

Integrative and complementary practices for pain relieving or controlling in oncology

Práticas integrativas e complementares para alívio ou controle da dor em oncologia

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ABSTRACT | OBJECTIVE: Presenting the main integrative and complementary practices used for pain relieving or controlling in oncology and identifying nurses' praxis in the use of PICS in cancer patients. **METHOD:** Integrative literature reviewing in the LILACS, SciELO, BDNF and MEDLINE databases from 2008 to 2018. Bardin content analysis was used. **RESULTS:** 13 articles were selected for this study. 69.23% of these were published by nurses. As for the year of publication, 2018 was the one with the most publications (30.76%) and the database with the largest number of publications was LILACS (53.83%). The main PICS adopted for pain relief or control were acupuncture, ear acupuncture, herbal medicine, *reike*, homeopathy and foot reflexology. The practice of nurses in the use of PICS highlights its importance in health education and its applicability. **CONCLUSIONS:** Pain is a symptom experienced by most cancer patients, with which there is a wide field of action for nurses through PICS. Therefore, nurses must take ownership of PICS to make them integral and complementary to pharmacological therapies.

DESCRIPTORS: Integrative and complementary practices. Cancer pain. Nursing. Neoplasms.

RESUMO | OBJETIVO: Apresentar as principais práticas integrativas e complementares (PICS) empregadas para alívio ou controle da dor em oncologia e identificar a práxis dos enfermeiros na utilização das PICS em pacientes oncológicos. **MÉTODO:** Revisão integrativa da literatura nas bases de dados LILACS, SciELO, BDNF e MEDLINE durante o período de 2008 a 2018. Utilizada a análise do conteúdo de Bardin. **RESULTADOS:** Foram selecionados 13 artigos para a realização deste estudo, sendo que 69,2% destes publicados por enfermeiros. Quanto ao ano de publicação, 2018 apresentou maior número de publicações (30,8%) e a base de dados com mais publicações foi a LILACS (53,8%). As principais PICS adotadas para o alívio ou controle da dor foram a acupuntura, acupuntura auricular, fitoterapia, *reiki*, homeopatia e a reflexologia podal. A práxis dos enfermeiros na utilização das PICS ressalta sua importância na educação em saúde e na sua aplicabilidade. **CONCLUSÕES:** As PICS, principalmente acupuntura, fitoterapia, reiki, homeopatia e reflexologia podal, representam recursos terapêuticos importantes no alívio da dor oncológica. A práxis dos enfermeiros na utilização desta terapêutica em pacientes oncológicos em hospitais, ainda se constitui um desafio em função da dificuldade de lidar com a hegemonia do modelo biomédico e à deficiência na formação acadêmico-profissional.

DESCRITORES: Práticas integrativas e complementares. Dor do câncer. Enfermagem. Neoplasias.

Introduction

The term "cancer" is used to denote diseases, whose disordered cell growth invades tissues and organs, multiplying in an accelerated, uncontrolled and aggressive manner. In view of the severity of the disease, the Ministry of Health (MS), with the National Cancer Institute (INCA), projected an estimated 600,000 new cases of cancer during the 2018-2019 biennium. For each year of the 2020-2022 triennium, the incidence of 625 thousand cancer cases in Brazil is estimated¹⁻³.

According to the MS, cancer treatment can be performed through one or even a combination of various modalities and techniques, namely: cancer surgery, radiotherapy, chemotherapy or bone marrow transplantation³.

According to the INCA, pain is a symptom experienced by most cancer patients, corresponding to 46% to 92% of those affected by the pathology, and this symptom can be characterized as follows: directly related to cancer (12% to 29 %), antitumor treatment (5% to 20%) or even concomitant disorders (8% to 22%)⁴.

