

An Examination of Self-Reported Pain & Quantitative EEG Changes in Pranic Healing vs. Placebo Conditions: A Pilot Study

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Background: While there have been a few studies examining the impact of energy healing (e.g., prayer, healing touch) on physical wound healing and subjective pain (Wirth, D. P. 1990; Redner, R., Briner, B., & Snellman, L. 1991; Wientjes, K. A. 2002), there has been no research specifically addressing the impact of Pranic Healing (PH).

Objective: to determine if there are any significant differences in self-reported pain and EEG activity when subjects received a Pranic Healing session versus a placebo control.

Methods: Four subjects received two sessions, a week apart, during which they would either receive a Pranic Healing treatment or no treatment. Subjects were blind to which condition they received at the time of each session and consequently served as their own controls. Subjects completed consent forms and a pre-post questionnaire regarding current level of pain and discomfort. EEG recordings included a 5 minute baseline, a 25-30 minute recording during the treatment condition and a 5 minute post-session recording. Subjects returned to the lab a week later to repeat the process and receive the other treatment or condition.

Results:

Subjective Results:

2 subjects **correctly identified** the treatment session from the control.

Pain: subject 4 substantial pain reduction during treatment, 83%, vs. 17% reduction during control.

Discomfort: was reduced between 50% - 83% during treatment in **all subjects**, vs Control reduction between 0% - 50%.

