

Lone Sorensen's Story

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Introduction

This profile about Lone Sorensen & the Sorensensistem™ is written to help reflexologists understand the conception and development of facial reflexology therapy's so that trained therapists may have confidence in its application. In 2003 I originally, met Lone in London, UK at an Association of Reflexology seminar about Facial Reflexology Sorensensistem™. I have been won over by the results I am now achieving with her facial reflexology therapy and intrigued to learn how it was developed. On 2nd June 2009 I had the privilege to be with Lone Sorensen at her Instructor training course in Barcelona. I've written this article with extracts taken from my notes at that event. Hopefully this article will inform potential students and readers that Lone's self reliance and determination to work with a scientific approach to reflexology has created for our society a new dimension in facial reflexology understanding and teaching.

Graham Sluter

Lone's Story

Lone's story with reflexology starts when she was 18 years old and she was number 59 on the reflexologist's registration in Denmark. (32 years later there are over 12,000 reflexologists in Denmark) In those days she owned a health store shop with a room for her foot reflexology work. At this time the reflexology training in Denmark was for 1 year. However, after new reflexology therapy training laws were introduced for anatomy and physiology, she required an additional 2 years training, which she achieved through night college study. After that period of training was completed, Lone studied acupuncture for another 3 years – throughout that time she always had 12 to 15 reflexology clients a day to treat. Eventually Lone's practice developed and she had another 8 therapists helping her.



Lone always had a great interest in helping children, so she went to Germany to study cranial therapy work. By that time Lone had 19 diplomas in various worldwide additional therapy courses, mostly studied in German & English, but she was always wanting more information about therapies she could work with about children's problems and this gave her great experience in the diagnosis of many children's illnesses.

After 4 years as a foot reflexologist Lone started a company in Denmark working in an airport for women office workers who had typewriter and computer related repetitive strain problems (RSI). From this humble beginning she was able to open her first institute of reflexology with 11 full time employees for foot reflexology. Always with an interest in children's problems, Lone started doing experimental work at a local school with foot reflexology but the results were not good enough and did not last for long enough, so she began to think of other ways to get better results.

When Lone was invited to visit Argentina by a Chinese doctor – Dr Wong – this course of actions started Lone's development to work with and develop her own facial reflexology techniques. Dr Wong explained to Lone about acupuncture points on the face to help children with behaviour problems, concentration and memory problems. There are 16 acupuncture points (NP points) and these have a triple function – by activating one point it works in 3 systems in the body. Lone was a foot reflexologist and this new knowledge meant she had to work acupressure points on the face (which is next to the brain) which allows the pulses from the acupressure to go directly to the brainstem.

At last this face acupressure gave Lone good results at her institute in Denmark when she and her colleagues were using her new facial techniques with foot reflexology.

In 1988 Lone closed her institute in Denmark and travelled to Argentina with her two children. Lone did not speak Spanish in this new country where she lived on top of a mountain outside a main city. She had no phone, the road structure was poor and this was not a good environment to work from home in. During that period one of Lone's first patients was a local man who had an ulcerated leg which he kept wrapped up and covered in plastic for over 30 years. He was a poor man in a bad state of health with no money, but Lone knew she could help him. Ten treatments later his leg ulcers were cured and he told all the local people about Lone's foot reflexology treatments which created an instant approval from the local people who started to pay her for foot reflexology treatments. Another patient had cancer of the liver. He had a very swollen stomach but his arms and legs were very thin like sticks. His whole body was green colour. As Lone treated him she felt he had major deposits on the liver reflex on his feet. Lone still could not speak much Spanish but she was able to communicate with him that he had three tumours in his liver and with her treatments he got better. This man told everyone he met about Lone and within six months Lone had 120 patients each week, every day working from the early morning to late at night, still working from her mountaintop location. A local lady insisted to Lone that she wanted to learn about Lone's reflexology. Within 8 months of arriving in Argentina this lady became Lone's first student and she went on to be employed by Lone in her Clinic.