The prevalence of pain tends to increase according to the progression of the cancer, being experienced moderate or intense by 30% of patients who are undergoing treatment and from 60% to 90% of patients in advanced stage⁴. Because it is one of the most frequent complaints in cancer patients, pain requires adequate treatment and complementary interventions that aim to reduce the suffering related to it. In this context, Integrative and Complementary Practices (PICS) can be applied by nurses when assessing pain and the therapeutic response, collaborating in the reorganization of the pharmacological scheme and proposing non-pharmacological strategies for relief⁴⁻⁵.

PICS are therapeutic resources that stimulate the natural mechanisms of prevention and health recovery through effective and safe Technologies⁶. In 2006, with the creation of the National Policy of Integrative and Complementary Practices (PNPIC), they were initially offered by the Unified Health System (SUS), 5 (five) PICS, however, currently, 29 (twenty-nine) are available for the population⁷⁻⁸.

There is a wide field of action for nurses through complementary therapies, due to their constant relationship and continuous contact with the patient, making their role in the implementation of practices important, so that pain relief and / or control occurs. On the other hand, although PICS are recommended by the Ministry of Health, there is little use of these by the nurse and the number of publications that address the nurse-pain triad - PICS is even lower⁹.

Based on the foregoing, the objective was to present the main integrative and complementary practices used for pain relief or control in oncology and to identify nurses' praxis in the use of PICS.

Method

It is an integrative literature review, which has been identified as a unique tool in the field of health, as it synthesizes the available research on a given theme and directs the practice based on scientific knowledge¹⁰.

This was structured in the six phases of the process of preparing the integrative review: elaboration of the guiding question; search or sampling in the literature; data collect; critical analysis of the included studies; discussion of results; and presentation of the integrative review¹⁰.

The searches were performed on the Virtual Health Library (VHL) portal, filtering the articles displayed in the databases of Latin American and Caribbean Literature in Health Sciences (LILACS), in the Virtual Scientific Electronic Library Online Library (SciELO), at Nursing Database (BDENF), Medical Literature Analysis and Retrieval System Online (MEDLINE).

The research in the Health Sciences Descriptors (DeCS) enabled the survey and selection of four descriptors: "cancer pain", "nursing", "neoplasms" and "complementary therapies". After defining the descriptors and the keyword, a combination was made using the Boolean connector "AND". The descriptor "complementary therapies" was used in isolation, that is, without the use of the Boolean connector "AND", in the SciELO database.

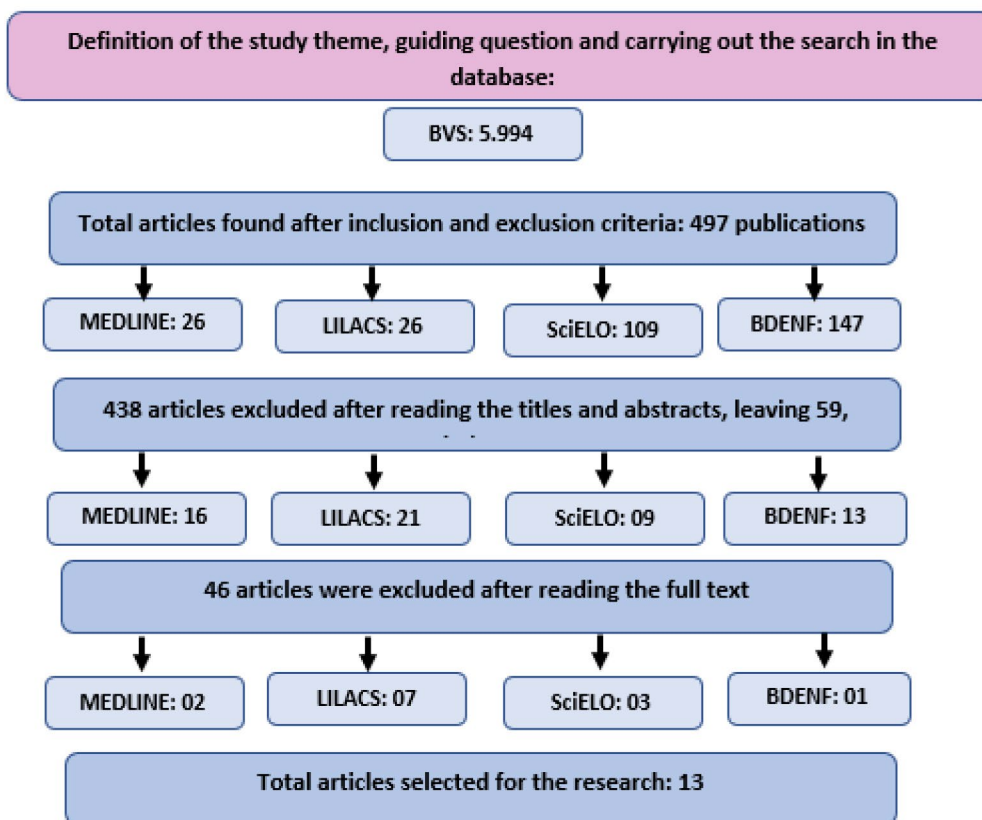
The inclusion criteria adopted for the selection of this sample were: original articles and full texts available in full and online, which had a connection with the proposed theme, published in the Portuguese language from 2008 to 2018. Articles were established as exclusion criteria repeated in the databases used and the review articles.