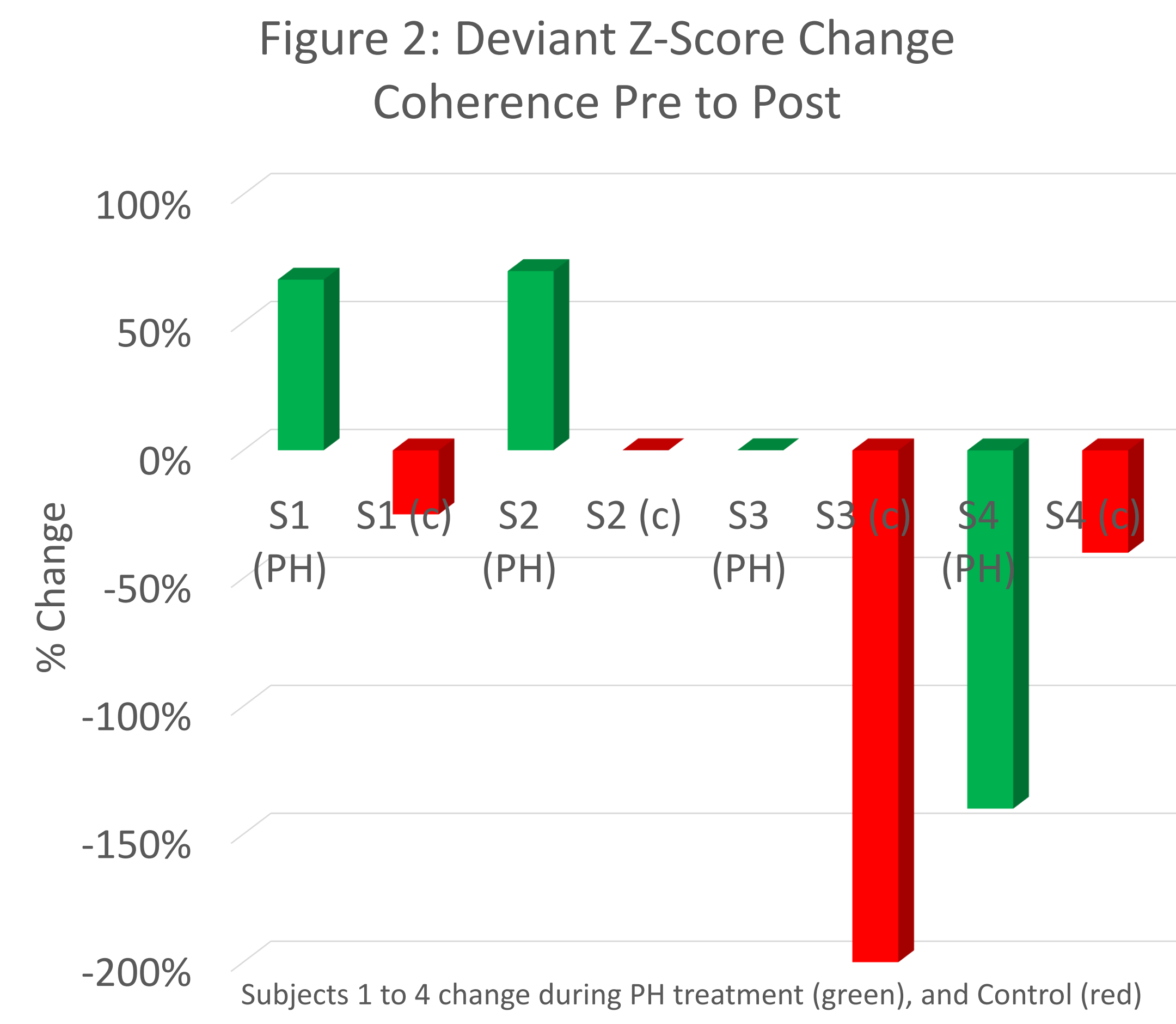
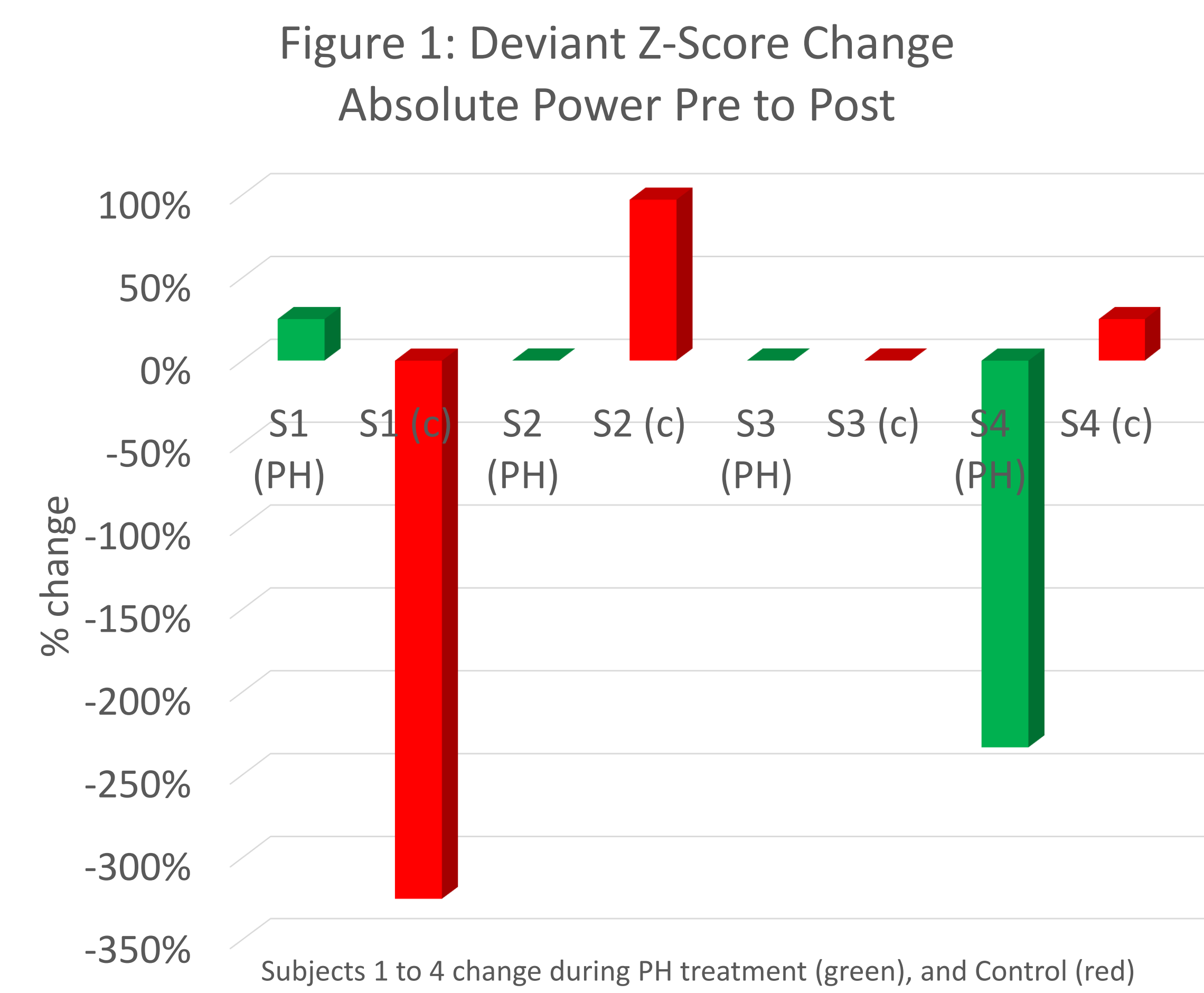
Tension: subject 1, 2 and 3 experienced similar tension reduction in both sessions (50%).

