

©iStockphoto.com/MiquellMunill

# Writing Case Reports For Reiki

BY JANE VAN DE VELDE, RN, DNP

The medical community is looking for evidence-based treatments that offer therapeutic benefit to patients.

These are most frequently provided by scientific studies, which offer the highest level of evidence in validating new therapies. Yet, health care professionals also value other sources of information in making clinical decisions. The case report is one such resource that is accepted by the medical community. Compared to scientific studies, the case report is relatively easy to produce and can be a valuable tool for Reiki practitioners to disseminate information about the positive outcomes we are having with our clients. A case report is a description of care provided to a patient and can be easily written by following the format described in this article. If enough case reports about Reiki prac-

tice are published, they can have a significant effect on the acceptance of Reiki by the medical community, as well as stimulate further research.

## Definition of a Case Report

“The case report is an accurate, brief, and clear narrative report of a clinical experience.” (6, p. 123) Most commonly, a single patient’s situation is described. Included in the report are the patient’s presenting symptoms, diagnosis, treatment and follow-up care. A case report often presents anecdotal evidence by telling the story of a patient’s experience and describing the emotions, personal insights and impact on the quality of life for the individual.

A case report gives the practitioner an opportunity to present clinical findings and experiences in a form that is recognizable to the scientific community. (6) Case reports have a long tradition within the practice of medicine and for centuries were the primary means of sharing observations from clinical practice (9). This is particularly important for practitioners of complementary therapies such as Reiki. The case report format is familiar territory for those who practice Western medicine.

### Why write case reports?

There are numerous reasons for writing case reports. "Case reports are essential for communicating experiences encountered in clinical practice from one clinician to another." (2, p.52) They often describe rare occurrences and unexpected events or outcomes in clinical practice as well as unique therapeutic approaches. (2, 4) Reiki practitioners can sometimes work in isolation and may have limited opportunities to share and discuss their experiences with other practitioners. Case reports can describe new ideas and methods in working with the energy; various client responses to Reiki treatment; and potentials for working with different client populations, for example, children with autism. Other health care professionals also have the opportunity to learn more about the practice of Reiki and how it can positively influence an individual's health and well being.

Energy work such as Reiki is sometimes associated with unusual or surprising client outcomes that are positive but confounding to the conventional medical community. It is important that these instances are published so that there is a greater awareness of the nature of Reiki and its potential in helping people move towards wellness and balance.

Case reports can provide stimulus and direction for further research by identifying relevant variables to be investigated. (4,6). For example, if a number of published case reports describe Reiki's positive impact with Alzheimer's patients, researchers could be motivated to design a more rigorous clinical trial that explores Reiki's effects with this population.

Case reports can also describe the personal influence that a client or event has on a practitioner. These events may cause changes in the way that patient care or education is provided. (3) As Reiki practitioners, we have all had clients and experiences that have taught us life lessons, shifted our thinking in new directions, and changed the way we work with energy. It is important that we share this information with each other. The case report is one way to tell these stories.

### Case Reports and Research

It is important to remember that case reports are not research. In a research study that adheres to a randomized, controlled design, care and treatment are provided according to strict protocols that control as many variables as possible. Case reports are simply a description of care offered to one or two patients in an uncontrolled environment. Therefore, generalizations cannot be made to a larger patient population beyond the context of the case. (2)

Randomized double-blind clinical trials are the gold standard in health care. Physicians as well as other health care professionals require empirical proof that the treatments, therapies and pharmaceuticals they prescribe for their patients are both safe and effective. "Case reports cannot establish cause and effect relationships between interventions and outcomes. [They] cannot prove reliability or validity of measurements and cannot identify prognostic variables." (4, p.126) For example, it cannot be assumed that all breast cancer patients will respond positively to Reiki treatments based on one case report. However, if there are ten published case reports that describe good outcomes for these patients, a clinical trial might be initiated to determine if certain effects from Reiki can be replicated and generalized to a larger patient population.

Although case reports represent the lowest level of evidence in the hierarchy of research design, they can significantly contribute to health care practice. They provide new ideas for treatment and help in establishing new standards of care. (8) Case reports represent the first phase of clinical research by providing "the basis, stimulus, and direction for further research." (6, p.123)

### Elements of a Case Report

A case report should be "factual, concise, logically organized and clearly presented." (1, p.360) The basic outline for a case report consists of an introduction, description of the case, discussion and summary. It may also include references, tables, graphs and illustrations. (6) "Most published case reports are less than three journal pages in length and the vast majority are one page or less." (3, p. 193)

An excellent example of a case report that describes the use of Reiki with an HIV/AIDS patient was written by Robert Schmehr, titled, "Enhancing the treatment of HIV/AIDS with Reiki training and treatment." This article can be downloaded from Pamela Miles' Web site, [www.reikiinmedicine.org](http://www.reikiinmedicine.org), and clearly illustrates each of the following elements of a well written case report.

