How can aromatherapy reduce the level of stress and anxiety?



Aromatherapy is a form of Alternative and Complementary Medicine based on the use of essential oils to promote health, beauty, physical and psychological well-being (Keville and Green, 2009). Too much pressure or prolonged pressure can lead to stress, which is unhealthy for the body and mind (NHS, 2010). Anxiety is a feeling of disquiet, such as worry or fear, which can be mild or severe. Stress is one of the most frequently condition in United Kingdom. A research study was found that during 2008 and 2009, over 400 000 people in Britain experienced work- related stress that was making them indisposed (NHS, 2010). This specific topic is chosen because there are limited research studies about aromatherapy treatment and stress. Recent studies have not sought to isolate the effects of aromatherapy associated with stress and anxiety. The aim of this report is to giving evidence about the effectiveness of Aromatherapy in order to relieve stress and anxiety.

Can Lavender capsules alleviate mild anxiety?

According to Bradley et al. (2009), anxiety is highly issues in the Western world, and is estimated to cost five billion pounds per annum in the United Kingdom in prescription medicines alone (Malizia, 2002). Complementary and Alternative Medicine (CAM) like Aromatherapy reduce the level of stress and anxiety. Lavender (Lavandula Angustifolia) is one of the most popular essential oils used to treat these specific conditions (Price and Price, 1999). However, there are lacks of evidence about the use of lavender. Both Lehrer et al. (2005) and Moss et al. (2003) found that lavender and other specific essential oil can reduce anxiety and negative mood. The major component of Lavender linalool, can cause physiological deactivation (Heuberger et al., https://assignbuster.com/how-can-aromatherapy-reduce-the-level-of-stress-and-anxiety/

2004). The aim of this research study was to compare the effects of two doses of orally administered lavender with a placebo in male and female, during a low anxiety film, a high anxiety film and a low anxiety recovery film. During anxiety film clips have been expose to increase levels of physiological arousal typical of the somatic components of anxiety, such as cardiovascular measures, electro dermal skin response (GSR), heart rate (HR) and respiration (Kreibig et al., 2007). Moreover, these specific film clips has been shown to increase mild fear and anxiety. They found that lavender was activated in the blood steam during the low anxiety film, but lavender have not stimulated during a low anxiety recovery film (Bradley et al., 2009). The result of this research study has been shown that lavender capsules and placebo are not affected for anxiety states.

Afterwards, they decrease the amount of lavender capsules and placebo (sunflower oil) to two hundred ml. During the neutral film, two hundred ml lavender significantly decreased heart rate and electro dermal skin response compared to placebo. However, lavender have not any particular effects on respiratory during any of the film clips. Using a two hundred ml lavender dose caused a greater self-reported state anxiety reduction, compared to the placebo, after the neutral film (Bradley et al., 2009). The lavender enters to the blood steam during the neutral film and peaked during the anxiety film but lavender's effects may be for a short term. At the same time, the present study analyse the different effects of two doses of orally administered lavender with a placebo based on anxiety in male and female participants. They observed that were significant decrease in anxiety level in females rather than in males. Moreover, animal studies provide evidence for

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pharmacological properties of lavender capsules. Lavender oil shows similar effects to exploratory anxiety (Bradley et al., 2007).

However, lavender oil is a complex mixture that provide different effects and complexity if its pharmacology. Moreover, other studies comparing the whole oil with linalool and linalyl acetate and they have discovered that lavender has beneficial anxiolytic effects. On the other hand, Buchbauer et al. (1993) cannot identify the effects of lavender on self-reported mood but they recommended that lavender have some physiological measures. Also, they reported that lavender have not anxiolytic effects during stressful situations. Lavender appears to have beneficial effects in relieving mild anxiety, but further work is need to identify the lavender effects during anxiety states. Future studies should examine the effects of lavender essential oil on anxiety and well-being in both male and females.

How can clinical aromatherapy use of emotional distress?