Subject 4 tension was substantially reduced during the treatment session, 83%, and 0% during the control.

Mobility: no significant changes in both sessions.

EEG Results:

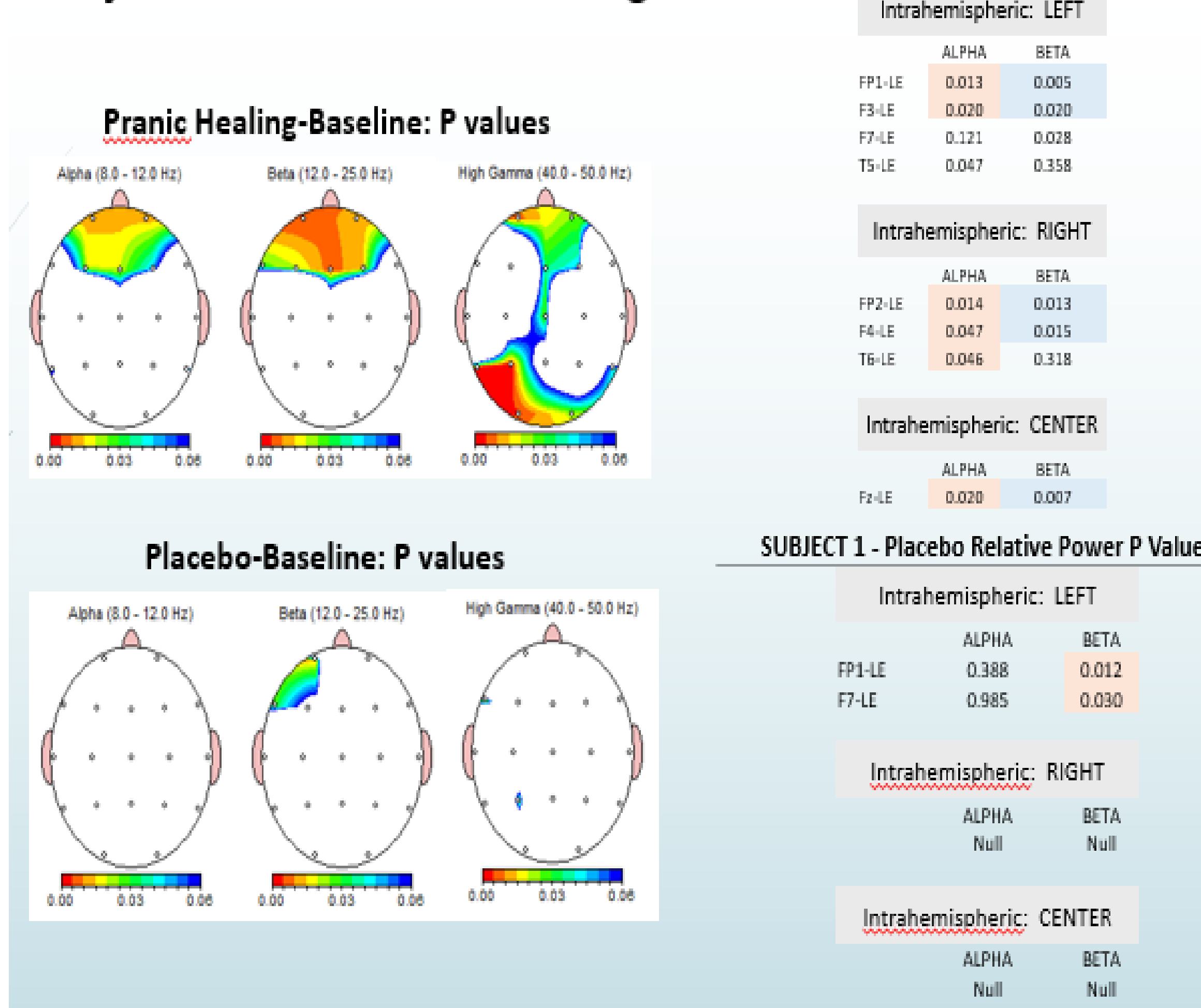
Subjects EEG data for absolute power and coherence were compared to a normative database.



