

Used with permission of the Journal of the American Holistic Veterinary Medical Association (JAHVMA). Article first appeared in Volume 54, Spring Issue, 2019.

Reiki as Complementary Care in Veterinary Practice

Kathleen S. Lester, MS

Author contact:

Kathleen S. Lester, MS
Reiki Teacher & Practitioner
Animal Reiki Alliance
3730 Falls Road (Rear Entrance)
Baltimore, MD 21211
443-986-1516
klester@animalreikialliance.com

Abstract

Reiki is emerging as an evidenced-based complementary treatment for humans and animals. It is offered as a service in over 800 hospitals in the U.S. and is an up and coming service in the veterinary setting. Reiki, founded in Japan in 1922, is a form of energy healing that brings the patient's energy body into balance, thereby enhancing the body's natural ability to heal. In this article, the research conducted to date is reviewed, and those areas in which research supports Reiki's effectiveness are identified. Research indicates that Reiki is effective in reducing anxiety, reducing pain, and improving the well-being of the patient and the practitioner. Applications for Reiki in veterinary medicine are numerous. Reiki may be effective to reduce anxiety during routine exams, anxiety and pain during procedures and surgery, and chronic pain in animal companions; and it can improve the overall well-being of patients and veterinary staff.

Introduction

Reiki is growing as a complementary treatment to medical and veterinary care because of its wide-ranging therapeutic implications and cost-effective approach to animal care (1). The acceptance of Reiki is growing

significantly. It is now offered as a patient service in over 800 hospitals in the U.S. and over 154 veterinary clinics; this is a significant increase from 34 veterinary clinics in 2013 (2-4). Additionally, 3 major pet insurance companies now cover Reiki as a service (4).

This article presents Reiki as a complementary treatment to veterinary care and highlights research that demonstrates Reiki's effectiveness for reducing pain and anxiety, and improving the well-being of the patient as well as the Reiki practitioner. Reiki is not necessarily a hands-on modality and can be offered remotely, presenting great benefits to animals that are unable to travel to the veterinary hospital due to injury, trauma, illness, age, or surgery, and benefiting animals between veterinary visits.

What is Reiki?

Reiki is a non-invasive healing practice that promotes overall health and well-being. Reiki works with the animal or human to facilitate their own healing response. Founded in 1922 by Mikao Usui, Reiki is a Japanese system of energy healing (5, 6). The practice likely existed

in Japan prior to 1922, but the contemporary teachings are based on those of Usui (5, 6). The literal translation for “Reiki” is “spirit energy,” with Rei” meaning spirit and “Ki” meaning energy. Although Reiki is often referred to as “energy healing,” energy healing is not limited to Reiki. Every indigenous culture had a Shaman or healer who healed others through accessing the universal life force energy (4). In fact, all cultures have a term for the universal life force energy: in Chinese tradition it is called “Qi” (Chi), in Hawaiian culture it is called “mana,” in Tibetan Buddhism it is called “lüng,” and in Indian tradition it is called “prana.” Usui realized that anyone can learn Reiki, as everyone is born with this innate ability. Somehow, this connection with Reiki, the universal life force energy, is lost, and it has to be rediscovered.

Usui developed a method of teaching and techniques for practitioners to reconnect to the universal life force energy and to share that energy for the healing of others. Usui’s background and foundation were in Buddhism, Shintoism, and the martial arts, and the techniques and tools of his teachings are rooted in these traditions. Reiki itself is not religious in nature and can be taught to anyone.

The system of Reiki is comprised of 5 elements: the precepts, techniques and meditations, healing, symbols, and lastly, attunements and reiju, the spiritual blessings. The Reiki precepts are the foundation of the system of Reiki:

- Just for today, do not anger
- Just for today, do not worry
- Just for today, be humble
- Just for today, be honest in your work
- Just for today, be compassionate to yourself and others (5, 6).

All the techniques and practices taught in the system of Reiki are created to assist the practitioner to embody the precepts. Some of these include meditation, breathing techniques to focus and unify the mind, and self-healing/care (7). For the practitioners, Reiki is an ongoing practice and journey back to one’s true self (8). Reiki practitioners become one with the universal life force energy through

meditation and a focused intention for the recipient’s highest good.