According to Butje et al. (2008) the most safety and effectiveness treatment of emotional distress is aromatherapy, although in emotional distress are often treated with psychotherapeutic agents. This particular article presents the physiological effects of scents, reviews the research on aromatherapy in based on emotional distress. Aromatherapy is one of the fastest growing modalities in CAM in United States (d'Angelo, 2002). The sense of smell activates the autonomic nervous system, as a result the smell is alleviates muscle tension, altering mood, reduce anxiety and interrupting the stress response. The sensation of smell is associated with relaxation, attention, performance, healing and these may be mediated purposefully with different

aromas (Field et al., 2005). For instance, lavender is related to decreased anxiety, improved mood and increased sedation (Moss et al., 2003).

Peppermint and Rosemary stimulates the sympathetic nervous system due to the fact that Peppermint and Rosemary protective effect on the body from oxidation stress and promote healing. Moreover, Sandalwood and Bergamot essential oils relieve anxiety, fear and panic attacks. In a study of seventy three healthy college students, different scents produced different mood states following administration of an anxiety-provoking task (Burnett, 2004). They found that Rosemary is the most effective essential oil that soothes tension and anxiety. The most common essential oils that aroma therapists used to reduce anxiety, improve mood and reduce stress are Bergamot, Lemon, Clary Sage, Lavender, Roman Chamomile, Geranium, Rose Otto, Sandalwood and Jasmine (d'Angelo, 2002 and Lis-Bakhin, 2006).

Fowler (2006) used a blend of Ylang Ylang, Sweet Marjoram and Bergamo with Jojoba carrier oil using a modified hand massage technique to people with the feeling of agitated. During the 3 month study, the number of medications that needed for anxiety decreased from six hundred thirty one to three hundred nineteen seven. Another research study found that two hundred adults in Austria received diffused ambient aromas of Orange or Lavender awaiting dental measures. They have noticed that people who receive orange or lavender had positively less anxiety and better mood than those who had music treatment (Lehrner et al., 2005). However, another study in United States found that hundred eighteen patients who were awaiting endoscopy surgery, did not have any difference in their anxiety level before and after lavender inhalation. Consequently, Aromatherapy may

be better for moderate anxiety than for severe anxiety (Muzzarelli et al., 2006). Hai et al. (2000) compare the effects of lavender and hiba oil on depression and anxiety conditions in a group of fourteen haemodialysis patients. Although Lavender decreased anxiety levels, hiba oil successful decreased on both anxiety and depressions levels. Buckle (2007) notes that aromatherapy treatment have been improve the relaxation, well-being and agitation.

Lemon (2004) studied the beneficial of nine essential oils on anxiety and depression in thirty two psychiatric patients. He noticed that nine essential oils are exhibited significantly improvement on depression, anxiety and are changed emotional states, but in short-term. The research present mixed findings on effective of aromatherapy because the lack of evidences. Therefore, more research study is needed to quarantine the effects of particular oils on mood, management of emotional distress and the use of Aromatherapy in children, older adults where have stress in order to maintain their stress levels.

Can Aromatherapy massage decrease the anxiety level in patients with advanced cancer?

Patients with cancer establish that they were happy with the Complementary therapies they had used in the United Kingdom (Soden et al. 2004).

Aromatherapy massage is through to be advantageous for alleviates pain by stimulating endorphin release and by reducing muscle tension and anxiety.

The goal of massage is to provide relaxation and reducing anxiety level. This research study commented that Aromatherapy massage may have anxiolytic

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effect in human function. The objective of the study was to improve sleep quality, reduce anxiety, depression and improve overall quality of life to patients with cancer. Those patients entered the study with varying level of physical and psychological symptoms, they were put into three different groups, which was massage with Lavender essential oil and Sweet Almond carrier oil, also massage with an inert carrier oil only and treatment without massage also patients who receive treatment with Lavender essential oil and Sweet Almond carrier oil and patients who had massage with inert carrier oil, did not reach significant improvement in sleeping.

