



BodyMindSpirit ~ Whole News RNAO-CTNIG Newsletter

Complementary Therapies Nurses'
Interest Group

Volume 10

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Consulting Editor: Darka Neill RN, BScN, RTTP, Reiki II

Winter 2013 Edition



photo courtesy of Karen Short

During the Holiday Season more than ever, our thoughts turn gratefully to those who have made our progress possible and the CTNIG vision promising. And in this spirit we say, simply but sincerely... Thank You and Best Wishes for the Holiday Season and a Happy New Year.

From the Editor – Darka Neill



photo courtesy of John Neill

During this fall winter/season there are a number of holidays in many faiths which our members celebrate...Christmas, Diwali, Eid al-Adha, Hanukkah, Kwanzaa, Yule. If you do not celebrate any of the above holidays, but don't want to feel left out, you could start commemorating Festivus, the December holiday invented by Frank Costanza on Seinfeld. No matter what you celebrate this holiday season, if at all.... wishing all our members a season filled with love and a New Year rich with blessings. May beautiful moments and happy

memories surround you with joy and peace.

My time as editor is coming to an end once again. I thank all the CTNIG executive and members who have supported and encouraged me in this role. It has been a rewarding, humbling and insightful journey. I have gained a wealth of knowledge in my role as editor, especially from all those who have contributed to our newsletter in the past.

I hope you enjoy this issue of the newsletter with a number of note worthy contributions from our members (including nursing student members) sharing their thoughts, experiences and fiction writing. In future issues you may just find a different format. Be on the look out!!!

I am pleased to let our new editor, Theresa Sullivan, greet you as she introduces herself as well as introduce Sandra Milley, a nursing student who has joined our editorial team.

Introducing New Editor, Theresa Sullivan



Merry Christmas and Happy New Year to my fellow RNAO-CTNIG sisters. My name is Theresa Sullivan and I am looking forward to taking on the role of editor of our newsletter. My inquisitiveness to explore and to practice holistic patient care has taken me and continues to take me on a journey of self reflection and a deeper knowledge of the BodyMind and Soul and this is reflected in the connection that I have with others.

As a weeping willow grows from a seed, so has my professional development and I am excited to continue to branch out to my sisters to explore the new and the old art of healing. The trunk of my career stems from my experienced knowledge of intensive care. I have branched out to touch on emergency care, mental health, case management, mental health and most recently an independent business in holistic care. I have

trained at the Transformational College of Arts in Toronto where I was taught the art of aromatherapy massage, herbal treatment, nutrition, reflexology, energy healing, meditation, personal self growth and private business. I consider these modalities as an extension of my skills as a Registered Nurse and when intuitively appropriate, I apply it in the care I provide. I am hoping to continue to grow and connect with the like minded. I believe that together we can change the present health care system to embrace CAM so as to reflect the true meaning of BodyMind and Soul care giving.

"It is often thought that medicine is the curative process. It is no such thing; medicine is the surgery of functions, as surgery proper is that of limbs and organs. Neither can do anything but remove obstructions; neither can cure; nature alone cures. Surgery removes the bullet out of the limb, which is an obstruction to cure, but nature heals the wound. So it is with medicine; the function of an organ becomes obstructed; medicine so far as we know, assists nature to remove the obstruction, but does nothing more. And what nursing has to do in either case, is to put the patient in the best condition for nature to act upon him."

- [Florence Nightingale](#) *Notes on Nursing: What It Is, and What It Is Not*

Introducing Nursing Student Contributor, Sandra Milley

Sandra is a nursing student who returned to school in her late 30s to fulfill a life-long dream of being a nurse. She is now in her final year in the York University-Georgian College Collaborative Nursing program and is considering specializing in ER or mental health nursing. As well, at some point in her career, she would like to find a way to combine her nursing skills with the communications and media relations skills she developed in her previous career.