The Science of Reiki

Reiki is the ability of the practitioner to synchronize their vibration to that of the universal life force energy and to share that vibration with the patient’s energy body. When the animal’s energy body is balanced and vibrating in sync with that of the universal life force energy, the physical body can heal itself.

From a scientific perspective, Reiki is best understood through quantum physics. Science has shown that everything is made of vibrating electromagnetic energy — just like light, sound, or microwaves. According to Einstein, matter and energy are interchangeable because, in essence, they are aspects of the same thing. When light is in a slow state of vibration, it appears as matter; when light is in a higher state of vibration, it appears to be moving or not as matter. This light energy is what connects us all, as we are all aspects of the same light, either in low or high states of vibration. Matter is not a solid separate thing and should not be treated as such.

Our energy body is actually the biomagnetic field that extends from our physical body. Ampere’s Law explains the magnetic forces between current-carrying conductors, including the physical body. Electrical currents generated by organs in the body flow through organs and tissues, generating magnetic fields around the body and within the body. The heart generates the strongest electrical field which flows through the circulatory system, thus generating the body’s strongest biomagnetic field (9). This biomagnetic field, or energy body, extends from our physical body to include our mental, emotional, and spiritual bodies. All illness begins as an imbalance in 1 or more layers of our energy body before it manifests as an illness or injury in the physical body. “The biomagnetic measurements are a lot more informative about what is happening inside the body than are the bioelectric measurements” (10).

The Reiki practitioner is able to meditate and access the vibration of the universal life force energy or healthy life systems. According to Schuman’s Resonance Theory,

health life systems vibrate around 7.83 Hz. From a meditative state and with intention for the patient's highest good, the Reiki practitioner shares vibration with the patient during the session, and the patient's vibration is entrained to that of the practitioner. Measuring the brainwaves of both the patient and practitioner using EEGs, Pennington found that the recipient's brainwaves shifted to the practitioner's state of consciousness (11).

Reiki in Veterinary Practice

Reiki is a wonderful complementary therapy to veterinary practice because it can heal on physical, mental, emotional, and spiritual levels (12). The typical approach to medicine, including veterinary medicine, is to treat the symptom or injury, and not consider the whole being. Additionally, the treatment often suppresses the symptom or injury and does not actually heal the root cause. Reiki works to heal the whole being, including the energy field, which brings balance and allows the physical body to heal (13). Reiki can stand alone as a treatment for some issues, or it can work together with other treatments.

Dr. Richard Pitcairn explained, "It is an illusion to try to analyze things as though they were separate entities or parts, for all phenomena are manifestations of a whole field of energy that underlies its manifestations. One of the most important implications of this fundamental breakthrough of understanding physics is that the fragmented, specialized particulate approach to knowledge that typifies most of science (including medicine) is erroneous at its very root. We must learn to see problems in relation to the whole and not become lost in the divisions of our artificial labels and definitions" (14).

Reiki is non-invasive, as the energy flows through the practitioner and is shared with the energy field of the patient. There is no requirement to touch the animal in order to offer Reiki, enabling it to be offered in person or via distance. Several studies indicate that distance Reiki is just as effective as in-person Reiki (15, 16). Veterinary hospitals can offer the benefits of distance Reiki to their patients so they can continue to heal in the safety and serenity of their own home.

Veterinarians and veterinary technicians trained in Reiki have found it to be beneficial during physical exams in the veterinary clinic as it decreases anxiety, allowing for a more accurate diagnosis. They have also found that Reiki eases patient anxiety prior to another treatment, such as acupuncture or chiropractic (a). Additionally, Reiki can be used pre-surgery, during surgery, and post-surgery to reduce anxiety as well as pain (b).

Reiki Research

Human and animal research supports Reiki to reduce anxiety, manage pain, and improve the well-being of the client and practitioner (15, 16, 21–29, 33–38). As little to no research has been conducted on animals in a clinical setting, this paper cites laboratory studies and human studies to support the benefits of Reiki for animals. Over the last 10 years, there has been a growing and promising body of evidence to support the application of Reiki as a complementary and integrative healing modality. Growing support for the effectiveness of Reiki has been established by recent meta-analyses of Reiki research (17–20).

