



Rose essential oil and sleep quality in cardiac patients

In coronary care units (CCUs) most patients experience sleep disorders, which can be caused by factors such as noise, pain and discomfort, psychological distress and disease complications. As sleep disorders can be linked to increased blood pressure and heart rate, using interventions that can improve sleep quality (that have little or no side-effects) is particularly desirable in cardiac patients.

A recent study¹ investigated the effects of *Rosa damascena* on the sleep quality of patients in two CCUs at a teaching hospital in Kashan, Iran. The authors state that the oil has: 'hypnotic, sedative and anticonvulsive effects on the central nervous system [and] studies have shown that *Rosa damascene* [sic] alleviates anxiety and promotes relaxation'. To the best of their knowledge, the potential for this oil to improve quality of sleep among patients had also not yet been examined.

Sixty patients who met the inclusion criteria of the trial were recruited using a convenience sampling method and then randomly assigned to either a control group or experimental group. The control group received standard sleep care, which included reduced environmental noises, decreased lighting levels and nursing care during the

daytime to avoid interrupting the patients' sleep. The experimental group received standard sleep care and three drops of *Rosa damascena* on a paper towel, attached to the side of each patient's pillow, from 10pm to 6am.

The intervention took place for three consecutive nights, starting on the second day of hospitalisation. Measurements (a questionnaire and Pittsburgh Sleep Quality Index) were taken at the start of the study, and on the fourth day.

Once analysed, the results showed *Rosa damascena* 'significantly reduced sleep latency and sleep disturbances and significantly improved the efficiency, subjective quality and duration of sleep'. In addition, the study findings indicated *Rosa damascena* was also effective at 'alleviating daytime dysfunction in the experimental group'.

While the overall results of this study were positive, the authors call for further, long-term, large-scale studies on cardiac patients, as well as other patient populations, to provide ample evidence regarding the effectiveness of *Rosa damascena* for improving quality of sleep.

¹ Hajibagheri A, Babaii A and Adib-Hajbagheri M (2014). Effect of *Rosa damascene* [sic] aromatherapy on sleep quality in cardiac patients: a randomized controlled trial, *Complementary Therapies in Clinical Practice* 20: 159-163.

New muscle injury grading system

An article¹ published in the British Journal of Sports Medicine, looks at a new muscle injury classification system, the aim of which is to provide 'a sound diagnostic base for therapeutic decision-making'. In addition, the system will 'assist with future research to inform the development of improved prevention and management strategies.'

The British Athletics Muscle Injury Classification system consists of five grades of muscle injury,

based on MRI features – ranging from Grade 0 (generalised muscle soreness with normal MRI, or MRI characteristic of delayed onset muscle soreness) to

Grade 4 (complete tear of muscle or tendon). Grades 1 to 4 also come with a suffix to indicate if the injury is 'myofascial' (with the suffix 'a'), 'musculo-tendinous' ('b') or 'intratendinous' ('c').

Retrospective and prospective studies in elite track and field athletes are being carried out to validate the classification system for use in hamstring muscle injury management.

To read the full article, visit: bjsm.bmj.com/content/48/18/1347.full

¹ Pollock N, James SLJ, Lee JC and Chakraverty R (2014). British athletics muscle injury classification: a new grading system, *British Journal of Sports Medicine* 48: 1347-51.



New open access sport journal to launch

The soon-to-be launched BMJ Open Sport & Exercise Medicine is an official journal of the British Association of Sport and Exercise Medicine (BASEM) and a sister journal to the British Journal of Sports Medicine (BJSM). It will cover all aspects of sport and exercise medicine – from physiology to return to play – making original, peer-reviewed research articles available to a global audience.

To register your interest in this journal, visit <http://bmjopensem.bmj.com>

Skin benefits of honey, green tea and vitamin C

Honey, green tea and vitamin C have been widely used as topical treatments for a variety of skin conditions, by different cultures.

A systematic review¹ recently published in *Complementary Therapies in Clinical Practice*, explored the cutaneous effects of each of these three products, 'with the goal of enhancing awareness of CAM in dermatology'.

The review showed that the antibacterial, anti-inflammatory and antioxidant properties of honey contribute to wound healing (especially pressure ulcers and burns); green tea offers a variety of protective effects from ultraviolet-induced events (including DNA damage, immunosuppression and carcinogenesis); and vitamin C produces positive effects on skin hyperpigmentation and ageing.

The authors concluded that: 'Although the majority of studies involved a small number of subjects and were short-term trials, they were able to show potential uses and efficacy of these

products for skin conditions including wound healing, skin cancer, hyperpigmentation and ageing.

Honey, green tea and vitamin C are well-known, widely available and non-toxic.'

Further studies were called for to enhance knowledge of the optimal formulations, dosages and topical delivery.

To read the full article, Google the full article title (included in reference below).

¹ Barbosa NS and Kalaaji AN (2014). CAM use in dermatology. Is there a potential role for honey, green tea and vitamin C?, *Complementary Therapies in Clinical Practice* 20: 11-15.