She is currently a level one Reiki practitioner with plans to get her level two when she actually has some time between exams and homework. She is looking for advice and guidance on how to integrate Reiki into her nursing practice. She would be very interested in finding a mentor that could help her take the steps to start her career as a practicing nurse integrating complementary therapies.

Login to CTNIG Website Members Area

Please check out our website at rnao-ctnig.org/

To login to members area:

User name - **ctnig**

Password - **holistic**

Please keep for future reference

▼ “A Few Words” from the President Kim Watson

“Wishing all CTNIG Members A Very Happy Holiday Season”

“Blessed is the season which engages the whole world in a conspiracy of love.”

~ Hamilton Wright Mabie ~

“**JOY = Journeying Onward Yielding**”

~ Kuranda Plus and the Circle of Seven ~

The spirit of the holiday season is purely an example of how we each should live everyday and what I am sure conspires within you as the holiday approaches; at least it does for me. Like a seed planted in the ground, it is beyond my control to prevent its growth outward and upward, seeking the higher ground. It is the child from within me that cannot resist the **JOY of the season**. It almost sneaks up on me, at first I note I always have a smile on my face which I cannot help to share. That smile is warm enough to light a fire in my heart, a fire necessary to extend the love I share throughout the season. It is this love that can set afire the embers where good will and kindness towards all persons can follow the whole year through. Regardless of what nationality or religion you are, you cannot escape being touched by some of the traditions that Canadians practice at this time of year. Our streets are decorated with lights, we drop our coins into the Salvation Army pots, prayers are said, candles are lit on the menorah, the tree is decorated by the family, mass is attend, the music becomes merry, our malls deck their shelves with sales, and though many get caught up in the commercialism of the season, the message of love is clear! We are here to experience and share love. It is about the journey, and I find for me, it is at Christmas that the message of love becomes clear and the embers become even brighter.



You cannot help but feel the JOY during the holiday season, though it is after the decorations are taken down and we have called in the new year that the journey goes on. In the midst of the merriment it is easy to keep your smile and heart full of love! It is the journey of the next year where the spark of the JOY is needed to be kept alive. JOY for me is **journeying onward yielding**. My spiritual master has taught me the wisdom of this, and in the ups and downs of my life, be it my job, my family, my relationships, etc. I am reminded it is about the flow!

- **Journeying** is travelling from one place to another
- **Onward** means moving forward or continuing
- **Yielding** is to give forth, produce or supply something, a product or a result; it is to give way, submit, concede or surrender, whether through force or persuasion or natural result; it is to grant or allow; it is being compliant, submissive, or flexible; it is being pliable or soft; it is the quantity of a specified product obtained in a reaction or series of reactions. **It is the flow!**



So as you go on your **JOY~ful** path during 2014 remember you are a spiritual being having a human experience. On this journey you as a soul decided to come to what I call the ‘Earth School’ to learn all you can, and to feel and share the love. Remember even if it feels you are taking a step or two back, you are still going forward! We cannot travel back, we are always moving forward on our journey. Even with what feels like a pause or rest, we move onward. Take care to **enJOY** the journey, and remember that it does involve distance being travelled and the time taken to do so; so pace yourself. You cannot always hurry the journey either, nor can you slow it down. So remember to yield, as it is in the yielding that the



abundance of this journeying can be found.

As you continue the journey during 2014 remember to hold the CTNIG vision in your heart, mind and soul! It is thorough what you do or experience with complementary therapies that will help the CTNIG to complete their mission. As holistic nurses who are interested in, or practice complementary therapies the time is upon us to show up as leaders in this important option; it is one of the next big things in healthcare. By being a member of the CTNIG you are holding the faith by belonging. **Thinking of doing more, you can also choose to join us on the Executive as an Officer, or participate on a Committee, or even be a Liaison for the group for your area or workplace.** Our group is 10 years young and we need all of us to make our vision a reality. If you are interested in learning more please do not hesitate to contact me, or check out our website: www.rnao-ctnig.org today! We need you and no experience is necessary!