Later Lone travelled to Copahue volcanic baths. Each water area had different colours (11 different colours in total) because of different mineral deposits. Each had a different temperature from 26 °C to 80 °C. Around the volcano was a medical house (which was difficult to find on the stone roads) built by a Danish person. Lone had an allergy at this point in time and the doctor gave her a plan for treatments in the green bath water at 26°C (after this treatment her allergy disappeared). It was from this volcanic bath location that Lone saw a tented community of aboriginal South American Indian people. Lone was advised not to visit them because they were not friendly towards westerners. Despite these warnings Lone visited them and witnessed her first facial stimulation, not a face massage. Lone looked on for 15 -20 minutes at two aboriginal South American Indian ladies, then two new ladies arrived for treatments. On the following day Lone again visited these people and this time she sat behind them making her drawings and taking notes of how they moved their hands. Lone was 100% sure this was more like reflexology movements. For ten days Lone spent time with this group and other women (no men, only women aged approximately 15 to 40 year old). Many years later Lone realised that this was a special moment for her to be accepted by these nomadic tribal Indians and that she had witnessed something very important there.

Later back at her home on the mountain, Lone saw a lady suffering from spasticity outside her house (People didn't make appointments – they just sat outside her house and waited). Lone had never worked on a brain damaged person before. Lone's reputation within this community was like a saint in their culture as people communicated only by word of mouth about all the good results they had received from her reflexology therapy. She treated this lady with foot reflexology for eight treatments

at no cost, but there was no change in the lady's condition. Lone then asked if she could try to work on the face with a new technique she had learnt from them the nomadic tribal Indians. After just ten minutes into the treatment the whole body of the lady relaxed, Lone had not seen such a reaction before. The lady had suffered brain damage at 20 years old after a car accident & Lone treated her when she was 23 years old. Treatments were 3 times a week with foot, face reflexology, NP points and cranial lines & points. This was the very beginning of Lone's facial reflexology therapy. She treated her for 1 year and local people wanted to know how the lady was 97% cured - her left arm was still stiff but she was able to look after herself properly without help from anymore. Many more disabled people then visited Lone and she had to move down the mountain to create a new clinic. This lady became Lone's secretary whilst she was in Argentina.

Many disabled people then started to visit Lone as her reputation increased with her experience with many sorts of brain / nervous system issues such as MS, Downs Syndrome, spina bifida etc, After 1½ years Lone had to again move to larger premises which had 3 floors for her school and clinic and 1 floor for her family's accommodation. So within 3 years of arriving Argentina, Lone had built up her organisation to treat patients and teach foot reflexology to 100 students every month and still Lone wanted to learn more about the face and brain as she continued to research and develop her work about facial reflexology.

Then, a totally paralyzed man changed Lone's life for ever. He had a child suffering from spina bifida who with his families help, went to Cuba for rehabilitation. Patients at this clinic were given different therapy treatments every 1½ hours effective for 8 hour per day. From that visit Lone learnt that with disabled people, you have to work every day for intensive treatments to get results.

Despite the difficulties in obtaining permission to visit Cuba, while she was there Lone saw a Vietnamese doctor doing fine needle work (not acupuncture). She only was in Cuba for a few days and she did not get to know his name; she could not speak with him but she did connect with him to watch what he was doing. This was in 1989 – many years ago and Lone never saw him again. The next year she was able to learn the therapy from an Argentinean doctor called Dr. Caballo who was the chief doctor in a hospital called “Hospital 10th of October” in Cuba. Dr. Caballo spoke French & Vietnamese so it was still difficult for Lone to communicate with him but eventually Lone got a copy of his face maps in French. Lone translated this into Spanish and realised it was the nervous system.

Back in Argentina Lone discussed the treatment she had seen with Spanish doctors. A girl totally paralyzed by a car accident and was having to be fed intravenously, became Lone's patient for reflexology. Lone worked with facial, foot and NP points for every day and after 3 weeks this girl could digest food herself.