#### Introduction

"The purpose of the paper should be clearly described in the introduction." (2, p.55) It should be short and consist of several sentences that describe the event or topic of the report as well as the reason why it is worth reporting. (9) For example: "*This case report describes how one woman diagnosed with metastatic breast cancer incorporated self-treatment with Reiki into her daily routine. She was able to successfully manage symptoms of insomnia and panic attacks and return to full time employment.*"

It is important to "define unusual terms or words that are essential to understanding information in the paper." (2, p.56) A brief definition of Reiki would be appropriate as many readers may be unfamiliar with this term.

Case reports usually describe something new so it is essential to briefly explain how a condition is commonly managed. This gives the reader information with which to compare the case report's methods. (2) For example, a report about Reiki's impact on a person with chronic asthma could include a short description of standard protocols for managing this disease, i.e., medications and treatments.

### Description of the case

This section introduces the client and includes the client's age, sex and if pertinent, race or ethnic origin and occupation. (1) Identifying information can be succinctly incorporated into an opening statement. "A 46 year old white female school teacher came for an initial Reiki session with complaints of chronic fatigue, insomnia and headaches."

The information should be presented in chronological order using terminology that is clearly understood and commonly used within health care. (9) Only findings that are pertinent to the case report should be included, such as the client's health history, medical diagnoses, medication profile, lab values, medical/surgical treatments and other therapeutic interventions. Conciseness is essential. (1) This information can be obtained from several sources with the client being the primary informant. Actual medical records provide more detailed information, which can be accessed with the client's written permission. It may also be helpful to confer with the client's other health care providers regarding the case. Again, written permission is necessary to do this.

It is important to include relevant psycho-social information about the client. These details can tell the story of why the client is seeking complementary therapies. Reiki frequently makes a significant impact on the mental and emotional aspects of "dis-ease."

The next part of this section describes the treatment methods and includes observations and assessments made by the practitioner. Treatments and interventions should be described in detail so that other practitioners will be able to replicate or use the same methods.

*"The client received hour-long Reiki sessions weekly for 8 weeks. Each session incorporated aura sweeping at the beginning and end of the session and a series of standard hand placements both on and above the anterior portion of the client's physical body. The client's chakras were assessed using a pendulum before and after each session to determine openness. A simple chakra balancing technique was used to encourage energy flow when chakras were assessed to be closed or minimally open."*

Finally the outcomes of care are reported. This data needs to be as objective as possible because it quantifies the client's response to treatment. Quality sources of data would include vital signs, visual analogue scales, lab values and pathology reports. (2)

Visual analogue scales (VAS) are frequently used to measure subjective experiences such as pain, nausea, fatigue and stress. These scales can be helpful in measuring outcomes with Reiki clients because energy work often impacts these kinds of symptoms. A VAS is commonly set up on a scale of 0 to 10, with 0 being the absence of the symptom and 10 being the maximum manifestation of the symptom. The client is asked to complete the scale before and after the Reiki session.

Another valuable source of outcome data is the client's verbal reports following Reiki treatments. For this reason, consistent, detailed documentation of client Reiki sessions is essential. This type of data, though subjective, tells a very important piece of the story about Reiki's beneficial effects. *The client verbally*

*reported sensations of relaxation and decreased stress after each session. After the fourth appointment, the client stated that her nightly sleep patterns had improved. "I can sleep for 5-6 hours at a stretch. I am feeling more rested over all."*

This section should describe any other treatment the client is receiving in addition to Reiki, such as medical care, psychotherapy, physical therapy, or other complementary treatments. The reader needs to be fairly clear as to the probability that the outcome was a response to Reiki or to other interventions or a combination of all treatments. (9)

The possibility of adverse effects from the treatment must also be addressed. The medical community is always vigilant to side effects or complications from medications and other therapeutic interventions. One of the basic tenets of Reiki is that it can do no harm. However, as practitioners, we have all witnessed clients experiencing "healing reactions" to energy work. There are times when physical and emotional symptoms can temporarily exacerbate before dissipating. The receiver may feel uncomfortable or unwell for a period of time. This could be considered an adverse reaction or side effect to energy work. These details should be included in the case report.

