

BACKGROUNDER

NATIONAL CENTER FOR COMPLEMENTARY AND ALTERNATIVE MEDICINE

Reiki: An Introduction

Reiki is a healing practice that originated in Japan. Reiki practitioners place their hands lightly on or just above the person receiving treatment, with the goal of facilitating the person's own healing response. In the United States, Reiki is part of complementary and alternative medicine (CAM). This fact sheet provides a general overview of Reiki and suggests sources for additional information.

Key Points

- People use Reiki to promote overall health and well-being. Reiki is also used by people who are seeking relief from disease-related symptoms and the side effects of conventional medical treatments.
- Reiki has historically been practiced as a form of self-care. Increasingly, it is also provided by health care professionals in a variety of clinical settings.
- People do not need a special background to learn how to perform Reiki. Currently, training and certification for Reiki practitioners are not formally regulated.
- Scientific research is under way to learn more about how Reiki may work, its possible effects on health, and diseases and conditions for which it may be helpful.
- Tell your health care providers about any complementary and alternative practices you use. Give them a full picture of what you do to manage your health. This will help ensure coordinated and safe care.

History

The word "Reiki" is derived from two Japanese words: *rei*, or universal, and *ki*, or life energy. Current Reiki practice can be traced to the spiritual teachings of Mikao Usui in Japan during the early 20th century. Usui's teachings included meditative techniques and healing practices. One of Usui's students, Chujiro Hayashi, further developed the healing practices, placing less emphasis on the meditative techniques. An American named Hawayo Takata learned Reiki from Hayashi in Japan and introduced it to Western cultures in the late 1930s.

The type of Reiki practiced and taught by Hayashi and Takata may be considered traditional Reiki. Numerous variations (or schools) of Reiki have since been developed and are currently practiced.

Practice

Reiki is based on the idea that there is a universal (or source) energy that supports the body's innate healing abilities. Practitioners seek to access this energy, allowing it to flow to the body and facilitate healing.

Although generally practiced as a form of self-care, Reiki can be received from someone else and may be offered in a variety of health care settings, including medical offices, hospitals, and clinics. It can be practiced on its own or along with other CAM therapies or conventional medical treatments.

In a Reiki session, the client lies down or sits comfortably, fully clothed. The practitioner's hands are placed lightly on or just above the client's body, palms down, using a series of 12 to 15 different hand positions. Each position is held for about 2 to 5 minutes, or until the practitioner feels that the flow of energy—experienced as sensations such as heat or tingling in the hands—has slowed or stopped. The number of sessions depends on the health needs of the client. Typically, the practitioner delivers at least four sessions of 30 to 90 minutes each. The duration of Reiki sessions may be shorter in certain health care settings (for example, during surgery).

Practitioners with appropriate training may perform Reiki from a distance, that is, on clients who are not physically present in the office or clinic.

Uses

A 2002 national survey by the National Center for Health Statistics and the National Center for Complementary and Alternative Medicine (NCCAM) on adult Americans' use of CAM found that 1.1 percent of the more than 31,000 participants had ever used Reiki for health purposes. Adjusted to nationally representative numbers, this percentage means that at the time of the survey, more than 2.2 million adults in the United States had ever used Reiki.

People use Reiki for relaxation, stress reduction, and symptom relief, in efforts to improve overall health and well-being. Reiki has been used by people with anxiety, chronic pain, HIV/AIDS, and other health conditions, as well as by people recovering from surgery or experiencing side effects from cancer treatments. Reiki has also been given to people who are dying (and to their families and caregivers) to help impart a sense of peace.

Effects and Safety

Clients may experience a deep state of relaxation during a Reiki session. They might also feel warm, tingly, sleepy, or refreshed.

Reiki appears to be generally safe, and no serious side effects have been reported.

Training, Licensing, and Certification

No special background or credentials are needed to receive training. However, Reiki must be learned from an experienced teacher or a Master; it cannot be self-taught. The specific techniques taught can vary greatly.

