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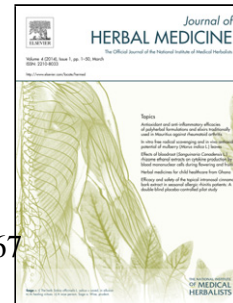
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Treating depression naturally: How flower essences can help rebalance your life. Chris Phillips. Floris Books, Edinburgh, 2017.

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This book describes the use of flower essences to help conditions of anxiety and depression. It is designed for the general reader, with short chapters on the different ways they present - such as anger and depression, family conflict, insomnia and hormonal depression - which combine accessible text, vignette-style case studies and lists of indicated flower essences. The easy-on-the-eye layout is complemented by numerous colourful pictures of flowers, and people in pensive mood, embracing or holding hands, walking in nature or exercising.

The essences are introduced at the beginning: several hundred are named in the book, from five recommended suppliers from around the globe, including the original 38 flower remedies identified by Dr Edward Bach (1886-1936), the Harley Street physician, bacteriologist, pathologist and homeopath. Flower essences are made by cutting blooms and allowing them to fall from the plant into a bowl of spring water which is then placed in sunlight until the flowers begin to wilt; the flowers are removed and the water bottled, with 20-25% brandy or other alcohol to preserve. Drops of the essence may be taken in a glass of water twice daily. Phillips estimates on a few weeks for an essence to do its work, often revealing another emotional issue which leads to the selection of the next remedy; or combinations that can be used that match the broader emotional picture. He states that the remedies are completely safe and interact neither with conventional medication nor with each other.

All the flower essences have a potential role as natural treatments for depression, in that they are used holistically to treat the core issue rather than symptoms and to bring mind, body, emotions and spirit into alignment. According to Phillips, flower essences work with vibrational patterns in nature: they get to the cause of problems by helping the user to confront underlying or repressed emotional states, often established in childhood, which support the depression, and to reduce 'stickability' and resistance to cure in order for sufferers to recover their optimism, creativity and 'the

happiness that is our birth right'. As a flower essence therapist, Phillips, in a manner akin to homeopathy, is 'looking for the unique' in the presentation of his depressed patients to guide him to the most appropriate essences as well as dowsing with a pendulum to select remedies in a more vibrationally attuned way. More broadly, his approach is informed by psychotherapy: he makes several observations of the depression he himself experienced in his teens and later, and, among a very limited set of references, he cites works of psychiatrists and psychotherapists alive and dead, such as Carl Jung, John Bowlby, Oliver James and Ken Wilber. The final section on recovery has brief explorations into complementary practices such as diet and exercise, meditation and counselling, analysing dreams, dealing with setbacks, and reactions or sensitivities to the essences themselves.

A work of this kind is inevitably a disappointment for the reader who wants to see evidence beyond simply anecdotal for the therapy under discussion, and it contains little for other practitioners either. A WHO definition of depression is provided early on but never returned to, the treatment of psychotic conditions is placed beyond the scope of the work, and a chapter on severe depression and suicidal thoughts lists several telephone numbers and the exhortation to make contact if need be. These pages are not listed in the index, which seems to be exclusively a list of individual essences or combinations, and a double-page of website addresses at the end point to where they may be purchased. The case studies drawn from Phillip's own practice lack a consistent format, as may be thought typical in CAM disciplines, are fragmentary and the outcomes, or their relationship to the flower essences employed, vague or debatable. There is no attempt to examine conditions like seasonal affective disorder (SAD), obsessive compulsive disorder (OCD), low self-esteem, and others given a chapter by the author. The book is thus pitched at the uninformed reader.