### Discussion

In this section, the author states the significance of the information. (3) The following questions can be addressed: 1. Why is this case unusual? 2. What new knowledge or perspective has this case added to the subject? 3. What lessons did the practitioner learn in caring for this client? 4. Would the practitioner do anything differently with a similar client? (1, 9)

The author should provide hypotheses or possible reasons for the outcome of the case, such as the natural history of the disorder; other variables that could have impacted the outcome; and why the care provided may or may not have been beneficial. (2) The author must "be very careful about drawing a conclusion that there is a link between the treatment and the effect in a single case: it could well be just a coincidence. Include an assessment of how far it can be regarded as reliable. Remember, [the case report] is only an anecdote."(9, p.85)

The author should attempt to find published literature that is pertinent to the current case, i.e., similar case reports, protocols, or scientific studies. Relevant findings should be briefly reported and similarities and differences discussed. (9) Although there is minimal research that strongly supports the use of Reiki either for self-treatment or as an intervention, this should not hinder Reiki practitioners from writing case reports for publication. As stated previously, case reports often identify variables for researchers to investigate in clinical trials. (4)

### Summary

The final section of the case report is the summary. It should reiterate what can be learned from this report, i.e., what is the take-home message? (3) Specific recommendations for further inquiry and research into the topic should be included.

## Confidentiality

The client's right to privacy is an important consideration. Written consent should always be obtained from the client. "Case reports are highly individual and are likely to be re-published in other ways including the Internet and the general media. Therefore, there is a chance that the patient's family, colleagues, friends or acquaintances may see the report and recognize the patient." (9, p. 86) Every effort should be made to maintain the client's anonymity in writing the report.

## Submitting case reports for publication


Case reports about Reiki can be submitted to a number of journals for publication particularly those that focus on topics related to complementary health care practices. Select a journal that you think may be appropriate for your case report and review several articles in the journal to get an idea about its basic writing format. Each journal has specific instructions for authors, which can be found on its Web site. It is helpful to review these instructions as you begin to write your article.

Here are a few suggestions for journals that would consider case reports about Reiki. *Alternative therapies in Health and Medicine* provides a forum for sharing information about the "practical use of emerging therapies in healthcare to promote health, prevent illness and treat disease." ([www.alternative-therapies.com](http://www.alternative-therapies.com)). *Advances in Mind-Body Medicine* explores the relationship between mind, body, spirit and health as well as the human experience of health, illness and medical care. ([www.advancesjournal.com](http://www.advancesjournal.com)) *Holistic Nursing Practice* emphasizes complementary, traditional and holistic nursing practices and accepts articles about "integrating holistic care concepts in care delivery, management of care and teaching." (See author guidelines at [www.hnpjjournal.com](http://www.hnpjjournal.com).) *Reiki News Magazine* will also publish case reports.

## Who can write a case report?

Anyone can write a case report for publication. The process of writing takes time but is well worth the effort in terms of personal accomplishment. If you have a noteworthy client experience that you want to share, simply begin by collecting and organizing the data according to the case report elements described in this article. Read other case reports for ideas about style and format. If your writing experience is limited, seek assistance in editing your article from colleagues who have this expertise. You might consider co-authoring your article with another practitioner. Journals also help authors revise and edit their articles prior to publication.

## Summary

There are many Reiki practitioners worldwide who are providing exceptional care to their clients. People are experiencing the benefits of Reiki physically, mentally, emotionally and spiritually, and healing their lives on many levels. As we continue to grow and evolve in the practice of Reiki, it is critical that we share the knowledge we are gaining with the greater health care community. 

—Jane Van De Velde can be contacted by email at [Jane@inspiretoheal.com](mailto:Jane@inspiretoheal.com) or through her Web site: [www.inspiretoheal.com](http://www.inspiretoheal.com)

## List of References

1. DeBakey, L. & DeBakey, S. "The case report: guidelines for preparation." *International Journal of Cardiology*, 1983, Vol. 4, 357-364.
2. Green, B, & Johnson, C. "Writing patient case reports for peer-reviewed journals: secrets of the trade." *Journal of Sports Chiropractic and Rehabilitation*. 2000, 14(3), 51-59.
3. McCarthy, L.H. & Reilly, K. "How to write a case report." *Family Medicine*, 2000, 32(3), 190-5.
4. McEwen, I.R. "Case reports: slices of real life to complement evidence." *Physical Therapy Journal*, 2004, 84(2), 126-127.
5. Miles, P. "A call for case reports." *Reiki International Magazine*, 2002, 4(3), p. 34-35.
6. Mullin, P.D. "The case for case reports." *Research Forum*, 1985, p. 123-124.
7. Schmehr, R. "Enhancing the treatment of HIV/AIDS with Reiki training and treatment." *Alternative Therapies*, March/April, 2003, 9(2), 120.
8. Vandenbroucke, J.P. "In defense of case reports and case series." *Annals Internal Medicine*. 2001, 134(4), 330-334.
9. White, A. "Writing case reports." *Acupuncture in Medicine*, 2004, 22(2), 83-86.