

ESSENTIAL OIL THERAPY IN THE CARE OF HIV/AIDS

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“AIDS has finished my parents, my grandparents and everyone I’m related to. I’m afraid of you, AIDS. Wherever you go you destroy, you do not think of who we’re gonna be left with; you only think about yourself...”

Anon, student at Mbalenhle primary school, Swaziland. *Litsemba* (Hope), 2008¹

Introduction

The country where I currently live, Swaziland, has the highest HIV prevalence rate in the world, estimated at 42% of the population.² This fact motivated me to study how essential oils can represent symptom relief and signify better quality of life, for those living with HIV.

There is limited information available about the use of essential oils in the care of HIV/AIDS. The aim of my work is to have a didactic experience about the effectiveness of Essential Oil Therapy in the care of people living with symptomatic HIV or AIDS. This is achieved by studying the physical and psychological assistance of essential oils in the regular care of HIV or AIDS, witnessing changes in general health and life quality in study participants, during the three months use of essential oil therapy.

HIV/AIDS – Basic notions and significance

Essentially, the Human Immunodeficiency Virus (HIV), attacks and disarms lymphocytes, more precisely the CD4 cells or T-Helper cells, an important part of the immune defense system.³ With disarmed defense mechanisms, the body is no longer able to protect itself against disease. This results in all kinds of bacteria, fungi, protozoa and viruses being able to successfully invade the organism, because they encounter no resistance. What also makes HIV so effective in destroying human lives is the fact that the defensive components of the human immune system have no known way of defending themselves against the HIV viruses.³

The HIV is present in some biological fluids. These are the blood, sperm and seminal fluid, anal mucous, vaginal secretions and breast milk. A person gets infected if any of those fluids enter the body via a mucous membrane or via the blood. There are other biological fluids and waste products like feces, nasal fluids, saliva, tears, sweat, urine or vomit, but these don’t appear to contain enough HIV to infect someone, unless one has a significant and direct contact with them and/or blood is interchanged.⁴

There are different stages of infection, defined by variations in CD4 cells counts. In an advanced phase of infection, the CD4 cell count is very low. When a person’s immune system has deteriorated so much that opportunistic infections and tumor cases are frequent, severe, and possibly life threatening, they are said to have Acquired Immune Deficiency Syndrome – AIDS, which is invariably fatal.

No definitive cure or vaccine for HIV has been discovered. The treatment available consists in antiretroviral (ARV’s) medicines that attempt to prevent the HIV virus from replicating. Despite not being a cure for HIV, these medicines may help extend the life expectancy of infected individuals. There are several different kinds of antiretroviral medicines and more are being studied, but the number of patients taking ARV’s is still very limited and most of them live in the northern hemisphere. The drugs are relatively unknown in the southern hemisphere due to their exorbitant cost and technical and financial limitations of health care systems in those countries. Despite that, some progress has been made, mainly thanks to the actions of voluntary organizations and some governments.⁶

The first cases of AIDS were detected in the USA in the early 1980’s. AIDS is caused by HIV, which supposedly originated in primates in Sub-Saharan Africa and was transferred to humans during the late 19th or early 20th century.⁷ Since then, numerous other cases were identified all over the world and today HIV represents one of the most serious human epidemics.

HIV poses a massive health challenge in Africa. Live expectancy rates have dropped progressively, often negating the previous improvements gained through better water supply, nutrition and preventative medical care.⁸ In Swaziland, a small kingdom where the total population is about 1.3 million⁹, the number of people infected with HIV, which today affects approximately 40% of the population, is estimated to greater increase by 2015.² The major reasons mentioned for the increasing figures are the ongoing accumulation of new infections and the low percentage of people who are aware of their health status in regards to the virus. In an effort to amend the projections, various measures are being taken, such as prevention campaigns, testing and health counseling programs.²

The large proportion of Swazis infected with HIV are at late stage or severe symptomatic stage. Western medicine options are severely limited due to a scarcity of resources and expertise, and the lack of broad access to antiretroviral therapy, meaning that HIV is virtually always fatal.