Data analysis was based on the analysis of Bardin's content. Being divided into 3 (three) stages: research of the material and organization according to subthemes; exploration of data and subsequent

synthesis of important aspects of the text; and, evidence and description of relevant information¹¹.

5,994 articles were found in the Virtual Health Library (VHL). After applying the inclusion and exclusion criteria adopted, 497 studies were identified in the databases and 438 were excluded after reading the titles and abstracts for not meeting the objective of this research. Of the total 59 selected articles selected, 46 were excluded after reading in full because they did not offer subsidies to answer the guiding question, leaving 13 articles to carry out the present review.

Figure 1. Below illustrates the details of the process for choosing the articles selected to compose this integrative review



Results and discussion

Of the 13 articles selected, regarding the year of publication: 1 (one) article was published in 2008, 2009, 2010 and 2012, corresponding to 7.69% each; 2 (two) articles (15.38%) were published in 2013; 3 (three) articles (23.07%) were published in 2015; and, 4 (four) (30.76%) in 2018.

The database that most published on the theme addressed was LILACS, corresponding to 7 (seven) articles, that is, 53.84%. 69.23% were identified, representing 9 articles made by nurses.

After the detailed reading of the selected publications, the articles were synthesized with a table containing the following information: year of publication; data base; title of the article; and, authors, with the purpose of explaining in a standardized way the relevant information for this review.

Chart 1. Summary of selected articles, in descending order

Year of Publication	Database	Title	Authors
2018	SciELO	Impacts of integrative and complementary practices on the health of chronic patients	Dacal MPO, Silva IS
2018	SciELO	Effectiveness of auricular acupuncture in the treatment of cancer pain: randomized clinical trial	Ruela LO, Iunes DH, Nogueira DA, Stefanello J, Gradim CVC
2018	LILACS	Complementary integrative practices in primary health care	Matos PC, Laverde CR, Martins PG, Souza JM, Oliveira NF, Pilger C
2018	LILACS	Action and interaction strategies for the care of hospitalized children with chronic cancer pain	Silva TP, Leite JL, Stinson J, Lallo C, Silva IR, Jibb L
2015	LILACS	Medicinal plants used by the population of the city of Lagarto- SE, Brazil- emphasis on cancer patients	Caetano NLB, Ferreira TF, Reis MRO, Neo GGA, Carvalho AA
2015	LILACS	Therapeutic approaches used in pain management in oncology	Pereira DTS, Andrade LL, Agra G, Costa MML
2015	LILACS	Ethical problems experienced by oncology nurses	Luz KR, Vargas MAO, Schmidtt PH, Barlem ELD, Barlem JGT, Rosa LM
2013	SciELO	Integrative and complementary practices in nursing care: an ethical approach	Magalhães MGM, Alvim NAT
2013	MEDLINE	Complementary health practices and the challenges of their applicability in the hospital: nurses' view	Melo SCC, Santana RG, Santos DC, Alvim NAT
2012	BDENF	Talking about cervical cancer: contributions of complementary therapies	Melo MCP, Moura RG, Bezerra MWS, Barroa AGS, Salum RDL, Gomes LMA
2010	LILACS	Dialoging with nurses about the assessment of cancer pain in patients under palliative care	Waterkemper R, Reibnitz KS, Monticelli M
2009	MEDLINE	Diseases treated and treatable by acupuncture according to the perception of nurses	Kurebayashi LFS, Freitas GF, Oguisso T
2008	LILACS	The use of alternative therapies by patients undergoing chemotherapy	Jaconodino CB, Amestoy SC, Thofehr MB