The earliest meta-analyses on Reiki were done in 2007 by Vitale and did not report significant findings (17). However, by 2010, the Touchstone Process was used by The Center for Reiki Research to review 25 Reiki studies of which 12 studies were included in the good or excellent category for scientific rigor. They concluded that Reiki has a positive impact on pain in chronically ill patients and that there is solid initial evidence that Reiki is beneficial for depression, stress, and the well-being of practitioners (18). In 2014, Thrane and Cohen reviewed 45 published Reiki studies, but only 7 studies met their criteria of proper scientific method with appropriate control groups. The conclusion from the final analysis of these studies indicates that Reiki is effective in reducing pain and anxiety, and that Reiki is a very effective tool for self-care by medical staff (19).

In 2017, McManus reviewed 13 clinical studies, including 6 studies that were not included in earlier meta-analyses. These studies had to meet 4 selection criteria: administration of only hands-on Reiki, inclusion of "sham Reiki" control groups, publication in peer-reviewed

journals, and participation of at least 20 individuals in the Reiki group. Of these, 8 showed statistically significant benefits of Reiki, 5 showed no difference between the placebo and Reiki, and 1 showed Reiki was less effective than the placebo for treating fibromyalgia. McManus suggested that the lack of results in the 5 studies could be a result of “a lack of statistical resolving power of the experiment.” He concluded that “Reiki is better than the placebo in activating the parasympathetic nervous system, as measured by reduced heart rate, reduced blood pressure, and increased heart rate variability. For patients with chronic health conditions, Reiki has been found to be more effective than placebo for reducing pain, anxiety, depression, and for improving self-esteem and improving quality of life” (20).

Reiki for Anxiety

Bringing an animal to the veterinarian is often a stressful event for the pet, the human companion, and the veterinary staff. When stress levels are high, it is more difficult to get an accurate diagnosis, give injections,

and ultimately plan for recovery time. Multiple studies have shown that Reiki is effective in reducing stress in humans and animals (15, 21–27).

Conclusions for animal companions can be extrapolated from 2 studies that used laboratory animals. A study conducted by Baldwin and Schwartz used a controlled experimental design to look at stress in a hospital situation with the premise that loud noise in a clinical setting can impair the recovery process (21). The researchers examined whether Reiki could reduce the impact of stress on 16 rats that were exposed to 90 dB of white noise for 15 minutes per day (“daily noise”) for 3 weeks. The rats were divided into 4 groups, of which 3 groups received daily noise every day for 3 weeks, and 1 group was left in a quiet room. Of the 3 daily noise groups, 1 group received a Reiki session for 15 minutes prior to the daily noise, 1 group received a sham Reiki session for 15 minutes prior to the daily noise, and the third group just received the noise. Microvascular damage was used as a measurement of stress. The Reiki group demonstrated significantly less

SAVE THE DATE!

SEPTEMBER 12-15, 2019

Celebrate the 45th IVAS Congress in Wroclaw, Poland



Congress venue University of Environmental and Life Sciences

For more information visit the IVAS website at www.ivas.org

Email office@ivas.org or call +1-970-266-0666

arthritis and cancer pain. As pets age, many often suffer conditions that cause chronic pain. Reiki is an effective modality to help manage the pain.

In 1998, a study of 120 human patients with more than a year of chronic pain from a variety of conditions found that the group that received Reiki had the most significant reduction in pain compared to the control group, a Progressive Muscle Relaxation group, and a placebo group (23). The Pain Rating Index-R was used to measure sensory pain (quality, intensity, and location of pain), evaluative pain (overall assessment of pain), and affective pain (relating to anxiety and fear about pain). Of the 3 measures, the most significant decrease in pain among the Reiki treatment group was in sensory pain. This study concluded that not only did Reiki reduce pain in the treatment group that received 30-minute Reiki sessions 2 times per week for 5 weeks, but that the treatment had an impact for up to 3 months. "The gains made by Reiki persist over longer periods of time. Reduction in sensory and affective qualities of pain and the Total Pain Rating Index tend to persist even at a 3-month interval" (23).

In 2003, a study focused on humans with cancer pain found that the Reiki treatment group experienced a significant reduction in pain and a significant drop in diastolic blood pressure and pulse rate on the days Reiki was offered. They also reported an increased quality of life during the 7-day experiment (28).

