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Integrative Medicine in the Oncology Setting, What Does the Research Show?

Lynn Schuster, DNP, ACNP-BC

ABSTRACT

Most oncology patients are using some form of complementary alternative medicine (CAM). These can include acupuncture, massage, yoga, homeopathy, energy work, spiritual healers, vitamins and supplements, mind-body interventions, diets, and many other modalities. Although many of these interventions are safe and beneficial, some of them can be harmful. Unfortunately, because of time constraints, knowledge deficits, and the acuity of our patients, assessment of the use of CAM is often overlooked. As nurse practitioners, we must educate ourselves about the evidence for safety and efficacy of these interventions.

Keywords: acupuncture, cancer, cancer prevention, complementary, complementary alternative medicine, integrative, integrative oncology, massage, meditation, supplements, yoga

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ost oncology patients are experimenting with complementary alternative medicine (CAM) modalities. Studies show that up to 79% of cancer patients are using some form of CAM.¹ Patients decide to use CAM for a variety of reasons, such as managing symptoms, hoping to cure their cancer, maintaining a sense of control, increasing hope, boosting immunity, or improving their quality of life.² Studies have found that up to 72% of patients are not discussing these interventions with their oncology team. Providers may neglect to ask about their use of CAM, and patients may not mention it for fear of being treated negatively. Patients may feel that interventions that are *natural* are free from risk and will not have an impact on their cancer treatment.² With the widespread use of the Internet, patients are often lured into purchasing supplements or services that claim to cure their cancer or improve their symptoms. Although some of these therapies are safe and can offer benefits to our patients, others can be harmful. As nurse practitioners (NPs), it is important to educate ourselves about the potential risks and benefits of these interventions.

INTEGRATIVE MEDICINE

Integrative medicine is an emerging field of medicine that combines conventional and

complementary treatments that have been evaluated for safety and efficacy. Integrative interventions can potentially improve quality of life, decrease costs, improve outcomes, and help patients choose interventions that are safe and beneficial with a lower risk for toxicities. Many of these interventions have been found to be safe and effective through clinical trials. However, some of these interventions have been found to be harmful or have not been evaluated through scientifically sound trials. Many CAM studies are poorly designed with small sample sizes, high heterogeneity, and a lack of blinding and/or randomization. Other studies have shown inconsistent results, which could add to confusion when providing recommendations. As NPs, we need to assess the use of CAM with our patients, and we should be aware of resources to evaluate the safety and efficacy of these interventions.

COMPLEMENTARY VERSUS ALTERNATIVE MEDICINE

The main tenants of integrative medicine are that it is important to have the practitioner and patient in a mutual relationship, with the patient being an active participant. The health of the whole person, body, mind, spirit, and community, is assessed and treated. The recommendations should be evidence based and multidisciplinary, incorporating both complementary

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and conventional practices to stimulate the innate healing response of the body. Interventions that are the least invasive and most natural should be recommended when possible.³

Although there can be similarities and the terms are often used interchangeably, integrative medicine differs from alternative medicine. Alternative medicine is used in place of conventional therapies, whereas integrative providers recommend treatments to be used in conjunction with standard treatment protocols.⁴ Integrative providers are trained to review the evidence of the interventions for safety and will use their clinical judgment before recommending an intervention to a patient. Integrative providers will attempt to treat patients with natural, less invasive interventions when possible yet will turn to conventional medical treatments when necessary.⁴

INTEGRATIVE ONCOLOGY

Integrative medicine in the oncology setting is referred to as integrative oncology. Some examples of alternative medicine used in the oncology setting are vitamin infusions; hyperthermia; ozone therapy; hydrogen peroxide infusions; coffee enemas; and various tonics, supplements, and diets (Gerson regime and Budwig diet). Some examples of CAM interventions include acupuncture, aromatherapy, energy healing, prayer, homeopathy, massage, reiki, reflexology, mindfulness, meditation, guided imagery, herbs and supplements, tai chi, and qigong.⁴

Integrative oncology practitioners see patients at all stages of the cancer process, from diagnosis to survivorship. A typical visit includes an assessment of current symptoms, diet, exercise, stress and coping, exposure to environmental toxins, and social and spiritual connection. Common symptoms can include cancer-related fatigue, chemotherapyinduced peripheral neuropathy (CIPN), chemotherapy-induced nausea and vomiting (CINV), diarrhea, insomnia, hot flashes, weight gain or loss, sexual dysfunction, cognitive dysfunction, anxiety, and/or depression. Patients may also be referred to see an integrative practitioner to assess the safety of the supplements they are taking. Finally, they may be referred to learn how to decrease their risk for cancer recurrence or the development of new cancers. The patients may be counseled on cancer

prevention including diet, exercise, sleep hygiene, stress management, avoidance of environmental exposures, alcohol and tobacco use, and overall spiritual and social connection. Although there are many CAM interventions that oncology patients can chose from, some of the most common ones include the use of vitamins, minerals, and herbal supplements (VMHSs); mind-body (MB) techniques; massage; yoga; and acupuncture, with the most common being the use of VMHSs.¹

VITAMINS, MINERAL AND HERBAL SUPPLEMENTS

Vitamins and minerals are nutrients that our bodies use to perform our essential functions. Herbal supplements are products that contain various components of 1 or more plants. These can be found in many formulations including capsules, teas, tinctures, powders, and salves. The use of VMHSs in the cancer setting is widespread, with close to 80% of cancer patients taking them.¹ Many providers do not ask patients about their use of VMHSs, mainly because of a lack of provider knowledge and a lack of discloser from patients.⁵

Some of the reasons patients take VMHSs are to improve the quality of their life, strengthen their immune systems, improve their mood, take control of their illness, manage their symptoms, decrease their risk for cancer recurrence, and correct nutrient deficiencies.¹ Unfortunately, there is a lack of well-designed clinical studies to determine the safety and effectiveness of many of these VMHSs. They could potentially cause herb-drug interactions, which could increase the risk for side effects such as bleeding, hypotension, gastrointestinal problems, immune dysfunction, rashes, allergic reactions, electrolyte imbalance, and organ dysfunction. They can also affect how the drugs are metabolized, increasing the risk for toxicities and/or decreasing the effectiveness of the treatments. It is extremely important to minimize these risks when patients are on chemotherapy. The risk for adverse reactions increases with patients who are elderly or on multiple prescription medications.⁵

The use of VMHSs during chemotherapy and radiation is controversial. Although some studies show a decrease in side effects, other studies have shown harmful interactions including decreased Download English Version:

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