Ten Approaches to Back and Hip Pain: The Use of Complementary & Alternative Medicine in Patients with Parkinson's Disease

by Kimberly Burnham, PhD (Integrative Medicine)
1. Education, Power and Self Care
2. Strain and Counterstrain/Massage (Therapist and Self-Care)
3. Motor Imagery (Guided meditations)
4. Power Posing for better digestion, brain chemistry)
5. Color Therapy with Green Wood
6. Acupressure / Acupuncture
7. Sensational Medicine / Conscious Sensory Exercises
9. CranioSacral Therapy for Blood Flow
10. Energy Medicine: Reiki Symbols

Back & Hip Pain Relief, The Use of CAM in Patients with Parkinson's Disease
by Kimberly Burnham, PhD (Integrative Medicine)
http://ParkinsonsAlternatives.CreatingCalmNetwork.com
2014 Spokane Pain Conference
Overview & Objectives:
- Significant Pain in Parkinson’s Disease:
  - Locations: Back, Knee, Shoulder
- Complementary and Alternative Medicine (CAM) research;
  - Use of CAM in Hospitals
  - Posture and Postural Release: Body position, pain and function; Motor Imagery; Body posture and brain chemistry
  - Traditional Chinese Medicine Color Therapy: Green Wood, Stiff as a Board.
  - Sensational Medicine for Sleep
  - Overlapping Brain Functions: Caring, Creativity and Frontal Lobe Function; Midbrain and Substantia Nigra Dopamine Production; Basal Ganglia and Disgust Exercises.
  - CranioSacral Therapy, Manual Therapy and Massage: Blood flow to the brain and body.
  - Energy Medicine: Reiki Symbols and The Shape of Dopamine.
Objectives

Objective 1: Educate medical practitioners about alternative medicine approaches. Some studies put the number of neurology out-patients using complementary and alternative medicine at 60 percent.

Objective 2: Describe what a multidisciplinary approach including Complementary medicine might looks like.

Objective 3: Discuss of four specific approaches used by people with Parkinson's disease to address pain and symptoms: yoga, acupuncture, massage therapy, manual therapy, Reiki (used in 800 US hospitals), and yoga.
Significance

“The prevalence of musculoskeletal problems was significantly higher in the PD group than in the control group (66.3% vs. 45.7%, P < 0.001).“

Locations

“Commonly involved body sites were the low back, knee, and shoulder in that order. “

“The low back was more frequently involved in the PD group than in the control group (44.3% vs. 24.6%, P < 0.001), and the shoulder tended to be more involved in the PD group than in the control group (15.0% vs. 8.7%, P = 0.061). However, the knee was similarly involved in both group (12.3% vs. 18.0%, P = 0.121).”

Associated Problems

Among the past diagnoses associated with musculoskeletal problems:
- frozen shoulder,
- low back pain,
- osteoporosis and fracture
were more common in the PD group than in the control group (P < 0.05).

“Older age, female, and a higher score on the Unified Parkinson's Disease Rating Scale I & II were associated with musculoskeletal problems in the PD group.”

Pain and Depression

“The intensity of pain was correlated with depression severity.”

Hopefulness and Support

“There are only 26.8% of the PD patients and 52.5% of the controls with musculoskeletal problems answered that their musculoskeletal problems were recovering.”

Attention

“Furthermore, musculoskeletal problems in the PD group tended to receive less treatment than that of the control group (P = 0.052).”

Author’s Conclusion:

“Musculoskeletal problems were more common in the PD group than in the controls. Furthermore, despite PD patients having a higher prevalence, they did not receive adequate treatment.”

Prevalence

“62/104 parkinsonians and 23/100 controls reported back pain. The prevalence was 59.6% in the parkinsonian group and 23.0% in the control group (P < 0.0001).”

“Chronic back pain is quite common in PD. It is responsible for a substantial functional impact and needs more attention to reduce disability of such patients.”

“Parkinson's disease (PD) is a common and debilitating neurodegenerative disorder without a known neuroprotective cure. Currently, an increasing number of patients with PD resort to complementary and alternative medicine (CAM). Frequently utilized forms of therapy:

- acupuncture,
- massage,
- herbs, and
- vitamins/health supplements, and

These therapies were mainly used to improve the associated motor symptoms of PD.

However, only 11% to 20% of these patients were referred to use CAM by a healthcare professional.”