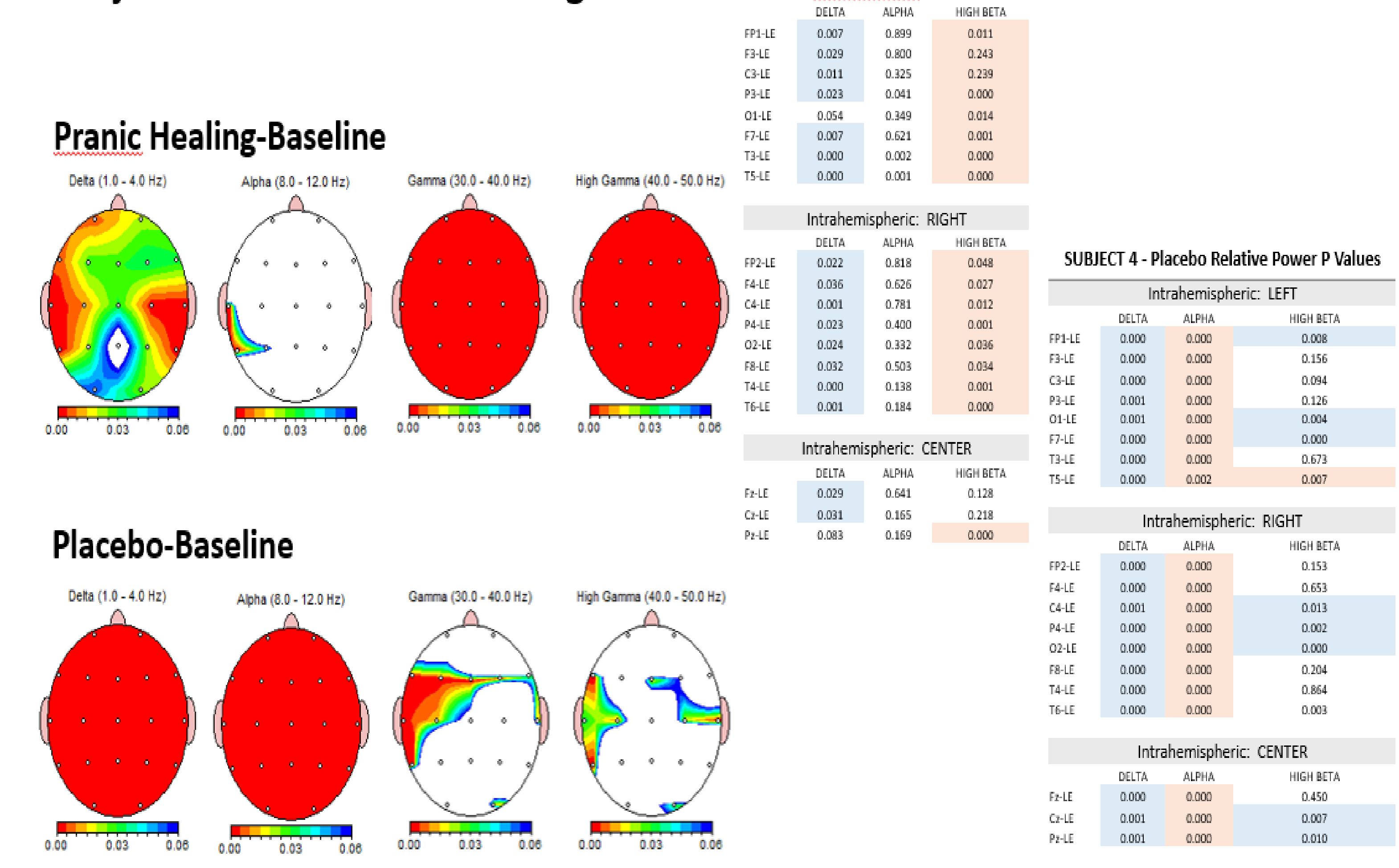
The number of variables that were significantly deviant (+/- 1.5 standard deviations) was calculated for each recording. The change in deviant scores from pre to post Pranic Healing is displayed in green while the change from the placebo condition is displayed in red. It is clear that the brain's response to PH was significantly different than the placebo condition.