I would love for you to put us on your 2014 agenda as well. Consider coming to the **RNAO AGM May 2-3rd**. Our AGM will occur on the Saturday morning of May 3rd. It is a great time to meet with your Executive, as well listen to a keynote speaker. There is no charge and you can bring a guest; refreshments will be provided. Also if you have any ideas on how we can assist you and Ontario in meeting our vision, do send me an email. We are continuing to provide presentations across the province about the CTNIG and Complementary Therapies in Healthcare. If your local RNAO chapter wants to have us come and talk, that too can be arranged. Contact me to learn more.

Once again, **enJOY the holiday season, and I wish you the best in the New Year!**



Blessings, in love & in light, Namasté, Kim

▶▶▶ **"What's Happening" members share**

Pajama Angels

Co-founder Darlene Szecsei-Albano, RN, BScN, S.A.N.E.

sometimes we need a little wing power to fly



Photo Courtesy: Angel Diane Photography

Wing Power Fund

A Fund for Complementary Therapies

Intended to help people who experience a financial hardship as a result of their cancer/chronic disease diagnosis at all points in their healing/wellness journey including: diagnosis, treatment, palliative care and survivorship.

About Darlene....

Darlene is a nursing graduate from both St Clair College (1991) & the University of Windsor (1994). She has worked in various front line and managerial positions within nursing, including: med-surg, urology, gerontology, emergency room, sexual assault, domestic violence, child sexual abuse as well as a hospital clinical instructor. Currently Darlene works in the automotive industry at a company her father started in 1956.

Darlene's sister Maggie died from breast cancer complications at the age of 41 in 2002. She developed myelodysplasia (a leukemia) from her chemotherapy. What was meant to cure her sister, created a new cancer and eventually killed her. This tragedy only bolstered prior beliefs Darlene had about treating the whole person through complementary therapies. Darlene's family and friends became

huge advocates of the pink ribbon but soon felt that the direction of their fundraising needed a higher purpose and therefore created and co-founded the charity in her sister's memory called: **Pajama Angels**.

Darlene's mom is a breast cancer survivor since 1994 and her aunt is currently battling metastatic breast cancer. Her husband is also a kidney cancer survivor. Her father battles Parkinson's disease. Complementary therapies are highly integrated among her family.

Darlene is a paradigm shifter, integrative medicine advocate, breast cancer abolisher, dreamer, creator, change agent, messenger, Yogi, RN. and when not working full time, she is often in pajamas.

To learn more about how the charity got its name and its mission, please visit: www.PajamaAngels.org

Pajama Angels Wing Power Fund

Pajama Angels has started a Wing Power Fund for complementary therapies in Windsor-Essex. It is our belief that an integrative approach to healing a person is paramount in healthcare.

The Wing Power Fund is intended to help people who experience a financial hardship as a result of their cancer/chronic disease diagnosis and treatment. The funding program helps people at all points in their healing/wellness journey including diagnosis, treatment, palliative care and survivorship. Applicants can apply or someone can apply on their behalf. Applicants can receive reimbursement up to 6 months with receipts and can receive a max of \$500.00/ per applicant. The Wing Power Fund has helped 13 applicants since August 24, 2013. Funding is available for complementary services in emergency, short-term situations or when funding from other sources and services are not available. Expenses incurred within 6 months of the date of the application will be considered.

RN Journal story on FASD

Featuring Kathy Layte, RNAO-CTNIG Research Chair

In the latest issue of Registered Nurse Journal, the cover feature focuses on Fetal Alcohol Spectrum Disorder (FASD). You will meet the two nurses behind a resolution that was passed at RNAO's 2012 annual general meeting, one of which was our own Kathy Layte. The aim was to raise awareness of the dangers of drinking during pregnancy, and to advocate for better supports for those with FASD. There are approximately 130,000 Ontarians living with this disorder, and nurses have a responsibility to become more aware of its effects on individuals, their families, caregivers and the health-care system, as well as best practices regarding prevention.