The evidence which associated with the effects of aromatherapy and massage in patients with cancer is not demonstrated. This research study does not recover the beneficial effects of massage in patients with advanced cancer because patients often felt powerless to complete the questioners and they did not attend weekly for the treatment sessions. Complementary therapies such as Aromatherapy massage are often supply volunteer therapists with limited time, due to the fact that there is not enough research study to maintain the effectiveness of Aromatherapy treatment in the palliative care (Soden et al 2004).

Can Aromatherapy massage reduce stress and anxiety of nursing staff during in summer and winter?

The achievements of this article are found the effectiveness of Aromatherapy massage on the stress and anxiety levels of emergency nurses comparisons of the seasonal. Also Yang et al. (2001) found that emergency nurses had higher levels of professional stress because they have lot of heath care

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responsibilities. Moreover, this stressful job can affect the quality of the nursing care as a result, nurses become less productive in their job. The study used one group for pre-test, post-test quasi experimental design. The essential oils which were available for this study were Rose, Lavender, Lime and Ocean Breeze that consisted of Lavender, Ylang Ylang, Bergamot and Patchouli. The aromatherapy massages with music were achieved over two twelve weeks period, one during summer and the other during winter months. The results show that fifty four per cent of participants had moderate to extreme anxiety in summer, and in winter sixty five per cent participants had moderate to extreme anxiety. After, Aromatherapy massage only eight per cent of participants in summer and winter were very anxious. This is indicating that Aromatherapy reduced anxiety levels more in winter compared with summer. Aromatherapy massage with music are decreased anxiety and may lower the stress level of nursing staff, thus increase nurse's job achievement.

On the other hand, massage was effective in reducing anxiety levels in short term during winter and summer. There are not enough literature studies to improve the qualities of aromatherapy treatment based on staff anxiety. There has been limited research on the use of massage to reduce occupational stress. More research studies are needed to measure the effects of low anxiety and the implication of anxiety and stress levels on patient care (Cooke et al. 2006).

Is Lavender a beneficial essential oil of Aromatherapy reducing stress and anxiety?

Although Lavender seems to have useful effects in relieving anxiety and stress, evidence appears to be lacking without precise evidence. We don't know if Aromatherapy has beneficial effects in children and older people who have stress. Limited evidences are exposed that lavender helps people with stress and anxiety. According to the gap of Soden et al. (2004) Lavender has quite beneficial effects in relieving anxiety but in short term. According to a research study from Mijong and Know (2010) were testified research to identify the special effects on aromatherapy on an anxiety of nursing students before injection. Nursing students often deal with unaware and stressful issues, as a result, they are promoted high level psychological difficulties (Mijong and Know 2010). Fifty-five nursing students were treated with aroma lamp inhalation using lavender, chamomile and sweet orange essential oil. According to the results, the anxiety scores were magnificently lower than before. The systolic blood pressure and pulse rate levels of students nursing were successfully decreased. This study was shown that aroma inhalation with lavender essential oil was effective in reducing anxiety of nursing students deal with injection practice.

In this specific report was chosen to use quantitative data methodology because it is the greatest methodology research. Quantitative methods of data analysis can be the best importance for researcher who is reporting summary results in numerical footings. This method focus on number of research studies rather than study with a meaning and understanding. Quantitative analysis is using to identify the percentages of the studies, using depth subject, test results, personal interviews, correlation and survey research and for statistical routine. This specific methods measure for

evaluate the comparing outcomes with data and giving attention to relevant causes (Abeyasekera, 2000). For these reasons, quantitative methods are advantageous to answer the question of this report.

The purpose of this report was to find few research studies and answer the question made in the beginning of the report how aromatherapy can reduce anxiety and stress. This report found four research studies supporting almost similar findings. A summarize of the each research study then proceeded and a gap from each study was identified. After the identification of the gap this report made a question which answered in the process and the methodology used to answer the question was the quantitative one.