Alternative medicines in Swaziland

There are no Aromatherapy practitioners in Swaziland and the activity is not formally recognized or legislated by the Swazi government. Therefore, aromatherapy belongs to a health section called “unregulated health service providers”, where traditional health practitioners are also included.¹⁰ According to the World Health Organization, “In Swaziland, the Control of Natural Therapeutic Practitioners Regulations of 1978, limits the definition of *Natural Therapeutical Practitioner* to persons practicing chiropractic, homeopathy, naturopathy, or electropathy. The prohibitions on personal practice are similar to those in force in Lesotho. Some traditional medicine practitioners are involved with Swaziland’s primary health care program.”¹¹

In Swaziland, besides Australian Tea Tree essential oil commonly sold in pharmacies, and a few foreigners that have some very basic notions about it, aromatherapy is unfamiliar to most of the population. Whenever I met someone using Tea Tree oil, I would inquire about why and how they used it. Some respondents mentioned insect bites, for itching and swelling relief as well as prevention, acting as a repellent. Others use it for preventing scarring and help in healing skin lesions. Others simply like the aroma and use it in baths. In all cases, the oil was used without a carrier and by individuals not familiarized with the practice of aromatherapy.

Despite not being familiar with aromatherapy, Swazis have a long history of the use of traditional medicine. When searching for a cure or relief for their illness, they frequently visit the traditional healers or *Sangomas*, who predominantly use medicinal plants in their treatments. People infected with HIV are no exception and they also often search for *Sangoma*’s help. Perhaps that explains how confident and enthusiastic they are about the idea of trying something unknown for them but also generated by nature, such as essential oils.

HIV Opportunistic infections

During the symptomatic phases of HIV infection, there are numerous opportunistic illnesses that can occur. Besides the immune system fragility and emotional disturbances, some of the most common ailments are: pneumonia, tuberculosis, septicaemia, hepatitis, candidiasis, herpes simplex and zoster, Kaposi’s sarcoma, lymphoma, yeast infection, squamous cell carcinoma, among others.

Different conditions occur at different stages of HIV infection. In early HIV disease, people can develop tuberculosis, malaria, bacterial pneumonia, herpes zoster, staphylococcal skin infections and septicaemia. These are diseases that people with normal immune systems can also get, but with HIV, they occur at a much higher rate. It also takes longer for a person with HIV to recover than it takes for someone with a healthy immune system. When the immune system is weakened due to advanced HIV disease or AIDS, opportunistic infections such as pneumocystis pneumonia, toxoplasmosis and cryptococcosis, are apt to develop. Some infections can spread to a number of different organs, which is known as disseminated or systemic disease. Many of the opportunistic infections that occur at this late stage can be fatal.¹²

Essential Oil Therapy benefits in the care of HIV/AIDS

Aromatherapy is an alternative and complementary form of therapy, which offers different approaches regarding the treatment and care of numerous health related conditions. The skilled use of essential oils is the main characteristic of this form of therapy. However, from a holistic perspective, aromatherapy treatments can incorporate other forms of health restoration.¹³

Although there is no known cure for HIV, the immune system can be strengthened and secondary infection prevented through the use of essential oils. Besides the significant positive contribution to physical pathological manifestations, essential oils can also have a positive action in the emotional and psychological levels, enhancing the mood and providing emotional support.¹⁴ From a holistic perspective, combining the aromatherapy treatment with a healing diet, appropriate supplements, adequate rest and exercise, stress reduction and proper environment, the quality of life can be considerably improved.

By itself or as a complement of allopathic (conventional) medicine, aromatherapy can offer very effective and pleasant possibilities, however, with HIV or AIDS, the use of essential oils should be complementary to an HIV treatment program and the patients should be encouraged to frequently visit the doctor to monitor their health state, which comprises doing the CD4 count.

Case Studies

For this research study, ten individuals had access to free aromatherapy consultation and treatment. They belong to a community in the periphery of Mbabane and all of them integrate an HIV community support group. They were selected according to factors relating to their personal willingness to participate and the opinion of the support group leader. The ages vary from 6 to 58 years old, of both sexes, and they are all underprivileged people, facing a constant struggle with their health and life, whilst keeping an admirable sense of present, acceptance and hope. I attended the community support group once a week for three months, and the treatments consisted of different personalized types of aromatic formulas that they were instructed on how to use.