After the analysis of the selected articles and for a better understanding of the results, grouping into 2 (two) categories was made possible: Integrative and complementary practices used in pain in oncology; and, nurses and praxis with the PICS.

Integrative and complementary practices used in pain in oncology

Traditional Chinese medicine, for example, acupuncture and auricular acupuncture are indicated and used as therapy for different types of pain^{12,13}. Through a randomized clinical trial with 31 cancer patients who complained of pain, a comparison was made between the experimental group that used auricular acupuncture and the placebo group to evaluate the effectiveness of pain reduction and its relationship with the reduction of daily doses of analgesics, after concluding that, in addition to the low pain intensity, there was a significant difference in the related evaluations the number of painkillers consumed¹³.

Phytotherapy, on the other hand, is the therapy of choice among the PICS used by people with cancer, the main choice criterion being the cultural issue, the easy access to plants or even the low cost for acquisition^{14,15,16}.

Through an interview with women with cervical cancer, they assessed the contribution of complementary therapies, and with the data collected, concluded that herbal medicine provided a sense of self-control, revealing itself as the main choice among PICS and as an alternative for good -being of the interviewees¹⁷.

When researching Medicinal Plants (PM), emphasizing its use by cancer patients in the municipality of Lagarto-SE, it was revealed that 40% of the interviewees use PM concomitantly with chemotherapy¹⁴.

It is worth mentioning that phytotherapy must be used rationally and with the proper medical guidance, because when used by cancer patients concurrent with chemotherapy, there is a risk of drug interactions between the medicinal plant and the antineoplastic agente¹⁴. In view of this situation, it is important to evaluate and guide a health professional who has

knowledge about the Integrative and Complementary Practice (PIC) in question, emphasizing the role of the nurse, as part of the health care process.

In this study, the majority of respondents (89%) responded that they are in favor of using PICS in chemotherapy treatment, and 69% use some PIC, which are phytotherapy (82%), homeopathy (11%) and reiki (7 %). Less than half (44%) said there was a decrease in side effects of chemotherapy and 40% also confessed relief from symptoms. He concludes by emphasizing that "low socioeconomic status and affordable value are contributing factors in choosing to use phytotherapy"¹⁶.

Body pain was the main complaint reported by patients, corresponding to 85%, and 51% reported improvement of this and other symptoms, through the concomitant use of reiki practices and foot reflexology¹⁸.

The ICP, called reiki, was not identified in the PNPIC as being a practice directed towards pain, however it can be used simultaneously with another ICP to promote the energetic effect and provide physical and mental well-being^{16,18}.

In order to identify the main therapeutic modalities used by the nursing team, it is observed in 50 cancer patients undergoing pain treatment, that in addition to using pharmacological therapies, 32% of them said they had used non-pharmacological therapies as alternatives for pain relief. However, pharmacological treatment still predominates, following the trend of the biomedical model, often neglecting biopsychosocial aspects¹⁹.