“At least 40% of patients with Parkinson's disease (PD) use one or more forms of alternative therapy (AT) to complement standard treatments. This article reviews the commonest forms of AT for PD, including

- acupuncture,
- tai chi,
- yoga,
- mindfulness,
- massage,
- herbal medicine, and
- cannabis.”

“It is likely that most ATs predominantly treat PD patients through
- **general mechanisms**, including
- **placebo effects**, 
- **stress reduction**, and
- **improved mood and sleep**, and AT may provide patients with a
- **greater locus of control regarding their illness.**”

“A non-blinded pilot study of the safety, tolerability, and efficacy of acupuncture (ACUPX) for symptoms of PD. On the patient questionnaire, 85% of patients reported subjective improvement of individual symptoms including
- tremor,
- walking,
- handwriting,
- slowness,
- pain,
- sleep,
- depression, and
- anxiety. “
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  - Body position, pain and function;
  - Motor Imagery
  - Body posture and brain chemistry

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- decrease in tremors,
- alleviation of pain,
- speeding up of gait and
- improvements in respiration,
- facial expression,
- speech and mood.
METHODS: Single-Subject Research Design Case Study. The neurologist's evaluations were a month apart while the physical therapy assessments took place on the day before and the day after the two week treatment protocol. The participant also completed six questionnaires.

TREATMENT: In this case study 60 hours of Integrative Manual Therapy took place over a two week period (five hours each day on 12 days). Nutritional and self-care recommendations were made after the post testing
RESULTS: The 62 year old man diagnosed four years ago with PD made improvements in virtually all assessed categories. Notable gains include a 48.6% improvement in total UPDRS scores. Schwab and England scores changed from 70% to 80% of normal function. The Up & Go Test and 10 Meter Walk showed improvements in walking speed and stride length. Lung capacity readings (a spirometer measurement) improved from 2800 cc to 3300 cc. The PDQ-39 questionnaire showed a 67% improvement in symptoms. The Medical Symptoms Questionnaire (MSQ) score improved 51.3%.

The McGill Pain Questionnaire showed a 73.3% decrease in pain, primarily back and hip pain.
**McGill Pain Questionnaire**

15/45 described as “Distressing”  
4/45 described as “Mild”

**Pain 45 possible points**

**Pain on a 1-10 scale**
DISCUSSION: The results show important changes in function, pain, and general well-being. This is significant given the expected 3.1% annual increase in the UPDRS motor scores and a 3.2% decline in Hoehn and Yahr staging levels. This case study did not have a blinded control but results were compared to predictors of outcome in the medical literature. Even without a control, these findings are substantial enough to suggest further research into how IMT can be incorporated into treatment plans.
CONCLUSIONS: This is the first evidence-based study on the effects of Integrative Manual Therapy in Parkinson's disease. The improvements should serve as a stimulus to therapists to use IMT as a way to improve the client's quality of life. IMT is not a common component of rehabilitation programs, but is one that deserves more attention.

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Motor Imagery


Methods: Neurocognitive approach, which involves the use of a new tool called "naval battle" to achieve chronic pain relief as assessed by the Visual Analogic Scale (VAS) and McGill Pain Questionnaire (MPQ). The Shoulder Rating Questionnaire (SRQ) and Constant Scale (CS) were used to measure functional improvement.

Motor Imagery

“Results: The results indicate significant pain relief (71%) and improvement in functionality (50%). Conclusion: The results seem to confirm the accuracy of the hypothesis on the genesis of chronic pain as a perceptive "discoherency" and that motor imagery can remake a coherence of afferences at central level in chronic pain.

Clinical rehabilitation impact: The use of motor imagery in rehabilitation can be a viable alternative in chronic shoulder pain resistant to other rehabilitation protocols.”

Amy Cuddy is an associate professor at Harvard Business School. She received the Alexander Early Career Award from the Society for the Psychological Study of Social Issues in 2008 and a Rising Star Award from the Association for Psychological Science in 2011. Cuddy spoke at TEDGlobal 2012 in Edinburgh in June.

“Don't fake it till you make it. Fake it till you become it,” says Amy Cuddy, Harvard Business School professor. In a TED Talk she notes brain and body chemistry changes in two minutes of taking a power pose—think of the way Wonder Woman or Superman would stand, feet apart hands on your hips.
Posture: Open / Closed
Decreased (Open) Cortisol – Less Stress
Increased (Open) Testosterone – More Powerful
“Our bodies change our minds and our minds can change our behavior. Our behavior can change our outcomes and even our physiology, according to Cuddy, who has shown that standing or sitting for two minutes in an open posture can significantly increases testosterone, which is the assertiveness and dominance hormone. This open posture also decreases cortisol, which means you are less stressed.