Lone works every day on her patients and she also teaches her students and researches her findings to improve her application of therapy techniques. Within 2 years Lone had the basic system for facial reflexology with NP points for specific conditions.

She then went back to the Copahue tribe of Pehuenches Indians in the Andes and was invited to live with them for some days. Only women get treated every day, men are not valued in this culture for therapies they only got treated if they were injured or have problems. This nomadic tribe lives in peace and harmony with their environment. The oldest treats the youngest and passes teaching skills to next the generation of teacher. Girls are treated from their first period time. They live long lives one woman was 115 years old. Their skin is not wrinkled but a nice colour despite living conditions at high altitudes and the sun's strength. They trade in horses; eat health food, fish and vegetables. They use natural rose hip oil for treatments and they also use the rose hips to make tea to drink. They protect their skin with the rose hip oil, and pregnant women use it for massage to the womb.

Through a translator Lone was able to discuss her drawings and notes to ensure her notes were correct. It's this system developed from her meetings with aboriginal South American Indian women that Lone created her unique massage technique to feel the sensitivity of the texture of the skin, interpreting the results to reflex zones from the face to the entire body.

Later Lone was again able to return to Cuba to study "Cybernetic System" a Vietnamese treatment method. This treatment is also known "Dim Chan" which Lone developed into a part of the Facial Reflexology Sorensensystem™.

Back in her clinic in Argentina Lone had 6 assistants who treated 1000 patients per month, doing the base work part of Facial Reflexology Sorensensystem™. Lone herself then treated each of these patients for 20 minutes with her precision detailed work of the therapy, whilst her secretary called Mary wrote up all the notes precisely as Lone instructed. In a 12 year period of working to this schedule Lone was able to analyze every patient and create their individual treatment plans. With this workload Lone could see hundreds of sick children per month which provided her with opportunities to set up case study groups for special projects – eg. 30 children with spina bifida to find that a combination of facial and foot reflexology gave amazing results. A project with 30 Down's syndrome children given 4 hours treatments, 4 days a week by her students for a month; then there were elderly person case studies on Parkinson's disease and dementia; and also another study on 200 women with breast cancer.

Lone was working every night to sort out case histories of clients. Her research, dedication, practical application has given her probably the most extensive depth of knowledge and experience for treating disabled people with facial reflexology in the world. She also has a lot of experience with facial reflexology in treating illnesses like cancer, allergies, and kidney disorders to constipation.

To continue with the practicalities of providing this number of intensive treatments Lone and her assistants were searching for new ideas. Lone herself came up with the idea to teach the mothers to help their children themselves because she was now seeing very sick babies having to travel very long distances to get to her clinic. This idea worked so well that they were able to set up classes each month to teach the mothers. This was the start of what is now called Temprana Reflex Therapy which is a combination of working facial with neurological reflexology (praxis) and neurological hand reflexology. Lone decided to base the module on the intensive rehabilitation therapy work she had seen in Cuba to teach the prime carers to work specific reflexology zones on the child or adult patient.

The creation of Temprana reflex therapy changed the emphasis in Lone's clinic to 80% facial reflexology and 20% foot reflexology. Facial reflexology acts on the central nervous system and brain and foot reflexology acts on the blood/circulation and liberation of hormones in the blood.

Temprana Reflex Therapy became well known in Argentina, this period was the busiest time in Lone's life for 14 years she personally treated tens of thousands of patients and opened two more schools of reflexology.

In the year 2000 Lone went home to her native Denmark, but in 2001 she moved to Barcelona, Spain to set up her Institute of reflexology.

Lone Sorensen's Instituto Internacional de Reflexologia, teaching Facial Reflexology Sorensensistem™ is now established on 5 continents in 20 countries with over 5,500 therapists.

It is very successful and going from strength to strength – all because of Lone's research and hard dedication to research and validate her beliefs and findings that Facial Reflexology Sorensensistem™ is a natural new generation holistic therapy suitable for all ages, women, men & children.

