

**LETTER TO THE EDITOR**

# Letter to the Editor Concerning Critique by Thomas J. Wheeler of ‘Efficacy of Facilitated Tucking Position and Reiki Given to Preterm Infants During Orogastric Tube Insertion: A Randomised Controlled Trial’

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Dear Dr. Oei,

The Center for Reiki Research (CRR) is writing in response to the Letter to the Editor by Thomas J. Wheeler [1] regarding the article ‘Efficacy of facilitated tucking position and Reiki given to preterm infants during orogastric tube insertion: A randomized controlled trial’ [2]. The CRR is a US-based, international non-profit group that reviews, ranks, summarises and catalogues peer-reviewed research on Reiki and advocates for scientific rigour in Reiki research (see: [www.centerforreikiresearch.org](http://www.centerforreikiresearch.org)).

In his letter, Dr Wheeler criticises the quality of the cited paper for several reasons including the lack of a sham control group (i.e., administering an identical touch-based protocol but without any intent to transmit Reiki), and lack of blinding of the data collectors. The CRR agrees with Dr. Wheeler’s critique. In fact, we noted the same weaknesses in our own evaluation of the paper (available at [www.centerforreikiresearch.org](http://www.centerforreikiresearch.org)) using CRR’s ‘Touchstone Process’ [3].

Reiki has been shown to reduce stress and improve wellbeing but it is not yet universally accepted as a validated medical treatment, partly due to an apparent lack of understanding among some Reiki researchers about how to rigorously design and properly report their studies.

CRR Board Member, Ann Baldwin, recently co-authored ‘Biofield Therapies: Guidelines for Reporting Clinical Trials’ [4] which outlines the steps required to produce scientifically sound research papers. While this article focuses on *reporting* biofield studies, the guidelines are applicable to *designing* studies as well.

As a respected journal in this discipline, and to improve the quality of published papers on Reiki and other biofield therapies in the future, CRR recommends augmenting your ‘Instructions for Authors’ with a copy of, or reference to, these guidelines.

CRR’s mission is to validate and foster the acceptance of Reiki biofield therapy as an integrative healthcare practice. Only rigorous, scientifically robust studies can provide the evidence necessary to support the use of this low risk, non-invasive modality in clinical settings.

## Funding

The author has nothing to report.

## Conflicts of Interest

The author declares no conflicts of interest.

## Data Availability Statement

Data sharing not applicable to this article as no datasets were generated or analysed during the current study.

Ann L. Baldwin

## References

1. T. J. Wheeler, “Letter to the Editor Concerning “Efficacy of Facilitated Tucking Position and Reiki Given to Preterm Infants During Orogastric Tube Insertion: A Randomised Controlled Trial”,” *Journal of Paediatrics*

and Child Health 60, no. 12 (2024): 844–851, <https://doi.org/10.1111/jpc.70090>.

2. H. Kurt Sezer, H. Onal, H. Degirmencioglu, and S. Kucukoglu, “Efficacy of Facilitated Tucking Position and Reiki Given to Preterm Infants During Orogastric Tube Insertion: A Randomised Controlled Trial,” *Journal of Paediatrics and Child Health* 61, no. 7 (2025): 1158–1159, <https://doi.org/10.1111/jpc.16686>.

3. A. L. Baldwin, A. Vitale, E. Brownell, J. Scicinski, M. Kearns, and W. Rand, “The Touchstone Process: An Ongoing Critical Evaluation of Reiki in the Scientific Literature,” *Holistic Nursing Practice* 24, no. 5 (2010): 260–276.

4. R. Hammerschlag, M. Sprengel, and A. L. Baldwin, “Biofield Therapies: Guidelines for Reporting Clinical Trials,” *Explorer* 20, no. 2 (2024): 196–205, <https://doi.org/10.1016/j.explore.2023.08.001>.