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Effect of Reiki Treatments on Functional Recovery in Patients in Poststroke Rehabilitation: A Pilot Study

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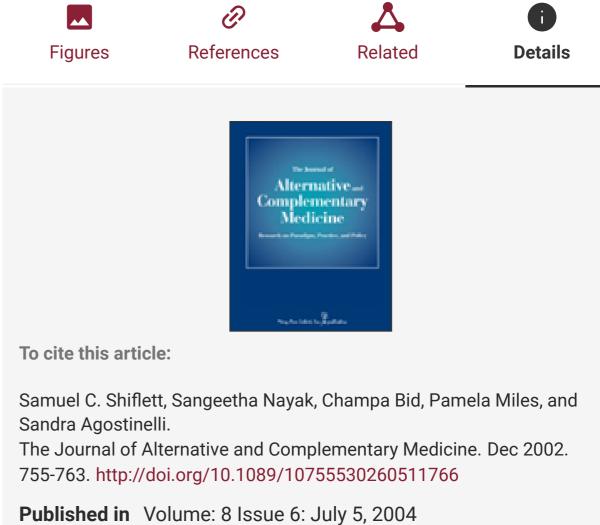
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Abstract

Objectives: The three objectives of this study were: (1) to evaluate the effectiveness of Reiki as an adjunctive treatment for patients with subacute stroke who were receiving standard rehabilitation as inpatients, (2) to evaluate a double-blinded procedure for training Reiki practitioners, and (3) to determine whether or not double-blinded Reiki and sham practitioners could determine which category they were in.

Design: A modified double-blinded, placebo-controlled clinical trial with an additional historic control condition.

Setting: The stroke unit of a major rehabilitation hospital.



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Subjects received up to 10 treatments over a 2¹/₂-week period in addition to standard rehabilitation.

Outcome measures: Functional independence measure (FIM), and Center for Epidemiologic Studies - Depression (CES-D) measure.

Results: No effects of Reiki were found on the FIM or CES-D, although typical effects as a result of age, gender, and time in rehabilitation were detected. Blinded practitioners (sham or *reiki*) were unable to determine which category they were in. Sham Reiki practitioners reported greater frequency of feeling heat in the hands compared to Reiki practitioners. There was no reported difference between the sham and the real Reiki practitioners in their ability to feel energy flowing through their hands. *Post hoc* analyses suggested that Reiki may have had limited effects on mood and energy levels.

Conclusion: Reiki did not have any clinically useful effect on stroke recovery in subacute hospitalized patients receiving standard-of-care rehabilitation therapy. Selective positive effects on mood and energy were not the result of attentional or placebo effects.

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