ROCKING FOR THE AGES:
THE MEDICAL AND THERAPEUTIC BENEFITS OF ROCKING

Optima PRODUCTS INC.
A place to enjoy a warm night on the porch, a cozy seat by the fire, a place to soothe a fussy baby. Rocking chairs are all of these things and more. In fact, research has shown they can also be a valuable medical tool.

Benjamin Franklin is attributed by some to have invented the rocking chair, though there’s no historical proof of this. We do know, however, that the rocking chair traces back to 18th century North America.¹

Rocking is not merely soothing and relaxing. The health benefits of rocking were introduced to the American public when President John F. Kennedy was prescribed time in a rocking chair by his physician in 1955 to help relieve his chronic back pain. The President found his rocker to be so beneficial that it accompanied him on Air Force One and around the world. Kennedy also bought rockers for Camp David and the family estate, and was even known to give the chairs as gifts to friends and heads of state.

The rocker works with the body to reduce pain like President Kennedy’s in an ingenious way. The spinal cord can work in only one direction. When the brain is busy sending motor impulses down the spinal cord to make a patient’s legs rock the chair, pain impulses from the back are blocked and cannot reach the brain. This, in turn, allows the back muscles to relax.²

In recent decades, more medical benefits of rocking chair therapy have been discovered:

**ASSISTED LIVING AND DEMENTIA PATIENT SETTINGS**

Investigations in the 1990s showed that rocking chair therapy improved the emotional health of dementia patients in nursing homes. A lessening of depression and anxiety was noted, and, like Kennedy, many patients experienced pain relief and, in turn, needed less pain medication. Most notable was a study funded by the New York State Department of Health, in which researcher Nancy Watson of the University of Rochester studied 25 nursing home residents diagnosed with dementia, including Alzheimer’s disease. Nurses monitored the patients during a six-week program in which they actively rocked, vs. six weeks in which the rocking mechanism on their chairs was disabled.

The nurses noted that during the rocking weeks, most residents’ psychological and emotional well-being improved, and time in the rockers almost immediately soothed distressed patients. Behaviors like crying or signs of anxiety and depression notably decreased in 11 patients. What’s more, Watson noticed, rocking decreased patients’ needs for pain medication and improved their balance.³

A 2001 study, published in Geriatric Nursing, looked at 30 nursing home residents with dementia. The researchers measured the emotions of the residents before, during and after a 10-day intervention in which the residents used a glider rocker for 20 minutes per day. The researchers discovered a significant improvement in mood after just ten minutes in the chair.⁴

A 2010 study of elderly women examined the benefits of a six-week rocking chair exercise program. The subjects participated in ten weekly 15-minute sessions of rocking-chair based exercises, while a control group did no rocking chair exercises. After three months, the rocking group showed significant physical improvements, including better knee-extension strength and walking speed. The researchers were also impressed with the subjects’ willingness to continue the program. Eighty-eight percent of the participants continued the exercises after the completion of the study.⁵

The authors of a 2009 study were curious about data that showed that patients with Alzheimer’s disease who spent time in rockers demonstrated “significant improvements in depression, anxiety, and balance and a decrease in pain medication usage” wrote the authors. They hypothesized that a beneficial rise in blood pressure was the reason. Indeed, as the subjects rocked, and their blood pressures increased. The resultant “enhanced cerebral perfusion,” they believed, “may play a fundamental role in designing nursing interventions focused on improvement of symptoms associated with Alzheimer’s disease.”⁶
NEUROLOGICAL BENEFITS AND REHABILITATION

A study at the Baylor College of Medicine in 1992 found that vestibular rehabilitation therapy, such as rocking chair therapy, can help patients with vestibular dysfunction, such as vertigo and episodes of dizziness.

Researcher Dr. Greg Ator wrote, “Vestibular rehabilitation is an important treatment modality for patients with vestibular dysfunction who are not surgical candidates. An increasing proportion of our society, the elderly, are often prime candidates for vestibular rehabilitation therapy. It appears that patients with peripheral vertigo with classical symptoms, especially of an episodic variety will definitely benefit from a vestibular rehabilitation program but also patients with a vague disequilibrium and probable central etiology for this condition may also benefit from vestibular rehabilitation therapy.” 7

SAFE ROCKERS FOR HEALTHCARE ENVIRONMENTS

Rocking chairs and gliders have proven therapeutic benefits, but many institutions and clinicians dismiss the idea of utilizing them because in the past, rockers have posed a fall risk to patients suffering from compromised balance and stability during ingress and egress from the chair.

The newest technology, however, negates the instability of traditional rocking chairs, making them as safe and stable as any stationary chair. This technology is available from LPA Medical and Optima Products. LPA Medical and Optima Products make one thing: specialty chairs and accessories for hospital and nursing home settings. Lift chairs, recliners, positioning chairs, and of course rocker-gliders have been the focus of LPA Medical and Optima for more than a decade.

Thera-Glide Safety Gliders are unique in that they are safe for any patient. A patented automatic locking system keeps the gliding motion locked until the user is safely seated, disengaging only when the weight of the patient is placed against the chair back. Similarly, the chair locks as soon as a resident or patient leans forward to exit, thus un-weighting the chair back. With fall risks eliminated, any institution can provide patients with a gliding chair that can meaningfully provide therapeutic benefits.

Choices are also important when selecting any piece of furniture, including chairs. Different settings have different needs when it comes to materials. A manufacturer should provide a selection of fabrics for various applications, as well as a choice of frame materials. Thera-Glide chairs offer other beneficial features as well, including steel internal frames and gliding mechanisms for exceptional durability, a life-time warranty on the glide bearings, a broad array of styles—in a choice of metal or wooden frames—and dozens of healthcare grade fabrics for every setting. Thera-Gliders also feature height-adjustable seats in varying widths.

REFERENCES

1 The Columbia Tribune, April 5, 2005; http://www.columbiatribune.com/news/2012/apr/05/innovative-benjamin-franklin-rocked/
2 http://www.rockingchairtherapy.org/research.html
5 Aging Clinical and Experimental Research 2011: 23(4):279-87
6 Biological Research for Nursing 2009: 11(2):144-51
7 Neurologic Clinics, 1990:8:459-475