A pilot study in 2008 found that Reiki reduced pain, anxiety, and fatigue for cancer patients compared to the control group. In a randomized control study, Reiki was compared to rest. Each group received either Reiki or rest for approximately 45 minutes to an hour each session for 5 consecutive days a week. The Reiki group received 2 days of Reiki treatment followed by 2 weeks of no treatment, while the rest group received 2 weeks of no scheduled rest. Using the Edmonton Symptom Assessment System to measure pain, anxiety, and tiredness before and after each session (Reiki or rest), Tsang, Carlson, and Olson found that the Reiki treatment group had significantly less pain, anxiety, and tiredness (29).

A clinical trial studied Reiki and physiotherapy for 60 patients with intervertebral disc herniation to determine the extent to which these treatments were effective in relieving lower back pain and improving activities of daily living (16). In this study, 60 patients were randomly assigned to 1 of 3 treatment groups: the Reiki treatment group, the drug therapy group, or the physiotherapy group. The Reiki group received a 15-minute distance healing session daily for 3 consecutive days; the physiotherapy group received 7 to 10 physiotherapy sessions of 60 to 90 minutes duration; and the drug therapy group received indomethacin and methocarbamol every 8 hours for 1 week. The Reiki group and the physiotherapy group had significantly reduced pain and increased activities of daily living compared to the drug therapy group. While there was no significant difference between the Reiki and physiotherapy groups in pain management and activities of daily living, this study found that the response to Reiki was faster than to physiotherapy and more cost-effective. Specifically, 3 Reiki sessions of 15 minutes, for a total of 45 minutes of treatment time, were as effective as 7 to 10 physiotherapy sessions that lasted 60 to 90 minutes for a total of 420 to 900 minutes of total treatment time. Reiki provided significant savings in cost and time. Additionally, the Reiki group was able to receive distance Reiki and did not have to travel to a facility for treatment, allowing them more time for activities of daily living.

Practitioner Well-being and Client Care

Reiki may be beneficial to veterinarians and their staff, as it contributes to the well-being of those practicing Reiki in addition to the overall well-being of patients (30–34). While Reiki can be taught to anyone, it is those who develop an ongoing daily Reiki practice who become the most skilled practitioners. Reiki practice may include daily meditations, practice of the Reiki precepts, self-healing, breathing exercises, and practice with the symbols and mantras. During the facilitation of a Reiki session, the practitioner serves as a conduit to the universal life force energy and receives healing as they facilitate a session. Several studies have determined that nursing staff that take care of themselves can better care for their patients (35–38).

Several studies that looked at the benefits of Reiki for nurses who are also Reiki practitioners found that Reiki reduced stress and anxiety among nursing staff as well as the patients (30–34). Reiki impacts not only the well-being of the nurse but also the attentiveness to their patient's needs and clarity of thought or focus (35, 36). Most of the studies used interview protocols, and 1 used a survey of nursing staff trained in Reiki to gauge self-perceived stress, ability to focus, problem-solving skills, and level of care toward patients.

Conclusion

Research supports Reiki for reducing pain and anxiety, and for improving the well-being of the patient and practitioner. These implications alone are significant to veterinary medicine. Research has demonstrated the effectiveness of Reiki on humans and laboratory animals. While Reiki has become more popular for human patients, it may also be used in the veterinary setting as a complement to treatment for acute pain caused by injury or surgery, and chronic pain such as that from arthritis and cancer. In these scenarios, Reiki could be used by itself or in conjunction with other pain relief options in which close monitoring is important to get the right dose or combination of modalities to manage pain safely. Ultimately, the impact is less pain medication and their non-beneficial side effects. Reiki offers many advantages, including no side effects, not having to be administered daily because of potential long-term effects, and the ability to be administered via distance which allows the animals to remain in their home environment.

While it can be concluded that Reiki is effective for pain management for injuries, post-surgery, and for animals with chronic pain, the full extent to which Reiki is effective has not been explored. Studies can be conducted on surgery patients to determine if amounts of anesthesia and post-operative pain medication can be reduced with concurrent Reiki treatments. By reducing anesthesia and pain medication, less toxins are processed by the body, which enables the body to focus on healing from illness or injury. Positive results of such studies could have tremendous impact on the

quality of life of our animal companions, especially for those living with cancer, diabetes, or chronic pain.

Reiki can be used in the veterinary setting to reduce anxiety for the pet, the human companion, and the veterinary staff. It can be taught to all veterinary staff, including administrative staff, to help reduce anxiety in all aspects of the veterinary setting. Because the energy field of a skilled Reiki practitioner will positively affect those around them, front desk staff trained in Reiki may reduce the stress of a visit to the hospital. The same is true for other staff trained in Reiki. The pet and human may be more relaxed, making it is easier to examine the animal and establish a correct diagnosis, as well as give vaccines and medications. Reiki can also be used pre-operatively to reduce anxiety and possibly improve outcomes of the surgery.

While the research on Reiki has advanced in the last 10 years, there is much more to do to establish this modality's effectiveness for other indications, such as faster healing rates and healing specific illnesses. Additionally, as there are many ways to study Reiki in the clinical setting, the use of laboratory studies can be discontinued. To get at the depth and breadth of the full impact of Reiki, additional clinical studies are necessary to draw more conclusive results about the effectiveness of Reiki.

Endnotes

a. Personal communication with Dr. Salifou Bishop, DVM, Loving Pet Care Hospital. December 1, 2018. Personal communication with Odette Suter, DVM, Peak Animal Health Center. December 7, 2018.

b. Personal communication with Dr. Salifou Bishop, DVM, Loving Pet Care Hospital. December 1, 2018. Personal communication with Tamara Hebbler, DVM, Healing Hope Wellness Center. December 9, 2018.

c. Personal communication with Dr. Salifou Bishop, DVM, Loving Pet Care Hospital. December 1, 2018.

References

1. Prasad K. Introduction to Reiki. *Innovative Veterinary Care Journal*. 2011;1(1):28-29.
2. USA Today. More hospitals offer alternative therapies for mind, body, spirit. Available at: <https://tinyurl.com/USATdy-Mind>. Accessed December 30, 2018.
3. American Holistic Veterinary Medical Association. Find a holistic veterinarian online. Available at: <https://tinyurl.com/holvvet2>. Accessed December 4, 2018.