It is easy. You need your body and two minutes to significantly change your life for the better.”
What is the Posture of Dopamine

Walking, Shuffling gait, Jack knifed at the hips
Solutions and Ideas
"Body language shapes who you are but what is surprising, when it comes to power, is that the body also shapes the mind." Dana Carney (UC–Berkeley) and Amy Cuddy, both experimental social psychologists, have conducted research showing that adopting these postures—"power posing"—actually causes people to become more powerful. "After sitting or standing, alone in a room, in a high-power pose for just two minutes, participants in our experiments resembled powerful people—emotionally, cognitively, behaviorally, and even physiologically."

"In other words—two minutes of preparatory power posing optimizes the brain to function well in high-stakes challenges."

And really what aspect of your life is not a high stake challenge? Where in your life could you benefit from more power, greater confidence, and better performance?
Parkinson's Alternatives: Walk Better, Sleep Deeper and Move Consciously; Solutions from Nature's Sensational Medicine ... by Kimberly Burnham (Apr 15, 2012)

Conscious Long Walking
Overview & Objectives: Significant Pain in Parkinson’s Disease: Back, Knee, Shoulder: Complementary and Alternative Medicine (CAM) research; Use of CAM in Hospitals

Posture and Postural Release: Body position, pain and function; Body position and brain chemistry

Traditional Chinese Medicine Color Therapy
   - Green Wood, Stiff as a Board.
   - Acupuncture / Acupressure / Sound Puncture / Light Puncture

Sensational Medicine for Sleep
   - Overlapping Brain Functions: Caring, Creativity and Frontal Lobe Function; Midbrain and Substantia Nigra Dopamine Production; Basal Ganglia and Disgust Exercises.
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“We showed that acupuncture treatment is in fact a neuroprotective therapy that increase the release of various neuroprotective agents such as:

- brain–derived neurotrophic factor,
- glial cell line–derived neurotrophic factor, and
- cyclophilin A.

In addition, acupuncture therapy slows

- cell death process and
- attenuates oxidative stress to dopaminergic neurons in the substantia nigra.

“Further, acupuncture therapy modulates neuronal activity of the basal ganglia output structures.

These results suggest that early application of acupuncture therapy to Parkinson's patients may be helpful for the best efficacy of acupuncture treatment. It is hopeful that translation of achievement in acupuncture research in Parkinson's models will maximize the potentials of acupuncture treatment.”

Dogs & ST 36

“The aims of this study were to investigate the interference of the brain activation during a passive movement task (PMT) by retained acupuncture at the ST 36 acupoint and to compare these effects between normal brain and Parkinson's disease (PD) brain.

The fMRI study showed that insertion of the acupuncture needle at acupoint ST 36 significantly affected the proprioceptive brain activation by decreasing blood oxygenation level–dependent signal intensity in basal ganglia, limbic system, and cerebellum.

Stomach and Spleen are paired meridians
Yellow Earth Elements

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Acupuncture and Blood Flow

“Using a crossover study design, volunteers received standardized Stomach 36 manual acupuncture in two experimental conditions: while undergoing a propofol-based general anesthetic, and while awake. signals between awake and anesthesia conditions.

Using blood oxygenation level–dependent (BOLD), we found significant differences between the two experimental sessions in brain areas, including postcentral gyri, retrosplenial cingular area, left posterior insula, bilateral precuneus, thalamus, red nuclei, and substantia nigra (cluster 100, P < 0.01).

Dopamine: The Wood Elements for Growth & Vitality: Gallbladder is most active/helpful from 11 pm—1 am and Liver is most active/helpful from 1–3 am; green color, anger emotion, compassion virtue. The neurotransmitter or brain chemistry correlations are Dopamine with the gallbladder meridian and Norepinephrine with the liver meridian.
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Posture and Postural Release: Body position, pain and function; Body position and brain chemistry

Traditional Chinese Medicine Color Therapy: Green Wood, Stiff as a Board.

**Sensational Medicine for Sleep**

Overlapping Brain Functions: Caring, Creativity and Frontal Lobe Function; Midbrain and Substantia Nigra Dopamine Production; Basal Ganglia and Disgust Exercises.