Dr Bach had developed a description of an emotional state for each of his flower remedies to allow individuals to self-identify and thus easily select the remedy they require. What I like about this book is that Phillips, a therapist of more than a dozen years' standing, continues this patient-centred approach and supports readers to use their own intuition in determining for themselves the flower essences they may need. We hear of the dire state of under-funded mental health services in the UK: according to a 2016 report of the Mental Health Taskforce, *The Five Year Forward View for Mental Health*, mental health problems represent the largest single cause of disability in the UK and three quarters of sufferers receive no support at all. NHS England report that around 15% of all people with anxiety or depression are currently being treated through the Improving Access to Psychological Therapies (IAPT) programme which commenced in 2008.¹ Criticisms of the programme pointed out by Timimi include higher costs for a limited service which privileges cognitive behavioural therapy (CBT) – Phillips too writes here of his concern that depression is 'a problem of

¹ NHS England, 2018. *Adult Improving Access to Psychological Therapies programme*. Retrieved from: <https://www.england.nhs.uk/mental-health/adults/iapt/>.

depth', and a short course of CBT cannot be expected to plumb such depths - and which has not reduced the number of prescriptions for antidepressants.² Given, too, that the most common antidepressant drugs (SSRIs) have been found to increase the chances of harmful side-effects while not improving treatment for severe depression compared to placebo, it does not seem unreasonable for a sufferer of mild depression or anxiety, if drawn to such an approach, to avail themselves of the information contained in *Treating depression naturally* and to invest in a course of safe self-treatment with flower essences, while on (or not on) a waiting list for a talking cure.³ This presumably is what led author and publisher to market such a book. Indeed, the motivational concordance model suggests that 'engaging in health-promoting rituals that enhance self-defining or self-actualizing goals provides better outcomes when compared to health-promoting rituals that are not'.⁴ Moreover, since, within IAPT treatment, the factor that has the biggest impact on outcomes, according to Timimi's research, is the therapeutic alliance *as rated by the patient*, consulting Phillips or another flower essence therapist sharing his holistic, patient-centred approach may bring additional benefit. This book then is to be recommended to the lay reader searching for more spiritual solutions to the altered moods of mild depression and anxiety.

Dr. Graeme Toby PhD has worked as a senior lecturer in the School of Community Health and Midwifery, University of Central Lancashire since 2000. His clinical background is in herbal medicine, having practised for 26 years including a period in the UK National Health Service. He is a Fellow of the Higher Education Academy and a member of the Royal Historical Society, the British Society for the History of Pharmacy and the British Herbal Medicine Association. He is external examiner for the BSc Herbal Medicine programme at Lincoln College, UK. He was visiting botanical medicine scholar at Bastyr University, Seattle, USA in 2015 and twice a visiting lecturer at Pacific Rim College, B.C., Canada. He is a member of the editorial board of the Journal of Herbal Medicine. He is the author of two books and several book chapters and articles. His latest studies are: Toby, G. 'Herbaries' and apothecaries: The identification of William Turner's herbalists in Tudor and Stuart England', *Vesalius*, XXIV(1), 67-75, and Partington, H., Duckworth, J., & Toby, G. Transformative education for sustainability, health and wellbeing: a model of online delivery. In W.L. Filho & A. Consoret-McCrea, *Handbook of Sustainability and Humanities: linking social values, theology and spirituality towards sustainability*. Cham, Switzerland: Springer.

² Timimi, S., 2015. Children and young people's improving access to psychological therapies: inspiring innovation or more of the same? *BJPsych Bulletin*, 39, 57-60.

³ Jacobsen, J.C. et al., 2017. Selective serotonin reuptake inhibitors versus placebo in patients with major depressive disorder. A systematic review with meta-analysis and Trial Sequential Analysis. *BMC Psychiatry*, 17(58). <https://doi.org/10.1186/s12888-016-1173-2>.

⁴ Hyland, M.E., 2011. Motivation and placebos: do different mechanisms occur in different contexts? *Philosophical Transactions of the Royal Society B*, 366 (1572), 1828-1837. DOI: 10.1098/rstb.2010.0391.

Conflict of interest

Graeme Tobyn has no interest to declare

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