the oil itself is not exposed. This makes fan diffusers a very good option for a nursing home unit where residents may stick their hands in new and unusual things. Fan diffusers are usually electric or battery-operated. They work like a regular fan, but have a felt or cardboard pad inserted in front of the fan. Begin by applying 6-10 drops of the chosen oil on the pad, then replacing the pad into the diffuser and turning it on.

The scent may only linger for about half an hour or so, depending on the size of the room and the power of the fan. Reapply oil as needed. Since many fans are battery-operated and small, and the essential oils are absorbed into the pad, these are ideal and safe for bedside use.

Most fans come with extra pads for replacing the current pad when it is grimy or overused. We suggest only using one type of oil per pad to avoid mixing of scents. When finished using a fan diffuser, remember to turn it off and store it away from residents' reach.

Using Paper Pyramids

For use of a smaller diffuser to serve approximately one person, you may want to use a paper pyramid diffuser. These can be put on the back of people's wheelchairs or near someone's bed side. Inexpensive and neat, these can make a good alternative to some of the more expensive and messy electronic models, though they often don't emit as strong an odor. Nonetheless, don't forget that even small amounts of aromatherapy can make a big difference for many elders.

Paper pyramids are little pieces of super-absorbent paper that can be folded up into a pyramid shape to sit upright on a desk or bedside table. Once folded, apply 3-8 drops of your chosen oil on the top of the pyramid. Apply slowly to make sure all oil is being absorbed by the paper and is not leaking onto the countertop. Place in desired location out of the reach of residents. Reapply oil as needed.

Using Cotton Balls and Perfume Sticks

Another way to individualize treatment is to use a cotton ball or perfume stick. Simply apply 1 drop of the essential oil directly to a cotton ball or perfume stick and wave it under the residents nose or attach it to a piece of their clothing for extended periods. This approach is useful to render specific short term effects in residents as well as deliver more personalized effects over an extended period of time. For example, at lunchtime you may attach a cinnamon-scented cotton ball to the shirt of a resident who doesn't like to eat in order to stimulate their appetite. A lavender-scented perfume stick can be waved under the nose of a resident when he is particularly agitated to see if it calms him down. A lavender-scented cotton ball can be attached to a resident's shirt all day long in order to

relax her throughout the day. Drops of the essential oil can be reapplied to the cotton ball or perfume stick as needed, but the scent should last for quite a while. Avoid putting either the cotton ball or perfume stick directly in contact with their skin or near face and eyes.

MIXING GUIDELINES FOR ESSENTIAL OILS

Below are some general mixing guidelines of how much essential to use per technique when using essential oils with elders:

- Bath: 10-13 drops per full tub of water
- Bed Pillow: 1 drop
- Clothing: 1-2 drops
- Clothes dryer: 2-3 drops
- Cotton Ball: 1 drop
- Diffusers: Varies
- Foot Bath: 3-5 drops per quart
- Humidifier: 8 drops per pint of water
- Massage Blend: 5 drops per 1 oz. of carrier oil
- Room Spray: 5 drops per 1 oz. of water

AROMATHERAPY HIGHLIGHTS FROM OUR NURSING HOME

Aromatherapy was a very popular technique at our nursing home. Residents, staff and family caregivers all responded positively. Residents often commented “Do you have one of those smell sticks with you? I’d like to have one. They’re so nice;” or “This smells nice. You have a cure for everything.” Tapping into our sense of smell proved a powerful way to benefit everyone’s mood. Below are some journal notes from some particularly successful case studies of how aromatherapy affected some of the residents at our nursing home:

Case Study 1: Susan sits hunched in a chair with her head in her lap for most of the day. At first glance, I thought there would be little I could do with her to help. Boy, was I wrong! Susan has been an excellent example of how peppermint energizes even the most lethargic of people. After a brief minute of smelling peppermint, Susan invariably awakes, opens her eyes, lifts her head, and looks right at you. Often, this is accompanied with a smile and even a laugh. A very gentle way to awaken her, the peppermint also energizes her and gives her a body a kind of stimulation. Once she’s awake, I am able to give her hand massages and do gentle arm stretches with her that we coordinate with our breath. These therapies usually leave her awake and sitting in a better posture, so that she can breathe more easily. There has even been a few times where Susan has tried to say something to me, but the words didn’t come out right. Susan is a good example of how we never know just exactly how someone is going to react to these therapies. Some of these therapies may be the key to opening up communication pathways with these individuals that we would traditionally “give up on.” Susan has shown how aromatherapy can be particularly powerful in recreating a quality of life for individuals whose bodies

don't allow them to function like they use to. Overall, the therapies have improved her quality of life and continuing them regularly would be advised.

Case Study 2: Yvonne has had her ups and down, but has seemed to come out stronger in the end. The most notable effect the therapies have had on her was the weight gain she experienced after using cinnamon to stimulate the appetite. No other medical intervention for loss of appetite was being given to her at the time. This, along with encouragement from her private companion, has made a big difference in her eating habits. After gaining weight, it has now stabilized, and she seems happier. We also do regular hand massages and some breathing exercises. Once a wanderer of the halls, she is now more sedentary. She is still interactive with others, though not very verbal. I think the therapies in Yvonne's case have demonstrated how we don't always need to resort to the medicine first. Sometimes, simpler things can be highly effective.

AROMATHERAPY RESOURCES

Suppliers for Essential Oils, Fans, Diffusers, and Related Equipment

Debra Freund, RN
Scents and Scentsibility, Ltd.
PO Box 8013
Bridgewater, NJ 08807
908-369-4537
www.scentsibility.com

Supplies: essential oils, diffusers, other related items

Young Living Essential Oils
Thanksgiving Point Business Park
3125 Executive Parkway
Lehi, UT 84043
1-800-371-2928
custserv@youngliving.com
www.youngliving.us

Supplies: essential oils, diffusers, other related items

Whiffs: Aromatherapy for Life
www.whiffs.com

Supplies: essential oils, aroma fans, other related items

Aroma Therapeutix
1-800-308-6284
Fax: 714-886-1590
Supplies: essential oils, diffusers, perfume sticks, paper pyramids, other related items

Websites for Aromatherapy MSDS Information

www.ahealingessence.com/aromatherapyessentialoils/msds

www.aromatherapy-essential-oils.org/essentialoil/msds/

www.maidnaturally.com/msds/

Other Informational Sources for Aromatherapy

The National Association for Holistic Aromatherapy
4509 Interlake Ave N., #233
Seattle, WA 98103-6773
888-ASK-NAHA -or- (206) 547-2164
(206) 547-2680(FAX)

email: info@naha.org

Aromaweb: Online Information on Aromatherapy
www.aromaweb.com

Books

Lawless, Julia. The Illustrated Encyclopedia of Essential Oils. Rockport, Maryland: Element Books, 1995.

Price, Shirley and Len Price. Aromatherapy for Health Professionals. United Kingdom: Churchill and Livingstone, 1999.

Tisserand, Robert and Tony Balacs. Essential Oil Safety: A guide for Health Care Professionals. United Kingdom: Churchill and Livingstone, 1995.

Worwood, Valerie Ann. The Complete Book of Essential Oils and Aromatherapy. California: New World Library, 1991.