▶ ▶ ▶ *Spotlight on Hypnosis*

Hypnosis – Feir Johnson B.A., DCH

Nurses are well positioned to assist their clients in promoting and maintaining health. Many nurses are intrigued with exploring ways other than conventional medicine to support a person's health. Hypnosis falls under this area as a complementary therapy.

Hypnosis was introduced to medicine by Anton Mesmer, a doctor, (1734-1815) in France, [hence our word mesmerized]. He became fascinated by what hypnosis could do, even though he didn't understand how it worked. He cured hysterical blindness. Other doctors took up the cause because they saw hypnosis working. Among them was James Braid (1795- 1860) who developed the name 'hypnosis'. James Esdaile (1808 –1859) was the discoverer of hypnotic anaesthesia. He lowered the mortality rate of scrotum surgery in India from 85% to 5%.

Hypnosis came to the fore again on the battlefields of WWI and WWII. It was found to stop shell shock [PTSD] and haemorrhaging as well as manage and eliminate pain. The work of Dave Elman and Dr. Milton Erickson in the 20th century brought hypnosis into the modern world of psychiatry and physical health.

Hypnosis works directly with the subconscious. The use of words, images which have meaning to the client's belief system, and special processes, are employed while the client remains in his or her altered state. Direct or indirect suggestion and investigating for the 'initial sensitising event' is used in the case of emotional trauma. Pain responds to suggestions when the client is at a deep enough level. To date nobody knows how the subconscious does this. Quite a few scientists are concluding that the mind and brain are not the same thing.

Hypnosis is the use of the person's own subconscious state – not the analytic consciousness. This use can be done alone [self-hypnosis] or guided by another. If you've driven without thinking, gotten dressed without thinking, this is your subconscious at work in the hypnotic [altered] state. Hypnosis succeeds if the client wants it to happen. Nobody can hypnotize a person against his or her will. Hypnosis has no contraindications.

When using hypnosis, as a separate modality, a group of sessions moves from 2 1/2 hours to 1 1/2 hours in length. The first session, the longest, [discussing hypnosis, filling the forms, and beginning hypnosis] is followed by the deeper subsequent sessions [shorter as the subconscious 'learns the ropes'] involving more in depth processes. Short individual techniques such as pain and stress relief can be used in the

workplace. Ideally the two situations work together.

In Britain, hypnosis is taught in universities and covered by insurance. In Belgium, it is used for surgery. Many hospitals in the U.S.A, including the Mayo Clinic, use hypnosis – particularly for burns and intractable pain where drugs are ineffective. Princess Margaret Hospital uses hypnosis [termed creative visualization] to shrink tumours. Few Canadian hospitals make use of this modality.

A best case scenario for the person who becomes a hypnotherapist is: a university or college background, and life experience which allows the practitioner to relate to what the client is expressing. This is energy work and it takes time to adjust your consciousness to the new concepts being taught. The basic training should be several months long to allow for the reading, research, practice and personal development involved.

Due to lack of certification regulations in Ontario hypnosis training and hypnotists vary greatly as to quality. It is best to investigate thoroughly the curricula, hours of training, standing of the school and the background of the trainer before embarking on this study. That being said the use of hypnosis makes profound change – in both the client and the practitioner.

Feir Johnson, an award winning elementary school teacher, possesses a B.A. [Hons] and a master's equivalent in education. As a curriculum writer and teacher, especially assigned to the area of thinking, she has drawn upon her educational skills to write the curriculum for the Innisfree School as well as teach and mentor her students. After early retirement she studied for 3 years further with Breyer State University [U.S.] and received the designation of Dr. of Clinical Hypnotherapy [D.C.H.]

▼ **Education Opportunities**

CTNIG AGM 2014

Planning for the 2014 AGM is already starting! If you are interested in attending, we suggest you note the date now: **Saturday May 3, 2014** in Toronto.

