

More examples of the unceasing hype and nonsense on Internet sites about the properties of essential oils.

First written in Dec. 2003 by Martin Watt, **but some is still being taught in 2014.**
You will still find such errors on many web sites, in the books and course notes of people validated by the trade associations.

The below is from a Canadian website. They claimed on their home page to be a source of "quality information". See what you think of this claim.

KEY:

Text in brown between quotes"... " are their claims.

Text starting with a - are my comments.

WHITE GRAPEFRUIT OIL:

"Medicinal properties":

"Anti bacterial, anti septic" - unreliable, may not have any such effects.

"astringent" - the property of the juice maybe, but certainly **not the oil.**

"detoxifying" - classic beauty therapy hype. How the heck can the application of an essential oil to the skin, which does not then penetrate the skin, possibly have any effect on our liver or kidneys which are the main organs responsible for eliminating so called 'toxins'. There is no traditional medicine use of grapefruit oil for these purposes, it is in fact a 'modern' fruit.

"diuretic" - more beauty trade hype and comments above also apply.

"Primary uses":

"Cellulite, water retention, obesity" - beauty therapy hype to lure those gullible people who are seeking magic bullets.

"Some therapists recommend Grapefruit as part of a detoxification program when one is struggling with addictions (drug & nicotine)" - I don't know any reputable therapist who would suggest such a physical action for grapefruit oil. Clearly its effects on the olfactory system may help with the emotional trauma of being weaned from drugs.

LEMON OIL:

"Medicinal properties":

"anti- toxic" - what the heck does that mean? Does it mean if someone has got poisoning that lemon oil applied to the skin will cure them, or could it again be a corruption of the internal use of **lemon juice?**

"anti – microbial, bactericidal" - unreliable, same comments as for grapefruit.

"diuretic" - beauty trade hype, same comments as grapefruit.

"carminative, depurative, vermifuge" - possibly if the oil were consumed, but otherwise no way.

"anti – anemic" -**THIS IS DANGEROUS ADVICE AND IS WRONG!!!**

"hemostatic" - it is NOT.

"Primary uses":

"Stimulating for liver" - that is the traditional use for lemon JUICE.

"weight loss, water retention, cellulite" - beauty trade hype.

"Brittle nails" - what a joke!

"anemia" - **THIS IS DANGEROUS ADVICE AND IS WRONG**, "varicose veins; high blood pressure; dyspepsia (flatulence, acid reflux, & nausea)" - most of this for the essential oil is hogwash.

ROSEWOOD:

A highly threatened species; most therapeutic uses are aromatherapy author 'inventions'.

See other articles on this oil in my 'Articles Archive'.

SWEET ORANGE:

"Medicinal properties":

"anti inflammatory" - no way! If anything quiet the reverse it is rubefacient, you can't have it both ways.

"anti septic -bactericidal-fungicidal" - unreliable as are all citrus peel oils.

"astringent" - that is ludicrous, see 'anti inflammatory' comments above.

"choleric; digestive" - ridiculous claims with not a shred of evidence and mainly based on herbal medicine, not the external use of the oil.

"Primary uses":

"obesity and water retention..toning, wrinkles" - just beauty trade hype again.

"Constipation, digestive complaints, nausea, bronchitis, cold & flu, upset stomach, diarrhea". - None of these claims have a thing to do with the external use of the essential oil.

PINE:

"Medicinal properties":

"hypertensive" - this means it increases blood pressure, I have no idea on how it does that and have never seen a validated research reference suggesting this. If true it means those with high blood pressure should avoid household cleaners, soap, aromatic baths and perfumes where the maximum reported use level is 1.2%. All home soap makers better start putting warning labels on their soap.

"Historical uses":

"Has been used in the past to deter fleas & lice and by Native Americans to prevent scurvy". - Native Americans did not know how to produce distilled essential oils, therefore this information is a corruption extracted from the traditional use as water based herbal medicines, or the use of pine resin.

"Primary uses":

"Urinary tract infections" -corruption from internal use of the herbal tea, or possible internal use of the oil. External use could not possibly cause such an effect.

"adrenal stimulant" - I'm not sure of the advantage of this since most people's adrenals are already overworked from drinking coffee and other stimulants. What gain is there in further stimulation? In

any case this could not possibly occur from external use of the essential oil.

"water retention" - beauty therapy hype again.

TEA TREE:

"Medicinal properties":

"anti biotic" - this is a misleading term to make the oil seem more potent than it is.

"anti viral" - the evidence I have seen indicates that only water based extracts have in-vitro antiviral actions. Most essential oils are NOT effective antiviral agents. This is again a corruption of the traditional use of herbal teas by authors not trained in herbal medicine, or ignorant of the differences between herbs and essential oils.

"parasiticide" - without qualifying which parasites and where, it means nothing. I just hope the readers are not misled into thinking this means gut parasites.

"History":

" Use of this oil dates back hundreds of years" - **The native Australian tribes did not know how to distil essential oils.** That knowledge was only introduced by European settlers. The true traditional uses of the various types of so called 'tea tree' were as water based extracts.

"Safety":

" may cause slight sensitivity in some individuals" - clearly this author is confusing the term sensitivity with sensitisation... a far more serious problem. Tea tree oil is well documented as a cause of "sensitisation" particularly in the case of old or oxidised oil.

ROSEMARY:

The author lists the various chemotypes of rosemary, but then lumps all the oils together under the therapeutic uses section, yet their composition varies hugely. The writer also does not state that safety data is available only on the cineole chemotype of rosemary, not all the others.

"hypertensive" - this is urban myth without any sound evidence.

"arteriosclerosis" - I doubt this from external use of the oil. Rosemary is known to dilate capillaries, but that does not equate to the removal of the deposited atheroma plaques in arteries. Also no aromatherapist has the training or equipment to detect such an action, therefore how does any aromatherapist know?

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<http://www.aromamedical.org>