CranioSacral Therapy, Manual Therapy and Massage: Blood flow to the brain and body.

Energy Medicine: Reiki Symbols and The Shape of Dopamine.
Sleep and Pain

“Difficulty falling asleep (sleep latency) and staying asleep (sleep maintenance) are common problems for persons living with pain. Research demonstrates that sleep problems are, in turn, related to exacerbation of chronic pain. This study looks at the outcome of teaching patients with musculoskeletal pain standardized pre–bedtime hand self–Shiatsu (HSS) to reduce sleep latency.

Data revealed no apparent changes in the objective actigraphy data. However a trend toward improved self–reported sleep latency (time to fall asleep) and sleep duration (time spent asleep) emerged.”

Unbroken Sleep

“A number of participants reported they were more concerned with increasing their period of unbroken sleep as opposed to their total sleep time and it is possible that HSS may be useful to be applied during nighttime awakenings as well as before bed. None of the participants reported adverse effects of the intervention.

These preliminary findings are promising and future studies exploring the mechanism of action and with stronger control of treatment fidelity are indicated.”

Balancing the Sleep–Wake Cycle: Sleep Better, Learn Faster, Contribute More, and Enjoy Life to Its Fullest ... by Kimberly Burnham (Oct 1, 2011)

Pick Up an Object Sensory Exercises
Overview & Objectives: Significant Pain in Parkinson’s Disease: Back, Knee, Shoulder
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Sensational Medicine for Sleep

Overlapping Brain Functions:
- Caring, Creativity and Frontal Lobe Function;
- Midbrain and Substantia Nigra
- Dopamine Production and Pain;
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Creativity, Caring and Frontal Lobe

“Creativity has been essential to the development of human civilization and plays a crucial role in cultural life.

We found positive correlations between regional gray matter volume and individual creativity in several regions such as the right dorsolateral prefrontal cortex, bilateral striata and in an anatomical cluster which included areas such as the substantia nigra, tegmental ventral area and periaqueductual gray.

“These findings suggest that individual creativity, as measured by the divergent thinking test, is mainly related to the regional gray matter of brain regions known to be associated with the dopaminergic system, congruent with the idea that dopaminergic physiological mechanisms are associated with individual creativity.”

Creativity
“The most frequent behavioral manifestations in Parkinson's disease (PD) are attributed to the dopaminergic dysregulation syndrome (DDS), which is considered to be secondary to the iatrogenic effects of the drugs that replace dopamine.

Over the past few years some cases of patients improving their creative abilities after starting treatment with dopaminergic pharmaceuticals have been reported.

These effects have not been clearly associated to DDS, but a relationship has been pointed out.

Creativity

“The patient showed a compulsive increase of pictorial production after the diagnosis of PD was made. She made her best paintings when treated with cabergolide, and while painting, she reported a feeling of well-being, with loss of awareness of the disease and reduction of physical limitations. “

Creativity

“Dopaminergic antagonists (DA) trigger a dopaminergic dysfunction that alters artistic creativity in patients having a predisposition for it. The development of these skills might be due to the dopaminergic overstimulation due to the therapy with DA, which causes a neurophysiological alteration that globally determines DDS.”

“We present a PD patient in whom dopamine agonists awoke a hidden creativity that led to a gradual increase in painting productivity evolving to a disruptive impulsive behaviour. A dramatic change in painting style related to a more emotional experience during the process of creation developed after treatment onset. This case suggests that changes in creativity in PD seem to be related to dopaminergic imbalance in the limbic system.”

“TIME really does seem to pass more quickly as you get older. “

Last weekend at the annual meeting of the Society for Neuroscience in Washington DC, researchers reported that elderly and young people perceive time differently. Peter Mangan, a psychologist at Clinch Valley College in Wise, Virginia, and his colleagues asked 25 young people aged between 19 and 24, and 15 older people aged between 60 and 80, to estimate a 3-minute interval by counting "seconds" using a "1, 1000, 2, 1000, ..." technique. The young adults did this almost perfectly, averaging 3 minutes 3 seconds. But an average of 3 minutes 40 seconds flew by before the older people thought that just 3 minutes had elapsed. It was not that the older adults were simply less bothered about time, the researchers found, as their volunteers were university teachers and other people who had not retired and were used to sticking to tight timetables. "I could not believe that these people, who were very concerned with the time could be consistently so far over in their estimate," says Mangan. Mangan speculates that the brain's internal clock—which is different from the circadian clock that controls daily cycles of activity—runs more slowly in elderly people.