Keep posted or look on our website in the new year www.rnao-ctnig.org

The Innisfree School of Hypnosis Niagara Falls, ON

www.innisfreehypnosis.com

Hypnosis Certification Training

Innisfree Hypnosis certification training is taught in small classes with an emphasis on practice, personal growth and focused learning. Innisfree graduates are trained, over 6 months, in the Innisfree Method as well as all the skills required to be a professional Consulting Hypnotherapist.

While hypnosis is hypnosis, how it is used is completely different depending upon your background. A mental health or medical professional will take this training deeply within the area of expertise. Somebody not in these fields, such as a sports or life coach, will apply it differently and according to the needs of his or her practice

For more information on certified, government authorized hypnosis training and the curricula contact www.innisfreehypnosis.com

▶▶▶ **Articles From Members**

Power of Positivity

I would like to share a perspective of mine that is very near and dear to my heart; positivity. It is a conscious thought throughout each day. As a Nursing Student, I am learning much of the body and its functions, disease, and the patient experience. I often hear about the benefits of medicine, lifestyle change, and other forms of healing that promote wellbeing. Yet, I sometimes feel that the idea of positivity is grossly underestimated or overlooked altogether.

Being positive has tremendous impact on the body, mind, and spirit. From a mental and emotional perspective, for example, a person's outlook of their health status impacts how they cope when faced with illness. From a pathophysiological perspective, being positive increases the brains activity of feel good hormones such as serotonin and epinephrine. This can contribute into improved sense of wellbeing, which can positively impact on those facing illness.

I understand now that when I am upset, it not only changes how I feel, but it changes me physically, on a micro level. I am ultimately different as a person because my internal chemicals have been altered, even if only slightly. The miraculous body changes constantly, but I wonder if consistent feelings of negativity over time may contribute to illness and disease.

This is why positivity has such an importance in my life. Negativity has its role and function as well. If I truly feel that I can justify being upset, then I get upset! Why not? When times like these arise, I take time to let myself experience those emotions. I do, however, allocate a timeframe of my negativity, then, I let it go. I refuse to let negativity take more time then it needs. I refuse to change my body and emotions to a state where it may have negative health implications. Once I experience and release the emotions, I jump right back in to a positive state of mind.

Positivity has contagious attributes, which quickly spread from person to person. In health care settings, I find that my positive attitude instantly impacts those around me. I am put in situations that are sometimes difficult to comprehend due to the seriousness of nature, but a smile is almost always welcome. Of course there are times when it is not appropriate, but for the most part, I enjoy sending out a smile a receiving one in return.

More and more research is being done surrounding patients with a positive attitude and their positive health outcomes. It is gaining recognition world-wide, and hopefully continues to do so. It is important for patients and families to stay positive in whatever health care situation they find themselves in. For nurses, many of whom are witnesses to pain and suffering, it is only fair to say that desensitisation can occur. We need to keep in mind our own mental, emotional, and physical health. It has been known that it takes more physical effort to frown then it does to smile, so take it easy, and smile. Your mind, body, spirit, as well as those around you, will be glad you did.

Catherine Cenkowski
Honours BA '10
Honours BScN '15 Candidate
RNAO Region 6 York U Representative
RNAO-CTNIG Student Contributing Editor

Freedom to Choose...Freedom to Change

By Pat Kennedy, RN CTT

Wow? I cannot believe it! Four decades of nursing!

The shift and the evolution of this wonderful profession have contributed to my journey into natural preventative medicine over the last 25 years.

Teaching people to get back to their roots naturally, focusing on the body, mind, and spirit connection and proudly educating, empowering and supporting women on preventative and complementary medicine SHOULD steadily become to mission of nurses today.

As a student Nurse representing the Canadian Cancer Society as Miss Hope 40 years ago I travelled around Ontario and spoke on the benefits of increased fibre in our diet. How simple was that message?

The **Message of Hope** as I call it now is not as simplistic as it was then as our medical model evolves. Women are seeking answers in regards to natural solutions and taking back their power to make informed decisions regarding the health of themselves and their family.

