Management of Cancer Pain With Complementary Therapies

April 02, 2007
By Teresa Rojas-cooley, RN [1]

Pain is one of the most feared consequences of cancer. Pain is a major symptom in 75% of hospitalized cancer patients. Poorly relieved pain contributes to the suffering of the patient and family, which may motivate them to seek additional complementary and alternative therapies. Evidence-based complementary therapies are being used for symptom control and to improve quality of life. There is recent research on several complementary therapies—acupuncture, mind-body therapies, massage, reflexology, and Reiki—that provides evidence for pain management. These therapies are not well utilized due to a lack of information on benefits, risks, and resources. There is a call for education to alert patients, families, nurses, and physicians to the benefits of evidence-based complementary therapies and to the dangers of "unproven" cancer therapies. Oncology nurses are ideally positioned to assess patients' pain, to educate patients, to determine with the patient and physician the most appropriate and safe complementary therapy for pain, to refer patients to appropriate resources, and in some cases to provide the therapy itself. This article will discuss specific complementary therapies for pain control and will arm nurses with the confidence to intervene with knowledge, referrals, and ideas for hands-on implementation.

Susan Berenson has written a very nice introduction and overview of the use of complementary and alternative therapies for pain and symptom management in cancer patients. She makes a very clear case for why complementary therapy should be a required course for health-care professionals. She is correct that lack of knowledge provides a deficit in the nurse's or physician's ability to recommend appropriate complementary and alternative therapies to patients. As the number of published evidenced-based studies grows, the use of these interventions will also grow. Berenson has presented some of the classic references in complementary medicine and provided some resources that will be helpful for nursing professionals to build their understanding of complementary and alternative therapies. The article's pretherapy nursing assessment section will help the nursing professional to understand some important aspects of complementary and alternative therapies and their relationship to the patient's health status. Ideally, we would have liked to see more recommendations on which therapy is most appropriate for which source of pain. The data on acupuncture and neuropathy pain are very interesting, and provide a new resource to add to the oncology nurse's armamentarium of interventions necessary for the relief of that very debilitating source of pain. Unfortunately, lack of knowledge continues to prevent effective pain management for cancer patients. Certainly managing pain for cancer patients should include integrating complementary and alternative therapies along with traditional medicine interventions as appropriate.

Source URL:

Links: