

General principles of the ASsAAC for practical use of essential oils

1.

The history of essential oils started about 5000 years ago, when devices for steam distillation were invented in Asia and Arabia. Nearly all advanced civilizations used essential oils for health promotion, treatment, and well-being. In accordance with their tradition, Indian tribes work with medicinal plants. However, the production of essential oils or working with them is not part of their tradition.

2.

We believe that the use of strong essential oils in high-dosed form is not a wellness measure but a medical application that should be reserved for doctors; it may also cause side effects.

3.

Incorrect posture, overloading, and abrasion of the spine may cause greater muscle tone and contraction of the spinal muscles. A vicious circle that, in the absence of adequate therapy, leads to pain and a chronic condition. However, in the spinal muscles there are no parasites, viruses, bacteria or fungi that can be held responsible, in terms of pathophysiology, for the widespread disease known as "back pain".¹ Of course, abscesses or other infections may develop in the spine or spinal muscles, but these can be treated with antimicrobial agents and in some cases even by surgery.

4.

Essential oils act on the site of application by unfolding their entire spectrum of effect, as well as systemically by being distributed through the bloodstream and even overcoming the blood-brain barrier. The direct pharmacological effect persists for a maximum period of a few hours.²

5.

Aromatherapy for the purpose of treating diseases is reserved for doctors, who should have additionally obtained sufficient theoretical knowledge and practical experience in "medical aromatherapy".

6.

Spine specialists for patients are primarily doctors who can work with experts from other medical and healthcare professions.

7.

The current German-language school of thought recommends, when using aromatherapy for body care and for preventive applications, a maximum concentration of 3%; in fact, 1% to 1.5% is sufficient in most cases.^{3,4} The sole use of essential oils as a standard measure is not recommended by the current school of thought. Suitable dilution of essential oils with fatty vegetable oils improves absorption in cells and tissues as well as the regulatory process.⁵ "Mild irritants stimulate vital activity, moderate irritants promote it, while strong irritants suspend it and may even lead to cell death." (Arndt-Schulze rule)⁶

8.

According to the recommendation of the ASsAAC, essential oils should never be applied in undiluted form on the tongue and should never be taken orally in this form. Only doctors are authorized to prescribe oral intake in suitable form.

9.

The use of essential oils in high doses may cause irritation of the skin. This fact has been clearly described in the published literature for thyme, oregano and wintergreen. Erythema of the skin due to essential oils is usually a sign of allergy, intolerance, overdosage, or poor quality of oil. Persons with a sensitive skin, children, and elderly persons may develop serious health problems from high doses. "Everything is toxic and nothing is devoid of toxins; only the dose determines whether something is a toxin or not" (translated from a German statement made by Theophrastus Bombast von Hohenheim, given the honorary name of Paracelsus). The dosage of essential oils is based on the principle of "less is more" under consideration of individual sensitivity and in accordance with the existing rules of "good clinical practice". The user is held liable for any damage.^{3,4,7}

10.

In case of overdosage, users or masseurs also absorb a high dose of essential oils per treatment through the skin and by respiration. This circumstance is intensified by the frequency of massage.

11.

The use of a hot and damp compress intensifies the penetration of oils and the risk of skin damage due to high-dosed essential oils with a potentially irritating effect. Exclusion criteria must be taken into account when using a hot and damp compress. It is contraindicated, for instance, in cases of fever, in elderly persons, in persons with unstable circulation, and in children.⁸

12.

In the absence of sufficient knowledge of human anatomy and physiology, hygiene, the modes of action of essential oils, their potential side effects and interactions, essential oils should not be used for commercial purposes. After suitable advanced training on the subject of "aromatherapy care" by a care-giver as well as the approval of the senior institution and the legal entity, it would be acceptable to use essential oils in professional health care and nursing care.

13.

In the Austrian market, several companies offer essential oils of outstanding quality. All required information and precautions are mentioned on the labels of these products in accordance with the EU guideline. Ecological and socially compatible cultivation as well as environment-friendly manufacture, processing, fair competition and pricing should be given importance.

14.

We appeal to the sense of responsibility of all users - including those that use essential oils professionally as well as those that employ them for domestic use. Experience has shown that, when mishaps occur due to overdosage or inappropriate use, the first to be held responsible for the condition are the essential oils. Therefore, as the executive committee of ASsAAC it is our duty to take a stance and draw attention to the risk potential of essential oils.

References and Sources:

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- 7 Steflitsch, Wolz, Buchbauer (Herausgeber): Aromatherapie in Wissenschaft und Praxis, Stadelmann Verlag, 2013
- 8 Personal communication with DKKS Bärbl Buchmayr, 2013

ÖGwA = Austrian Society of scientific Aromatherapy and Aroma Care (ASsAAC)