“Early Prevention vs. Early Detection. Do not wait to get something to detect!” is something I often say and is an effective way to get the **Message of Hope** heard and understood.

This **Message of HOPE** now encompasses being **Holistic, Optimistic, Preventative and Educated**.

As both myself, and the wide array of my radio show co-hosts and guests suggest, it is an all-encompassing plan of action, a complex mesh of body, mind and spirit modalities and therapies. A must for achieving efficacy!

I see many women who live in fear and judgement regarding their choices with allopathic or complementary medicine, as they shift to being educated, giving informed consent, (particularly in the arena of breast cancer prevention), and adopting the preventative model.

As a grandmother warrior, I live my passion daily which is to share what I have known and had a visceral connection with in regards to **Natural Preventative Medicine** and am on a mission to get across the importance of passing the knowledge about the preventative model down to the next generation.

It is so refreshing to see that the Physicians, Nurses and Practitioners today speak their truth more freely about this brilliant integrative approach.

We must remember that as Nurses, we were the first holistic practitioners! We were the soft shoulder to cry on, the people caring to incorporate preventative measures and education to our patients and not just aid in physical treatments.

The message we now carry is...Get back to your roots naturally and open the door to not just a preventative approach but more effectively a holistic approach at the same time respecting what both mainstream and natural medicine bring to the table.

You have the power to make a difference for the next generations!

▶ ▶ ▶ **Self Care Tips**

Immerse yourself in nature's healing beauty....



Photo courtesy of Karen Short

For those of you who want to recreate the nature feel of the cottage or a beach in the city here are some ideas.

Decorate with nature

Cottage living embraces natural elements (wood, stone) so bring that outdoor tranquility inside your home.

- During the fall and winter, cut cedar and pine sprigs and add them to your fresh bouquets for texture and smell.
- Add colour to your coffee table or bathroom by filling a glass bowl with lots of your favourite sea shells or stones from the beach.
- Display your favourite water, wildlife or sunset photos in frames.

Listen to nature

Recreate the sounds of the cottage or beach that peacefully guide you to sleep at night and just as gently wake you in the morning.

- Download nature sounds from iTunes or get a sound spa CD, which plays a selection of pre-recorded nature sounds to help you fall asleep.
- Some clock radios have nature sounds to wake you instead of a jarring alarm.

Go to a place in nature

- There are many parks and hiking paths reminiscent of the cottage where you can experience nature in the city .
- Take a mindful walk and focus on nature's sites, sounds, smells, or tactile sensations of trees, lakes and streams, rocks, birds, rustling breezes and open sky.



▼ **Research Articles**

1. Homeopathic solutions have different properties than plain water

To view a compilation of studies go to extraordinarymedicine.org

2. Iris Bell's theory of how homeopathy works

For full text go to BioMedCentral.com.

3. Will a Spoonful of Cinnamon Help the Diabetes Meds Go Down?

Ann Fam Med. 2013;11:452-459.

Medscape Medical News © 2013 WebMD, LLC

Marlene Busko

Sep 09, 2013

Cinnamon is one of the natural products that are of interest for diabetes because some animal studies and small clinical trials have suggested that it may lower blood glucose, an effect attributed to its active component cinnamaldehyde. In a new meta-analysis of 10 studies in patients with type 2 diabetes, taking cinnamon supplements improved fasting blood glucose and cholesterol levels, but not glycated hemoglobin (HbA1c) levels. HbA1c likely was not affected because the studies were too short, and they were also very small and diverse, making it difficult to draw any clinical implications.

The trials did not find any significant side effects with cinnamon use. The advantages of cinnamon are its cost, tolerability, and relatively safe profile," however "long-term administration of high-dose cinnamon may possibly be unsafe due to the coumarin content" of cinnamon, which has been associated with liver damage in animal studies. Long-term clinical efficacy also remains to be determined

Based on this meta-analysis, "I wouldn't recommend cinnamon instead of [diabetes] medication," and long-term effects are unknown, senior author Olivia Phung, PharmD, from Western University of Health Sciences, told *Medscape Medical News*. However, small doses of a cinnamon supplement could be used along with traditional diabetes medication. Prof. Phung and colleagues conclude that "caution should be exercised in applying the results of this analysis to patient care because of the [differences] of the dose and duration of cinnamon use and uncertainty of the ideal patient population."