Subjects treatment and control EEG data for relative power was compared to their baseline data. In the two following images the brighter the colors (yellow/orange/red), the higher the level of significance. For subject 1, there was clearly much more change than occurred during the placebo condition.

Subject 1: Relative Power Changes



Subject 4: Relative Power Changes

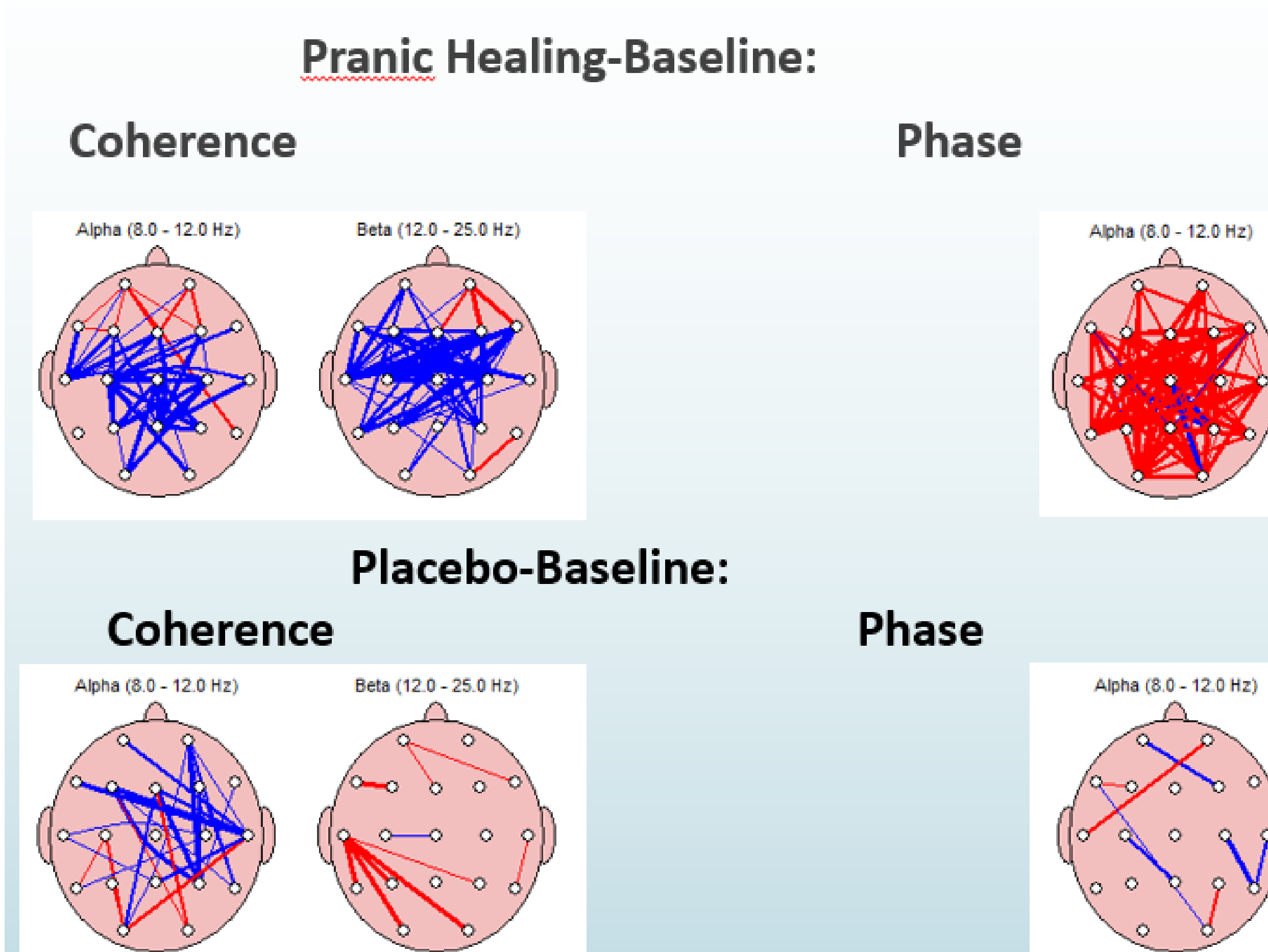


For subject 4, the pattern of change for PH vs. placebo was quite different. The charts next to each brain image shows the actual values and the direction of change. Values highlighted in red indicate that the treatment condition was higher than baseline while values highlighted in blue indicate that the baseline condition was higher.

