

**Original Article**

# Symptom Management with Massage and Acupuncture in Postoperative Cancer Patients: A Randomized Controlled Trial

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**Abstract**

*The level of evidence for the use of acupuncture and massage for the management of perioperative symptoms in cancer patients is encouraging but inconclusive. We conducted a randomized, controlled trial assessing the effect of massage and acupuncture added to usual care vs. usual care alone in postoperative cancer patients. Cancer patients undergoing surgery were randomly assigned to receive either massage and acupuncture on postoperative Days 1 and 2 in addition to usual care, or usual care alone, and were followed over three days. Patients' pain, nausea, vomiting, and mood were assessed at four time points. Data on health care utilization were collected. Analyses were done by mixed-effects regression analyses for repeated measures. One hundred fifty of 180 consecutively approached cancer patients were eligible and consented before surgery. Twelve patients rescheduled or declined after surgery, and 138 patients were randomly assigned in a 2:1 scheme to receive massage and acupuncture (n = 93) or to receive usual care only (n = 45). Participants in the intervention group experienced a decrease of 1.4 points on a 0–10 pain scale, compared to 0.6 in the control group (P = 0.038), and a decrease in depressive mood of 0.4 (on a scale of 1–5) compared to  $\pm 0$  in the control group (P = 0.003). Providing massage and acupuncture in addition to usual care resulted in decreased pain and depressive mood among postoperative cancer patients when compared with usual care alone. These findings merit independent confirmation using larger sample sizes and attention control. J Pain Symptom Manage 2007;33:258–266. © 2007 U.S. Cancer Pain Relief Committee. Published by Elsevier Inc. All rights reserved.*

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Funding for this study was provided by the Mount Zion Health Fund, San Francisco, California. The authors confirm that this material is original research and has not been published otherwise, with the exception of a presentation at the 2005 Bay Area Research Symposium, San Francisco, October 2005 and a poster presentation at the North American Research Conference on Complementary and Integrative Medicine, May 2006, Edmonton, Alberta, Canada.

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*Accepted for publication:* September 4, 2006.

**Key Words***Cancer, surgery, symptom management, cancer pain, acupuncture, massage*

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**Introduction**

More than 40% of people with cancer report using complementary and alternative medicine (CAM) therapies.<sup>1</sup> Leading cancer centers in the United States offer massage and acupuncture to inpatients and outpatients. A recent review concluded that the judicious integration of these therapies into cancer patient care is warranted, although strong evidence of measurable benefits is often missing.<sup>2</sup> A National Institutes of Health consensus panel and numerous clinical trials support the efficacy and safety of acupuncture for postoperative pain, postoperative nausea and vomiting, and perioperative anxiety,<sup>3</sup> and the National Comprehensive Cancer Network guidelines<sup>4</sup> recommend consideration of massage and acupuncture for symptom management.

A systematic review on the effects of massage in cancer patients concluded that massage confers short-term benefit on psychological well-being, including anxiety, and that it may confer benefits on physical symptoms; more trials are needed.<sup>5</sup> We found only one small study published on the effect of massage in the postoperative setting that suggested it might reduce postoperative pain.<sup>6</sup>

Reviews of acupuncture for perioperative or chemotherapy-induced nausea and vomiting have concluded that acupuncture is efficacious.<sup>7–10</sup> Acupuncture reduced cancer pain in three uncontrolled single-arm studies<sup>11–13</sup> and in one randomized placebo-controlled trial.<sup>14</sup> Systematic reviews of acupuncture for various noncancer pain conditions<sup>15</sup> and three clinical trials of acupuncture for noncancer perioperative pain<sup>16–18</sup> reported improvement. Although these data on acupuncture and perioperative pain are promising, limitations include variance in the timing of the intervention and noncancer-related diagnoses.

In summary, the literature suggests that the level of evidence for the use of acupuncture and massage in the management of perioperative symptoms in cancer patients is relatively strong for the use of massage for anxiety and acupuncture for nausea, and is encouraging

but nonconclusive for the use of acupuncture or massage for pain. The combination of massage and acupuncture for symptom management in perioperative cancer patients has never been studied. Massage and acupuncture are components of traditional Chinese medicine (TCM) and, as such, often are used in combination. Although mechanisms of action are still unclear for both modalities, they are viewed as complementary and additive within the frame of TCM. Recently, the Institute of Medicine report on “Complementary and Alternative Medicine in the United States” strongly recommended innovative study designs, including studies of combinations of therapies.<sup>19</sup>

We conducted a randomized, controlled clinical trial exploring the effect of a combination of massage and acupuncture added to usual care vs. usual care alone on postoperative symptoms (pain, nausea, and mood) and costs for symptom-related medications in hospitalized cancer patients in the first three days after cancer-related surgery.

**Methods****Participants**

Patients who were at least 18 years of age and scheduled to undergo cancer-related surgery requiring hospitalization for at least 48 hours were eligible to participate in the study. Patients were recruited during their preoperative anesthesia screening clinic visit. Cancer surgery was defined as any surgery related to a diagnosis of malignancy but including one of the following five groups: breast cancer surgery: mastectomy or reconstructive surgery; abdominal surgery for intestinal or hepatic malignancies; pelvic surgery for ovarian, uterine, or cervical malignancies; urological surgery for testicular, prostate, bladder, or renal malignancies; and head and neck cancer surgery.

Patients were excluded if they were not fluent in English, were diagnosed with deep vein thrombosis, or were receiving blood-thinning medication.

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