To view full article <http://www.medscape.com/viewarticle/810629>

▼ **Research**

4. Complementary and Alternative Approaches to Parkinson Disease Symptoms

Désirée A. Lie

November 05, 2013

From Medscape Family Medicine <http://www.medscape.com/familymedicine>

Because of the chronicity and inevitable progression of Parkinson Disease (PD), patients and caregivers often seek alternative, nonmedical forms of therapy to address symptoms. The prevalence of complementary and alternative medicine (CAM) use in PD is reported to range from less than 50% to more than 75%. Alternative therapies include acupuncture, massage, tai chi, yoga, herbal preparations, and supplements.

There has been an increase in the number of studies examining alternative modalities for the management of PD. Clinicians can now offer modalities that have some evidence for efficacy in improving the function and quality of life of patients with PD.

For full text join Medscape for free and view [full article here](#).

5. Complementary and alternative medicine in the treatment of refugees and survivors of torture: a review and proposal for action

Mckenna Longacre, M., Silver-Highfield, E., Lama, P., & Grodin, M.A.

Torture. 2012.22(1): 38-57.

Survivors of torture and refugee trauma often have increased needs for mental and physical healthcare. This is due in part to the complex sequelae of trauma, including chronic pain, major depressive disorder, posttraumatic stress disorder (PTSD) and somatization. This article reviews the scientific medical literature for the efficacy and feasibility of some complementary and alternative medicine (CAM) modalities including meditation, Ayurveda, pranayama/yogic breathing, massage/body-work, dance/movement, spirituality, yoga, music, Traditional Chinese Medicine and acupuncture, qigong, t'ai chi, chiropractic, homeopathy, aromatherapy and Reiki specifically with respect to survivors of torture and refugee trauma.

The preliminary research suggests that the certain CAM modalities may prove effective as part of an integrated treatment plan for survivors of torture and refugee trauma. Further research is warranted.

►►► **Websites**

The Canadian Nurse Index

www.nursingindex.com

The Canadian Nursing Index is the most comprehensive guide to Canadian nursing resources on the internet including education, employment, organizations, products, literature, humour, hospitals and student nursing. This is a wealth of information on one site.

►►► **On the lighter side....**

*How do trees get on the Internet? **They log in.***

*Why was the cat afraid of the tree? **Because of its bark.***

The History of Medicine:

2000 B.C. - Here, eat this root.

1000 A.D. - That root is heathen. Here, say this prayer.

1850 A.D. - That prayer is superstition. Here, drink this potion.

1940 A.D. - That potion is snake oil. Here, swallow this pill.

1985 A.D. - That pill is ineffective. Here, take this antibiotic.

2001 A.D. - That antibiotic doesn't work anymore. Here,

EAT THIS ROOT.



Inspirational Corner

The Art of Nursing - Prose

Gowseca Muthiah is a second year student in the Ryerson-Centennial-George Brown Collaborative Nursing degree program. She thought the Inspirational Corner would be a an opportunity for her to share a nursing fictional story she had written. Apart from being a student nurse, Goweseca is a shopping enthusiast, chocoholic, and a procrastinator. Her love for writing started during her senior years in high school when she fell in love with Shakespeare and Dickens and with the encouragement of her English teacher.

Here is her story...



THE ART OF NURSING

by: Gowseca Muthiah



“The sirens of the cop cars led our instincts to kick in and we ran like never before. It seemed as though we were in the jungle. Only, we weren't the predator, we were the prey. We had to find safe ground A.S.A.P. Cop cars were chasing us from every direction. Three coming from the direction of the cottage, and three coming from the direction of the city.