Training in traditional Reiki has three degrees (levels), each focusing on a different aspect of practice. Each degree includes one or more initiations (also called attunements or empowerments). Receiving an initiation is believed to activate the ability to access Reiki energy. Training for first- and second-degree practice is typically given in 8 to 12 class hours over about 2 days. In first-degree training, students learn to perform Reiki on themselves and on others. In second-degree training, students learn to perform Reiki on others from a distance. Some students seek master-level (third-degree) training. A Reiki Master can teach and initiate students. Becoming a Master can take years.

Reiki practitioners' training and expertise vary. Increasingly, many people who seek training are licensed health care professionals. However, no licensing or professional standards exist for the practice of Reiki.

If You Are Thinking About Using Reiki

- Do not use Reiki as a replacement for proven conventional care or to postpone seeing a doctor about a medical problem.
- Find out about the Reiki practitioner's background, including training and experience treating clients.
- Be aware that Reiki has not been well studied scientifically, but research on whether and how Reiki may work is under way.
- Tell your health care providers about any complementary and alternative practices you use. Give them a full picture of what you do to manage your health. This will help ensure coordinated and safe care.

NCCAM-Funded Research

Some recent NCCAM-supported studies have been investigating:

- How Reiki might work
- Whether Reiki is effective and safe for treating the symptoms of fibromyalgia
- Reiki's possible impact on the well-being and quality of life in people with advanced AIDS
- The possible effects of Reiki on disease progression and/or anxiety in people with prostate cancer
- Whether Reiki can help reduce nerve pain and cardiovascular risk in people with type 2 diabetes.

Selected References

- Barnes PM, Powell-Griner E, McFann K, Nahin RL. Complementary and alternative medicine use among adults: United States, 2002. *CDC Advance Data Report #343*. 2004.
- DiNucci EM. Energy healing: a complementary treatment for orthopaedic and other conditions. *Orthopaedic Nursing*. 2005;24(4):259-269.
- Engebretson J, Wardell DW. Experience of a Reiki session. *Alternative Therapies in Health and Medicine*. 2002;8(2):48-53.
- LaTorre MA. The use of Reiki in psychotherapy. *Perspectives in Psychiatric Care*. 2005;41(4):184-187.
- Miles P. Reiki for mind, body, and spirit support of cancer patients. *Advances in Mind-Body Medicine*. 2007;22(2):20-26.
- Miles P, True G. Reiki—review of a biofield therapy history, theory, practice, and research. *Alternative Therapies in Health and Medicine*. 2003;9(2):62-72.
- Nield-Anderson L, Ameling A. Reiki: a complementary therapy for nursing practice. *Journal of Psychosocial Nursing and Mental Health Services*. 2001;39(4):42-49.
- Reiki. Natural Standard Database Web site. Accessed at <http://www.naturalstandard.com> on February 25, 2008.

For More Information

NCCAM Clearinghouse

The NCCAM Clearinghouse provides information on CAM and NCCAM, including publications and searches of Federal databases of scientific and medical literature. The Clearinghouse does not provide medical advice, treatment recommendations, or referrals to practitioners.

Toll-free in the U.S.: 1-888-644-6226
TTY (for deaf and hard-of-hearing callers): 1-866-464-3615
Web site: nccam.nih.gov
E-mail: info@nccam.nih.gov

PubMed®

A service of the National Library of Medicine (NLM), PubMed contains publication information and (in most cases) brief summaries of articles from scientific and medical journals. CAM on PubMed, developed jointly by NCCAM and NLM, is a subset of the PubMed system and focuses on the topic of CAM.

Web site: www.ncbi.nlm.nih.gov/sites/entrez
CAM on PubMed: nccam.nih.gov/camonpubmed/

ClinicalTrials.gov

ClinicalTrials.gov is a database of information on federally and privately supported clinical trials (research studies in people) for a wide range of diseases and conditions. It is sponsored by the National Institutes of Health and the U.S. Food and Drug Administration.

Web site: www.clinicaltrials.gov

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