The following table shows the main conditions presented by each case, as well as the chosen blends and therapeutic strategy.

Table 1. *Main Condition and Chosen Therapy*

Case #	Age	Sex	Main condition	Aromatherapy treatment Blend	Therapeutic strategy
1	6	m	Pneumonia	1. Massage oil (4%) = 12 drops Eucalyptus (<i>Eucalyptus radiata</i>) + 6dr Origanum (<i>Origanum vulgare</i>) + 6dr Rosewood (<i>Aniba rosaeodora</i>) in 1oz Sweet almond (<i>Prunus dulcis</i>).	Massage upper chest, upper back, neck and soles of the feet (lungs area) 3x/day. Let him inhale from hands after the massage. Use lots of garlic and onions.
2	14	m	Flat warts (?) ^{5,15}	1. <u>Floral water spray</u> 100ml: (2%) = 20 drops Tea Tree (<i>Melaleuca alternifolia</i>) + 20dr Geranium (<i>Pelargonium graveolens</i>), in 50ml tea tree floral water and 50ml geranium floral water. 2. <u>Night body oil</u> 50ml: (3%) = 15dr Tea Tree (<i>Melaleuca alternifolia</i>) + 15dr Geranium (<i>Pelargonium graveolens</i>), in 25ml sweet almond (<i>Prunus dulcis</i>) and 25ml grapeseed (<i>Vitis vinifera</i>).	Apply floral water spray to affected areas every morning. Also apply in the head, being very careful not to reach the eyes. Massage affected areas with night body oil two times per day, one of them being at night.

Case #	Age	Sex	Main condition	Aromatherapy treatment Blend	Therapeutic strategy Application method
3	58	f	Sinus	<p>1. <u>Sinus oil</u> 10ml: (2%) = 2 drops Lavender (<i>Lavandula angustifolia</i>) + 1dr Eucalyptus (<i>Eucalyptus radiata</i>) + 1 dr Peppermint (<i>Mentha piperita</i>), in 10ml Sesame oil (<i>Sesamum indicum</i>).</p> <p>2. <u>Sinus inhalation</u> 3ml: (100%) = 1ml Eucalyptus (<i>Eucalyptus radiata</i>) + 1ml Tea Tree (<i>Melaleuca alternifolia</i>) + 1ml Pine (<i>Pinus sylvestris</i>).</p>	<p>Massage sinus areas with sinus oil 3 times per day. Inhale from fingers. Use sinus oil as nose drops 3 times per day.</p> <p>Use pure blend for a steam inhalation: 3 drops in a hot water bowl, 10 min. 2 times per day. Inhale directly from bottle during the day.</p>
4	33	f	Itchy/scaly skin blisters all over the body	<p>1. <u>Aromatic spray</u> 100ml: (3%) = 30 drops Lavender (<i>Lavandula angustifolia</i>) + 20dr Tea Tree (<i>Melaleuca alternifolia</i>) + 10dr Geranium (<i>Pelargonium graveolens</i>) in 50ml geranium floral water and 50ml tea tree floral water.</p> <p>2. <u>Body oil</u> 50ml: (3%) = 10dr Lavender (<i>Lavandula angustifolia</i>) + 10dr Tea Tree (<i>Melaleuca alternifolia</i>) + 10dr Geranium (<i>Pelargonium graveolens</i>) in 25ml sweet almond (<i>Prunus dulcis</i>) and 25ml grapeseed (<i>Vitis vinifera</i>).</p> <p>3. <u>Pure bath</u> 5ml: (100%) = 3ml Lavender (<i>Lavandula angustifolia</i>) + 1ml Tea Tree (<i>Melaleuca alternifolia</i>) + 1ml Geranium (<i>Pelargonium graveolens</i>).</p>	<p>Apply aromatic spray on affected areas in the morning. Also apply to the head, being very careful with the eyes.</p> <p>Massage affected areas with body oil two times per day, one of them being at night.</p> <p>Add 6 drops of pure blend to a cup of sea salt and add it to the bath. Soak for 20 min. Dry skin well afterwards.</p>
5	50	f	Dark marks in lower legs	<p>1. <u>Massage oil</u> (5%) = 20 drops Tea Tree (<i>Melaleuca alternifolia</i>) + 15dr Lavender (<i>Lavandula angustifolia</i>) + 15dr Geranium (<i>Pelargonium graveolens</i>), in 50ml sweet almond (<i>Prunus dulcis</i>).</p>	<p>Massage lower legs three times per day.</p>
6	29	f	Swollen leg and feet	<p>1. <u>Gentle massage oil</u> 30ml: (4%) = 12drops Spike Lavender (<i>Lavandula latifolia</i>) + 5dr Cypress (<i>Cupressus sempervirens</i>) + 4dr Lemongrass (<i>Cymbopogon citratus</i>) + 3dr Frankincense (<i>Boswellia carteri</i>), in 17ml grapeseed, 10ml arnica (<i>Arnica montana</i>) and 2ml carrot seed (<i>Daucus carota</i>).</p> <p>2. <u>Pure blend</u> 4ml: (100%) = 2ml Lemon (<i>Citrus limon</i>) + 1ml Cypress (<i>Cupressus sempervirens</i>) + 1ml Juniper berry (<i>Juniperus communis</i>).</p>	<p>Gently massage legs and feet with massage oil 2 to 3 times per day, in circular movements, towards the heart.</p> <p>Use 4 drops of pure blend in a basin and soak for 15 minutes. Afterwards lie down and elevate feet for 15 minutes.</p> <p>Reduce salt intake. Drink lots of pure water.</p>

