

Journey to Self-Healing Through Healing Touch

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Exceptional Results

Introduction

Healing Touch is an energy (biofield) therapy encompassing a group of non-invasive techniques that utilize the hands to clear, energize and balance the human and environmental energy fields. The practitioner uses the gentle position of their hands and intentionality to assist the patient in accessing their own healing process and bring about a state of calm. Healing Touch techniques are easy to teach to patients and family members. They are presently taught in more than 20 countries. Because of its standardized curriculum, Healing Touch is taught consistently around the world.

Case Study

This case study incorporates Healing Touch Therapy, a complementary medicine, as an adjunctive wound care strategy along with standard medical practices and plastic surgery. I am a Certified Healing Touch Practitioner with certification through Healing Touch International. Our patient, a 69-year-old female, was referred to Wound Care at Aurora St. Luke's Medical Center by her dermatologist after a year long struggle with non-healing left lower extremity wounds. Past Medical History includes coronary heart disease, peripheral vascular disease, hypertension, hyperlipidemia, and coronary bypass grafting times two, and coronary stent placement. Medications were Toprol, Altace, Levoxyl, Zocor, Aspirin and Lasix.

The patient presented to us on 1/16/04 with wounds measuring 5 x 2.5 x 0.4 cm. proximal and 2.7 x 1.5 x 0.6 cm. distal. Throughout the entire course of treatments, the wound fluctuated between 3.9 to 7.6 cm proximally and 2.3 to 4.4 cm. distally. Treatments with standard wound care products and platelet gel therapy times 3 were tried with no noticeable/measurable results. On 9/2/04, Healing Touch was initiated. Eight HT (Healing Touch) sessions were held on specific dates chosen by the patient. The major HT techniques used were Opening Spiral Meditation/Chakra Connection/Closing Spiral Meditation; Full Body Connection; Chelation 1-4, 5th, 6th, and 7th level; and Chakra Spread. The patient was taught self-healing techniques and was compliant in using these techniques at home. The patient verbalized physical, emotional, and mental changes, which indicated improved quality of life. With HT, pain levels were measured at five sessions with noted decrease in pain for each session. On 3/1/05, a split-thickness, skin graft was performed with post-operative Hyperbaric Oxygen Therapy to support graft healing. Complete wound closure was obtained on 6/20/05. Complete wound closure was obtained on 6/20/05.



Initial Consult, 1/16/04



Initiation Healing Touch, 9/2/04



Healing Touch Concluded, 1/29/05



Successful Skin Graft, 3/31/05



Wound Closure, 6/20/05

Quality of Life Improved

- Physical
- Emotional
- Mental
- Spiritual

Conclusion

This patient's quality of life dramatically changed following Healing Touch. She gradually transitioned from a reclusive, inwardly focused individual to becoming more outgoing, happy, and excited about life again. The wound filled in enough for a skin graft, which was successful, leading to wound closure. Healing Touch has proven to hold a supportive role complementing standard medical and surgical practices.