4. Lester K. *Animal Reiki research: Implications for practice*. Baltimore: Animal Reiki Alliance, 2018.
5. Stiene B, Stiene F. *The Reiki Sourcebook*. New Alesford: John Hunt Publishing, 2003.
6. Rand W. History of Reiki. In: *An Evidenced Based History of Reiki*. Southfield: International Center for Reiki Training, 2015;16–31.
7. Stiene F, Stiene B. *The Japanese art of Reiki*. New Alesford: John Hunt Publishing, 2010.
8. Stiene F. *The inner heart of Reiki: Discovering your true self*. New Alesford: John Hunt Publishing, 2015.
9. Oschman JL. What is healing energy? Part 3: silent pulses. *J Body Mov Ther*. 1997;1(3):179–189.
10. Oschman JL, Rand WL. Science and the human energy field. *Reiki News Magazine*, 2002;1(3):1–8.
11. Pennington J. International House of Reiki. The Brain Waves of Reiki. Available at: <https://tinyurl.com/Reikibrain-waves>. Accessed January 25, 2019.
12. Chambreau C, Lester K, Donmoyer I. Treating the whole animal: Creating your animal companion's healing team. *Maryland Dog Magazine*, 2013(Summer):22–24.
13. Medical News Today. Everything you need to know about Reiki. Available at: <https://tinyurl.com/Know-Reiki>. Accessed December 3, 2018.
14. Pitcairn RH, Pitcairn SH. *Dr. Pitcairn's complete guide to natural health for dogs & cats*. Emmaus: Rodale, 2005;281.
15. Shore AG. Long-term effects of energetic healing on symptoms of psychological depression and self-perceived stress. *Altern Ther Health Med*. 2004;10(3):42–48.
16. Jahantigh F, Abdollahimohammed A, Firouzkouhi M, et al. Effects of Reiki versus physiotherapy on relieving lower back pain or improving activities daily living of patients with intervertebral disc hernia. *J Evid Based Integr Med*. 2018;23:2515690X1872745.
17. Vitale A. An integrative review of Reiki touch therapy research. *Holist Nurs Pract*. 2007;21: 167–179.
18. Summaries of Reiki research studies that have appeared in peer-reviewed journals. *Proceedings* Center for Reiki Research. April 1, 2010.
19. Thrane S, Cohen SM. Effect of Reiki therapy on pain and anxiety in adults: an in-depth literature review of randomized trials with effect size calculations. *Pain Manag Nurs*. 2014;15:897–908.
20. McManus DE. Reiki is better than placebo and has broad potential as a complementary health therapy. *J Evid Based Complementary Altern Med*. 2017;22(4):1051–1057.
21. Baldwin AL, Schwartz GE. Personal interaction with a Reiki practitioner decreases noise-induced microvascular damage in an animal model. *J Altern Complement Med*. 2006;12(1):15–22.
22. Baldwin AL, Wagers C, Schwartz GE. Reiki improves heart rate homeostasis in laboratory rats. *J Altern Complement Med*. 2008;14(4):417–422.
23. Dressin LJ, Sinng S. Effects of Reiki on pain and selected affective and personality variables of chronically ill patients. *Subtle Energies and Energy Med J* 1998;9(1):53–82.
24. Wardell DW, Engbertson J. Biological correlates of Reiki Touch healing. *J Adv Nurs*. 2001;33(4):439–445.
25. Vitale AT, O'Connor PC. The effect of Reiki on pain and anxiety in women with abdominal hysterectomies: A quasi-experimental pilot study. *Holist Nurs Pract*. 2006;20(6):263–272.
26. Hulse RS, Stuart-Shor EM, Russo J. Endoscopic procedure with a modified Reiki intervention: a pilot study. *Gastroenterol Nurs*. 2010; 33(1):20–26.
27. Baldwin AL, Vitale A, Brownell E, et al. Effects of Reiki on pain, anxiety and blood pressure in patients undergoing knee replacement: a pilot study. *Holist Nurs Pract*. 2017;31(2):80–89.
28. Olson K, Hanson J, Michaud M. A phase II trial of Reiki for the management of pain in advanced cancer patients. *J Pain Symptom Manage*. 2003;26(5):990–997.
29. Tsang KL, Carlson LE, Olson K. Pilot crossover trial of Reiki versus rest for treating cancer-related fatigue. *Integr Cancer Ther*. 2007;6(1):25–35.
30. Whelan KM, Wishnia GS. Reiki therapy: the benefits to a nurse/ Reiki practitioner. *Holist Nurs Pract*. 2003;17(4):209–217.
31. Brathovde, A. A pilot study: Reiki for self-care of nurses and healthcare providers. *Holist Nurs Pract*. 2006;20(2):95–101.
32. Vitale A. Nurses' lived experience of Reiki for self-care. *Holist Nurs Pract*. 2009;23(3):129–141.
33. Cuneo CL, Curtis Cooper MR, Drew CS, et al. The effect of Reiki on work-related stress of the registered nurse. *J Holist Nurs*. 2011;29(1):33–43.
34. Díaz-Rodríguez L, Arroyo-Morales M, Fernández-de-las-Peñas C, et al. Immediate effects of Reiki on heart rate variability, cortisol levels, and body temperature in health care professionals with burnout. *Biol Res Nurs*. 2011;13:376–382.
35. Hemsley M, Glass N. Nurse healers: exploring their lived experience as nurses. *Aust J Holist Nurs*. 1999;6(2):28–34.
36. Hemsley MS, Glass N, Watson J. Taking the eagle's view: using Watson's conceptual model to investigate the extraordinary and transformative experiences of nurse healers. *Holist Nurs Pract*. 2006; 20(2):85–94.
37. Jackson C. Healing ourselves, healing others: third in a series. *Holist Nurs Pract*. 2004;18(4):199–210.
38. Quinn JF. The self as healer: reflections from a nurse's journey. *AACN Clin Issues*. 2000;11(1):17–26.

Copyright © 2019. All rights reserved. No part of this article may be reproduced, distributed, or transmitted in any form or by any means, including photocopying, recording, or other electronic or mechanical methods, without the prior written permission of the AHVMA, except in the case of brief quotations embodied in critical reviews and certain other noncommercial uses permitted by copyright law.