PNPIC brings the concept, as well as the indications of PICS, thus allowing the identification of hypnotherapy, which is characterized by the use of techniques that can be associated with another PIC, enabling intense relaxation and allowing the relief of chronic pain. It also brings ozonotherapy, a PIC widely used in oncology and which uses the application of two gases (oxygen and ozone) to promote the treatment of some diseases and, consequently, pain relief. However, no national articles were found that addressed the relationship between the two practices in pain relief or control in cancer patients⁶.

Nurses and praxis with PICS

It is a great challenge the applicability of PICS (reiki, shiatsu, acupuncture, phytotherapy, music therapy, flowers and chromotherapy) by nurses in public hospitals, due to the difficulty of dealing with the hegemony of the biomedical model in active hospitals. Another factor that hinders the use of PICS in hospitals is academic-professional training, which still dominates the domain of conventional pharmacological practice¹⁵.

In order to analyze the knowledge and perception of 10 nurses working in primary health care, in a municipality in Goiás, 50% reported that they know the PICS, 100% recognize the importance of it related to health, but all the interviewees said they did not know a Family Health Strategy (FHS) that offers PICS to the population. Half of the nurses interviewed reported using or knowing someone who uses PICS and all agreed and believed about the beneficial effects obtained with the use of integrative practices. They also stated that the most incorporated PICS, known to the community or used by them are homeopathy, phytotherapy and acupuncture²⁰.

The importance of nurses in their educational role, through dialogue with the patient, guiding and elucidating doubts about diagnosis and treatment, as well as, listening to the manifestation of their decision, become determining factors for the quality of care for patients with cancer. It is important to signal the principles of integrality and autonomy, that is, the human being's ability to decide about something, according to their values, expectations, needs, priorities and beliefs^{21,22}.

Regarding nursing care, through the PICS, the authors cited the reflection and the claim for legitimation in the scope of nursing care. They also talk about the importance of the patient-nurse dialogue about the purpose and correct use of therapies to serve as adjuvants, treatment and health maintenance²².

They observed that there is a need for a systematic structure for the care of cancer patients suffering from pain and reached the conclusion, in their study conducted with the health team, among them, nurses and nursing technicians, in a hospital, in the city of Rio de Janeiro, on the need for health professionals

to establish action strategies that improve the interaction with the hospitalized child, who presents with oncological pain, and his family, in order to facilitate the pain assessment and management process^{23,24}.

The difficulty of comprehensive care fragments the care for the human being, distancing itself from the care itself to the person, thus emphasizing the importance of systematizing this care directed to the assessment, evaluation parameters, control and recording of pain by nurses, promoting integrality care for the patient who performs pain treatment^{15,23}.

Conclusions

The main PICS used for pain relief or control in oncology are: Acupuncture, Ear acupuncture, herbal medicine, reiki, homeopathy and foot reflexology.

It is also concluded that these practices are constantly evolving and accepted by cancer patients who suffer from pain. However, as it is a relatively new national policy, which regulates its activity for the entire population, it is believed that there is much to evolve towards greater acceptability and knowledge by health professionals and patients.

The praxis of nurses in the use of PICS emphasizes its importance in the applicability of PICS and in health education to patients so that a therapeutic relationship can be established, knowledge exchange, and they can exercise their autonomy, that is, freedom of decision.

Therefore, it is extremely important that nurses take ownership of PICS, in order to understand its importance and make it integral and complementary to pharmacological therapies, disseminating the knowledge and results obtained from its use. As well as, facing the challenges and difficulties of dealing with the hegemony of the biomedical model and conventional pharmacological practice.

Further studies on PICS are recommended, since the limited amount of published articles, referring to such practices related to pain, whether oncological or not, is a limitation in carrying out this work.

Author contributions

Moura ACA participated in the conception, design, search, analysis of research data, interpretation of results. Gonçalves CCS participated as research supervisor, reviewing and approving the final version to be published.

Competing interests

No financial, legal or political conflicts involving third parties (government, companies and private foundations, etc.) have been declared for any aspect of the submitted work (including, but not limited to, grants and funding, participation in advisory council, study design, preparation manuscript, statistical analysis, etc.).

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