Reiki in Hospitals

By William Lee Rand

At hospitals and clinics across America, Reiki is beginning to gain acceptance as a meaningful and cost-effective way to improve patient care. Personal interviews conducted with medical professionals corroborate this view.(1) "Reiki sessions cause patients to heal faster with less pain," says Marilyn Vega, RN, a private-duty nurse at the Manhattan Eye, Ear and Throat Hospital in New York. [Reiki] accelerates recovery from surgery, improves mental attitude and reduces the negative effects of medication and other medical procedures.

Vega, a Reiki master, includes Reiki with her regular nursing procedures. Because the patients like Reiki, she has attracted a lot of attention from other patients through word of mouth, as well as from members of the hospital staff. Patients have asked her to do Reiki on them in the operating and recovery rooms. She has also been asked to do Reiki sessions on cancer patients at Memorial Sloane Kettering Hospital, including patients with bone marrow transplants. Recognizing the value of Reiki in patient care, 6 doctors and 25 nurses have taken Reiki training with her.

America's Interest in Complementary Health Care

The general public is turning with ever-increasing interest to complementary health care, including Reiki. In fact, a study conducted by Dr. David M. Eisenberg of Boston's Beth Israel Hospital found that one in every three Americans has used such care, spending over 14 billion out-of-pocket dollars on alternative health care in 1990 alone!(2)

A survey conducted in 2007 indicates that in the previous year 1.2 million adults and 161,000 children in the U.S. received one or more energy healing sessions such as Reiki.(3)

Reiki is also gaining wider acceptance in the medical establishment. Hospitals are incorporating it into their roster of patient services, often with their own Reiki-trained physicians, nurses and support staff. Reiki was in use in hospital operating rooms as early as the mid-90's.(4) Since then its acceptance in medicine has grown. It is now listed in a nursing "scope and standards of practice" publication as an accepted form of care,(5) and a 2008 *USA Today* article reported that in 2007 15% of U.S. hospitals (over 800) offered Reiki as a regular part of patient services.(6) For a detailed description of 64 Reiki hospital programs, please go to www.centerforreikiresearch.org

Scientific Validation

A research study at Hartford Hospital in Hartford, Connecticut indicates that Reiki improved patient sleep by 86 percent, reduced pain by 78 percent, reduced nausea by 80 percent, and reduced anxiety during pregnancy by 94 percent.(7)

In 2009, The Center for Reiki Research completed the Touchstone Project, which summarized Reiki studies published in peer-reviewed journals. The 25 studies examined were further evaluated to determine the effectiveness of Reiki. The conclusion states: "Overall, based on the summaries of those studies that were rated according to scientific rigor as "Very Good" or "Excellent" by at least one reviewer and were not rated as weak by any reviewer, 83 percent show moderate to strong evidence in support of Reiki as a therapeutic modality."(8)

Why Hospitals Like Reiki

Hospitals are undergoing major changes. They are experiencing a need to reduce costs and at the same time improve patient care. Under the old medical model based on expensive medication and technology this posed an unsolvable dilemma. Not so with Reiki and other complementary modalities. Reiki requires no technology at all and many of its practitioners offer their services for free. Reiki is therefore a very good way to improve care while cutting costs.

Julie Motz, a Reiki trained healer has worked with Dr. Mehmet Oz, a noted cardiothoracic surgeon at Columbia Presbyterian Medical Center in New York. Motz uses Reiki and other subtle energy techniques to balance the patients' energy during operations. She has assisted Dr. Oz in the operating room during open heart surgeries and heart transplants. Motz reports that none of the 11 heart patients so treated experienced the usual postoperative depression, the bypass patients had no postoperative pain or leg weakness; and the transplant patients experienced no organ rejection.(9)

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