Case #	Age	Sex	Main condition	Aromatherapy treatment Blend	Therapeutic strategy Application method
7	42	m	TB + Painful knees	<p>1. <u>Chest rub</u> 50ml: (4%) = 16drops Eucalyptus (<i>Eucalyptus radiata</i>) + 16dr Lemongrass (<i>Cymbopogon citratus</i>) + 7dr Clove (<i>Eugenia caryophyllus</i>) + 7dr Peppermint (<i>Mentha piperita</i>), in 25ml Sweet almond (<i>Prunus dulcis</i>) and 25ml Grapeseed (<i>Vitis vinifera</i>).</p> <p>2. <u>Personal inhaler</u>: (100%) = 10dr Eucalyptus (<i>Eucalyptus radiata</i>) + 7dr Lemongrass (<i>Cymbopogon citratus</i>) + 4dr Clove (<i>Eugenia caryophyllus</i>) + 4dr Peppermint (<i>Mentha piperita</i>).</p> <p>3. <u>Aromatic joints</u> 50ml: (3%) = 10dr Lavender (<i>Lavandula latifolia</i>) + 10dr Peppermint (<i>Mentha piperita</i>) + 10dr Rosemary (<i>Rosmarinus officinalis</i> ct camphor), in 30ml St. John's wort (<i>Hypericum perforatum</i>) + 15ml grapeseed (<i>Vitis vinifera</i>) + 5ml carrot seed (<i>Daucus carota</i>).</p>	Apply chest rub to upper chest and neck, front and back, 2 to 3 times per day. Apply the same oil to soles of the feet at night. Inhale from hands after application. Use personal inhaler several times during the day, inhaling slowly and deeply, while closing the other nostril. Apply aromatic joints oil to knees 2 to 3 times per day.
8	37	f	Facial pimples + Wart	<p>1. <u>Facial lotion</u> 50ml: (4%) = 15dr Lavender (<i>Lavandula angustifolia</i>) + 15dr Geranium (<i>Pelargonium graveolens</i>) + 10dr Tea Tree (<i>Melaleuca alternifolia</i>), in 50ml lotion base.</p> <p>2. <u>Wart blend</u> 5ml: (100%) = 35dr Lavender (<i>Lavandula angustifolia</i>) + 35dr Tea Tree (<i>Melaleuca alternifolia</i>) + 30dr Lemon (<i>Citrus limon</i>).</p>	Apply facial lotion morning and night to affected areas, after cleaning the face with water or a gentle soap. Apply Wart blend into the wart 3 times per day. If possible, apply it into a bandage and then cover the wart with it.
9	12	f	Body skin colored marks	<p>1. <u>Body oil</u> 50ml: (3%) = 10drops Lavender (<i>Lavandula angustifolia</i>) + 10dr Tea Tree (<i>Melaleuca alternifolia</i>) + 10dr Geranium (<i>Pelargonium graveolens</i>) in 25ml sweet almond (<i>Prunus dulcis</i>) and 25ml grapeseed (<i>Vitis vinifera</i>).</p> <p>2. <u>Pure bath</u> 5ml: (100%) = 3ml Lavender (<i>Lavandula angustifolia</i>) + 1ml Tea Tree (<i>Melaleuca alternifolia</i>) + 1ml Geranium (<i>Pelargonium graveolens</i>).</p>	Massage affected areas with body oil two times per day, one of them being at night. Add 6 drops of pure blend to a cup of sea salt and add it to the bath. Soak for 20 min. Dry skin well afterwards and apply the body oil.