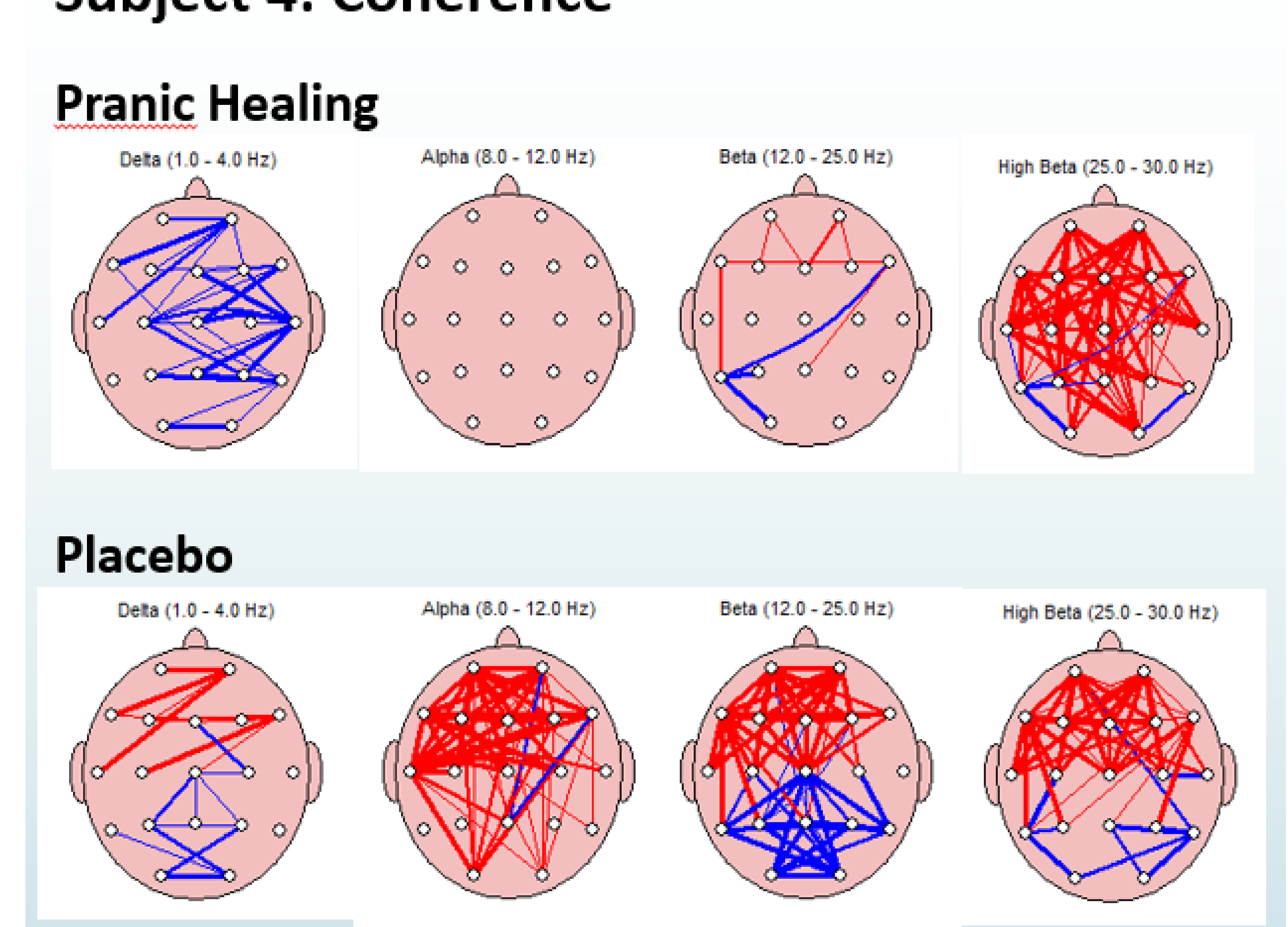
Subjects treatment and control EEG data for coherence and phase were compared to their baseline data.

Coherence and Phase are measurements of connectivity and speed of communication between brain regions. Significant changes from baseline for PH and placebo conditions are indicated by the presence of either red or blue lines in the images below.

Subject 1: Coherence & Phase



Subject 4: Coherence



For coherence, blue lines indicate that the level of connectivity decreased during the treatment condition, while red lines indicate that connectivity increased. Blue lines for phase indicate that speed of communication became faster during the treatment condition while red lines indicate that the speed of communication slowed down.

Conclusions: Subjective results indicate that subjects discomfort was substantially reduced in all subjects during the PH treatment. Pain, mobility and tension improvements were different for each subject in both sessions. The EEG data from this study shows that the effect of PH is significantly different than the impact of a control/placebo condition. Changes among subjects were not consistent and may be related to a number of factors including client's baseline brainwave activity and receptivity to healing. Future studies are needed to increase number of subjects, extend the number of treatment sessions received and add additional measurements.

References:

Redner, R., Briner, B., & Snellman, L. (1991). Effects of a bioenergy healing technique on chronic pain. *Subtle Energies*, 2(3), 43-68.

Wientjes, K. A. (2002). Mind-body techniques in wound healing. *Ostomy/wound management*, 48(11), 62-67.

Wirth, D. P. (1990). The effect of non-contact therapeutic touch on the healing rate of full thickness. *Subtle Energies & Energy Medicine Journal Archives*, 1(1).