As a result, the pace of life appears to speed up. As people age, notes Mangan, brain cells that produce the chemical messenger dopamine begin to deteriorate in the basal ganglia and substantia nigra, brain regions known to be involved in the internal clock.”

— Why time flies in old age New Scientist vol 152 issue 2057 – 23 November 96, page 14 by Bob Holmes
Substantia Nigra Associations

- Parkinson’s
- Neurodegenerative Disorders
- Tourette’s Syndrome
- Involuntary Movement Disorders
- Resting tremors
- Primary source of Dopamine (also produced in Adrenal Medulla)
Basal Ganglia Associations

- Movement Disorders; suppresses unwanted motor behavior
- Emotional, motivational, associative and cognitive Dysfunctions
- Parkinson's disease, Wilson's disease, progressive supranuclear palsy or Huntington’s disease
- Lewy Body disorders, such as Dementia in Parkinson’s
- Learning and Memory Dysfunctions; Alzheimer’s
- Neuroendocrine dysfunctions
- Autonomic Nervous System dysfunctions
- Somatomotor disturbances
- Addiction
- Behaviors relative to reward and punishment integration with certain cognitive aspect of the situation as well as the emotional component.
- Irritable Bowel Syndrome; Diabetes
- Anxiety and Sadness
“Parkinson’s disease and schizophrenia are at opposite sides of the same spectrum. They are related in a number of ways, including dopamine levels, side effect of primary medications for each, flat affect (facial expression), zinc levels, the affect of estrogens.." — Kimberly Burnham (August, 2005) Parkinson’s Disease and Schizophrenia The Dopamine Link (Part 1)
Regain Your Balance: Ataxia Solutions from The Nerve Whisperer, Find Health and Healing in Six Complementary and Alternative Medicine Arenas by Kimberly Burnham, PhD

Disgust Exercises
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Blood flow to the brain and body
  CranioSacral Therapy,
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CranioSacral Therapy, Manual Therapy and Massage: Blood flow to the brain and body.

Energy Medicine:

Reiki Symbols (Practiced in 800 US Hospitals)

The Shape of Dopamine.
“The objective of this study was to calculate the effect of Reiki therapy for pain and anxiety in randomized clinical trials. A systematic search of PubMed, ProQuest, Cochrane, PsychInfo, CINAHL, Web of Science, Global Health, and Medline databases was conducted using the search terms pain, anxiety, and Reiki.

The Center for Reiki Research also was examined for articles. Studies that used randomization and a control or usual care group, used Reiki therapy in one arm of the study, were published in 2000 or later in peer-reviewed journals in English, and measured pain or anxiety were included. After removing duplicates, 49 articles were examined and 12 articles received full review. Seven studies met the inclusion criteria: four articles studied cancer patients, one examined post-surgical patients, and two analyzed community dwelling older adults.”
“Effect sizes were calculated for all studies using Cohen's d statistic. Effect sizes for within group differences ranged from $d = 0.24$ for decrease in anxiety in women undergoing breast biopsy to $d = 2.08$ for decreased pain in community dwelling adults. The between group differences ranged from $d = 0.32$ for decrease of pain in a Reiki versus rest intervention for cancer patients to $d = 4.5$ for decrease in pain in community dwelling adults. Although the number of studies is limited, based on the size Cohen's d statistics calculated in this review, there is evidence to suggest that Reiki therapy may be effective for pain and anxiety.

Evaluate the effect of Reiki to treating community-dwelling older adults with pain, depression, anxiety.

“Significant differences were observed between the experimental and treatment groups on measures of pain, depression, and anxiety; no changes in heart rate and blood pressure were noted.

“Content analysis of treatment notes and interviews revealed five broad categories of responses:

- Relaxation;
- Improved Physical Symptoms,
- Mood, and
- Well–Being; Curiosity and
- a Desire to Learn More;
- Enhanced Self–Care; and
- Sensory and Cognitive Responses to Reiki.”

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Integrative Medicine

Using Alternative Medicine & Reiki (Energy), Matrix Energetics (Information), Integrative Manual Therapy & Acupressure (Touch), Health Coaching, Visualization, EFT & Imagery (Words).
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