My heart was pumping faster than ever. I could feel the adrenaline in my veins kick in. We didn't stop, even through the sirens blaring. Soon, the cops were near us. One of the cars stopped, followed by the rest. Two cops got out of the car. One had his gun pointed. Cop Number 2, who had come from the passenger side of the car, jumped out, gun pointed at us, with a bullhorn. Cop Number 2 yelled through the bullhorn, “Mr. Carter Night let go of Ms. Celeste Hawkins. Stop running and put your hands up. We have been given authorization to shoot if necessary!”

We continued to run away further from their reach. I looked at Carter, as I felt the weight of these words sink in. He gripped my fingers harder, reassuring me, “*Don't worry*”, yet I could feel we were caught in a bad romance. Suddenly, I heard the trigger of the gun and turned around just in time to see a bullet come towards Carter's back. I snatched my fingers away from Carter's and dove in front of the direction of the bullet, his back.

Thankfully, the bullet didn't hit him.

I let out a cry, and felt the piercing go through my flesh, and warm, red liquid smear from inside out onto my shirt. I knocked into his firm back. It felt like someone punched me. Hard. Who knew a small bullet like that could pack such a punch!

Inspirational Corner

I felt myself fall, and I struggled for air. My legs dragged a bit, before my feet dug into warm sand entering through the ins and outs of my toes, seeping through my flip-flops. His arms caught my fall, and I strived to stay alive. Breathlessly, I clasped down on the wound, where the toxins were probably penetrating and circulating throughout my body now. The pain never ceased. Carter looked at my bloody shirt; he put one of his hands over my hand covering the wound. The blood soaked onto my shirt due to the added pressure, and slid down my belly pooling to the left of my body. Through all the noise, I could only focus on one thing. I faintly heard a silent scream echo through my ears, and droplets of water hit my cheek. I felt calm now. My eyes started to close. Warm hands stroked my cheek.

“Don't go, Celeste. Not now...I need you. You can't leave me now!” With my bloody hand, I touched his cheek.

“I'm...not going to die... I,” I struggled to say, more for his sake than mine. His tears were hard for me to bear. He looked so vulnerable, and unlike his usual firm, strong hands, I felt the shaking of his hands beneath my back. As my last few moments were coming to an end, I tried to smile, I tried to comfort him, I tried to say his name, yet, and words wouldn't come out of my mouth. Even as I tried to deny my forthcoming death, I knew this time when I close my eyes, I would never open them again. My eyes blurred.

Carter...I love you.” She said.

Coming back to reality, I looked at my patient feeling heartache, and empathy by her story. Tears slid down both our faces. This young woman was merely a few years younger than me, and in such a short time she had experienced so much. I assured myself that as a nurse, I had to be non-judgemental and supportive of my client. After the accident, this young woman lost her memories, leaving behind one haunting memory. Being in the ICU all day long didn't do a thing for her. She would always question who this “Carter” was, but I was honest in the fact that I could never answer for her. Though, whatever memories were gone, she still had those happy feelings whenever she thought of him. A permanent, crease line seemed to be appearing on her forehead, from her struggle to remember her past.

The healthcare team knew that her days were numbered. The wound had become severely infected. Antibiotics were failing. In the precious time we had left, I knew I had to do everything I could for my client. Detectives were constantly fleeing in and out of her room, whenever they could. She would be exhausted by their constant questioning. After those sessions, I would walk into the room, and she would manage a small smile for me. I would always stay by her side, and be a patient listener. Instead of provoking her old memories, I would bring a small item with me so we could discuss the present her. A magazine would be all that it took for her to engage in an active conversation. We would share a few laughs and I knew that was the best medicine form of medicine.

One evening after my shift had ended and I was going home, I stopped by her room for the daily good-bye. She looked utterly drained that day, and I hadn't had a chance to talk to her that day. She called me over, and she managed her small smile again.

BodyMindSpirit

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Whole News

RNAO-CTNIG

Newsletter

Complementary
Therapies Nurses'
Interest Group

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