Case #	Age	Sex	Main condition	Aromatherapy treatment Blend	Therapeutic strategy Application method
10	36	f	Swollen legs	<p><u>Gentle massage oil</u> 30ml: (4%) = 12drops Spike Lavender (<i>Lavandula latifolia</i>) + 5dr Cypress (<i>Cupressus sempervirens</i>) + 4dr Lemongrass (<i>Cymbopogon citratus</i>) + 3dr Grapefruit (<i>Citrus x paradisi</i>), in 17ml grapeseed (<i>Vitis vinifera</i>), 10ml arnica (<i>Arnica montana</i>) and 2ml carrot seed (<i>Daucus Carota</i>).</p> <p><u>Pure blend</u> 4ml: (100%) = 2ml Lemon (<i>Citrus limon</i>) + 1ml Cypress (<i>Cupressus sempervirens</i>) + 1ml Juniper berry (<i>Juniperus communis</i>).</p>	<p>Gently massage affected areas with massage oil, 2 to 3 times per day, in circular movements towards the heart.</p> <p>Use 4 drops of pure blend in a basin and soak for 15 minutes. Afterwards lye down and elevate feet 15 minutes.</p> <p>Reduce salt intake. Drink lots of pure water. Be more active and be more careful with diet.</p>

* For more details concerning each case, refer to the appendix 2.

**The therapeutic strategies were designed according to the specific social context of the study group and the cultural, social and economic circumstances mentioned above. For this reason, they might seem too minimalist or simplified. In all cases, they were advised to regularly meet with the physician for further evaluation.

In this study group, the majority of the cases were related to the integumentary and respiratory body systems. The consult meetings happened once a week during three months and, in some cases, the essential oil blends had to be adjusted. In the above table, only the optimal final blends are presented. The majority of the individuals who participated in the study, were regular attendees at support meetings. In these cases, the evaluation of the efficacy of the treatments with essential oils was more accurate, as the feedback allowed the therapist to modify the therapeutic strategy if necessary. In those cases where the regular follow-up happened, a clear improvement was revealed after the three-month period. Appreciation and desire to continue the treatments were among the main feelings expressed by those involved in the study.

Summary

Essential oils prove to be extremely beneficial in the care of HIV/AIDS patients. The therapeutic properties of essential oils allow them to interact with all the body systems, including the nervous and immune systems. Therefore, numerous conditions can be addressed and considerable welcomed relief can be achieved.

The cultural, social and economical contexts of the individuals subjected to treatments must be considered when planning a holistic healing approach. Factors like poverty can compromise the application of an ideal holistic therapeutic strategy. Despite this factor, common to all the individuals involved in this study, the treatment programs were optimized according to the circumstances of each one, and the results were extremely satisfying. The high quality essential oils and carriers used during the study, revealed extraordinary effectiveness in alleviating HIV related symptoms, especially relating to the integumentary and respiratory systems. In individuals living with HIV and AIDS, the psychological and emotional areas are often very fragile and great enhancements were also verified concerning these aspects. During the study, some of the initial aromatic blends and application methods were revised and readjusted to the condition dynamics and individual response. With HIV and AIDS patients, aromatherapy should be planned for a long-term application and aromatic formulas should be constantly verified and adapted to the ever-changing circumstance of the patient. In the future, the aim is to continue this and other similar programs, only possible through a dedicated team of qualified professionals and financial support from

HIV/AIDS related institutions or aromatherapy associations, which may sponsor an HIV Aromatic Care Program in countries like Swaziland.

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