Role of Complementary Medicine in Nursing and Health Care Professionals

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Introduction

Complementary medicine (CM), sometimes referred to as complementary and alternative medicine (CAM), is rapidly expanding. The World Health Organization (2013) [1] defines CM as “a broad set of health practices that are not part of that country’s own tradition or conventional medicine and are not fully integrated into the dominant health care system.” Most CM approaches belong to either natural products or mind and body practices [2]. Nurses and other healthcare professionals have attempted to integrate acupuncture [3], music therapy [4], hypnosis [5], massage therapy [6], aromatherapy [7], or other therapies into clinical practice to provide a more holistic approach in treatment and care for their patients.

The growing interest in the use of CM may be ascribed to a number of factors [8-11] including:

1. The recognition of the potential benefits of these therapies
2. Limitations and side effects of orthodox treatment approaches
3. An increasing expectation for a more holistic approach to providing care
4. Quality of life issues
5. Improving control in the treatment process
6. Clients’ expectation of better communication with practitioners and
7. Adoption of particular healing systems compatible with specific cultural backgrounds.

CM is commonly used to treat pain, psychosocial problems, cardiovascular diseases, lung diseases [9], among others, as well as to provide symptomatic relief for cancer pain. This therapeutic approach focuses on the holistic care of the individual with a particular emphasis on client involvement. Many of these therapies also include the belief that an internal self-healing process exists within the person [10]. The holistic effect of CM has been demonstrated in a previous clinical trial involving the use of auriculotherapy (a CM approach for stimulating acupuncture points on the ears to achieve therapeutic effect). This therapy did not only positively influence the sleep behavior of the participants but also managed certain minor ailments associated with sleep disturbances, such as headache, dizziness and nocturnal polyuria [12,13].

Future Directions

Barriers hindering the wide use of CM include lack of knowledge about the subject, inaccessibility to competent practitioners, and lack of evidence supporting the effectiveness of therapies. Nearly two-thirds of CM users preferred not to discuss the use of CM with their doctors for fear of doctor’s disapproval, disinterest, or inability to help [14]. Although nurses tend to demonstrate a positive attitude towards CM because of their appreciation of a holistic approach to health, they seem to lack a comprehensive understanding of the associated risks and benefits of CM and feel uncomfortable discussing this therapeutic approach to their patients [15-17]. Fortunately, the awareness of incorporating CM in the existing curricula of nursing and medicine has increased in recent years [18-22]. The increase in knowledge regarding CM among health care professionals may lead to a more open and positive attitude towards these treatment modalities. This awareness may help promote a culture in which patients feel comfortable to disclose the use of CM to health care professionals, and thus allow monitoring of adverse drug effects and/or interactions, as well as the delivery of culturally competent care. The public and the health care providers should be well informed and must easily gain access to an updated list of qualified and competent practitioners for individual therapy when considering these therapies as additional treatment choices.

Many studies on CM are limited by small sample size, lack of an equivalent placebo-control group to establish a strong causal relationship, and inadequacy in terms of rigorous scientific testing [23]. Nurses and other health care professionals should play an active role to initiate or participate in several research activities in this area. As such, patients can receive evidence-based guidance regarding CM.

Conclusion

Integrated medicine is definitely an attractive proposition within the health care system, and complementary and conventional medicine should be offered alongside each other by adequately trained and well-regulated practitioners to guarantee

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a high standard of holistic care and positive outcomes for the patients. Integrating CM into the existing curriculum of health care professionals may lead to a more open and positive attitude towards these treatment modalities. Given the lack of scientific evidence to support the effectiveness of CM, further randomized studies involving more objective measures, large sample sizes, and long-term follow-ups are needed to validate the promising results which are already reported about the effects of CM on the well-being of patients.

References


