NURSING BEST PRACTICE GUIDE

Complementary Therapies

This document is one of the Myeloma Academy Nursing Best Practice Guides for the Management of Myeloma series. The purpose of this Guide is to enhance knowledge and inform nursing practice relating to the use of complementary therapies by myeloma patients.

After reading this, you should be able to:

★ Understand how complementary therapies may be of benefit to myeloma patients
★ Be aware of the different types of complementary therapies and how they might be used
★ Understand the nurse's role when discussing the use of complementary therapies with myeloma patients

The information contained within this Guide should be used in conjunction with local and national policies, protocols and best practice guidelines in oncology.

Background

Living with myeloma can be immensely challenging for patients, not just physically but also psychologically and emotionally. Symptoms and complications, side-effects of treatment and unwanted social, financial and other changes that occur throughout the course of the disease, can all negatively impact on quality of life. For some myeloma patients, complementary therapies may help them manage symptoms such as fatigue, pain and nausea, reduce stress and anxiety, enhance their general sense of wellbeing and improve quality of life[1].

The term ‘complementary therapy’ itself encompasses a wide range of treatments and practices which take a holistic approach to treat the body as a whole rather than just the disease. Since there is little evidence base for complementary therapies in terms of safety and efficacy[2], they are generally

KEY FACTS

★ Myeloma affects individuals differently and some patients may require additional support to help them cope physically, psychologically and emotionally
★ Complementary therapy can be used to help patients manage symptoms, reduce side-effects and improve quality of life
★ Complementary therapies allow patients to gain a greater sense of control over their treatment and care as well as enhancing feelings of wellbeing

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used alongside conventional treatment and/or palliative care\textsuperscript{[3]} with the goal of helping patients cope physically, psychologically and spiritually. They should not be confused with alternative therapies which are intended to replace conventional treatment\textsuperscript{[4]}. Integrative therapy is an increasingly used term to describe the use of holistic approaches combined with standard treatment.

The use of complementary therapies has increased over the years partly to address the holistic needs of patients and partly in response to efforts by patients wishing to take a more active role in managing their myeloma. Furthermore, some carers also find complementary therapies that help reduce stress and promote relaxation helpful for them too\textsuperscript{[5]}.

There are many different forms of complementary therapy and these can be broadly classified into the following groups:

- Massage and touch therapies
- Healing and energy-based therapies
- Mind-body therapies
- Dietary interventions and herbal medicines
- Physical therapies

Different therapies can be used to address different problems but the approach taken is usually determined by user preference and the particular problem the patient is facing.

The most commonly used forms of complementary therapies for myeloma patients are explained in the following ‘Medical Approach’ section.

**GENERAL RECOMMENDATIONS:**

- All patients should be asked about their use or intentions to use complementary therapy. Ideally, this should be done at the time of diagnosis, when starting anti-myeloma treatment or when there is a change of treatment
- A multidisciplinary approach should be taken to ensure all members of the healthcare team are aware that the patient is using complementary therapy
- Referrals should be made to appropriately qualified therapists who are members of relevant professional organisations
- The pharmacist and medicines information within the pharmacy may be able to provide information on any known potential drug interactions

**NURSING RECOMMENDATIONS:**

- Patients and their families should be informed about complementary therapies if they do not already know about them, and guided towards reliable sources of information
- The possibility of using complementary therapy to improve physical and emotional wellbeing and help manage symptoms and side-effects should be discussed with patients
- The benefits and risks of complementary therapies should be carefully explained, particularly those regarding known drug interactions
An increasing number of myeloma patients are interested in or are already using complementary therapies to manage their symptoms and side-effects of treatment, and enhance wellbeing. Some forms of complementary therapy are becoming more readily available on the NHS but the majority of patients still seek complementary therapies privately.

The following section describes the general approach to complementary therapy use and the role of the different types that could help myeloma patients.

It is important to note that what may work for one patient may not necessarily benefit another and the choice should be based on what best fits the individual’s needs.

Assessment

Nurses are well positioned to address the needs of myeloma patients regarding the use of complementary therapies. Since all patients are monitored and assessed, both clinically and holistically, throughout the course of their disease, these occasions provide the opportunity to introduce and discuss the possible use of complementary therapies.

There are no specific ways to assess whether a patient might be suitable for complementary therapy. Instead, it is important to take time to talk about what issues they have, how they are coping and what they have tried in terms of self-management before making any suggestions. While some patients may be receptive to the idea others may dismiss some or even all types of complementary therapy. Therefore, sensitivity towards individual beliefs should be exercised and discussions should be guided by patients’ preferences.

It is also important for nurses to be aware of those patients who may already be using complementary therapy. There is evidence that many patients do not tell their healthcare team, because they have either not been asked, they anticipate disapproval or disinterest, or they perceive it to be irrelevant to their conventional care.

Nurses can help overcome these obstacles by encouraging open conversation with patients as early as possible. Ascertaining what patients are using is essential primarily for safety reasons; any deemed unsuitable should be stopped, for example, where there are known interactions which change the efficacy of conventional treatment or if there is a risk of injury from manipulative therapies.

Referrals

Referral to a complementary therapist can be made where appropriate. There may already be a referral process to teams within the hospital or local cancer centre. GP practices may also have a facility for referring patients or provide access within the practice. For patients who have complementary therapy privately, they should seek therapists who are members of the appropriate organisation for their therapy discipline and have valid insurance. The Complementary and Natural Healthcare Council (CNHC) provides a UK voluntary register of complementary therapists.

Types of complementary therapy

Massage and touch therapies

There are many different types of massage and touch therapies which can be used to relax the mind and body, relieve tension and enhance mood. They may also help reduce pain, nausea, anxiety, depression and fatigue.

Swedish massage

Is the most commonly practised type of massage. It uses long flowing strokes to tone soft tissue, stimulate circulation and oxygen
flow and relax muscles. Although this type of massage is not generally contraindicated for myeloma patients, they should seek medical approval first because of the potential risk of bone damage. It is important that the massage therapist is trained and understands the skeletal problems associated with myeloma and massage should always be applied gently. However, massage of this kind should be avoided in patients with platelet counts less than 20 x 10^9/L or those who have recently had radiotherapy.

**Aromatherapy**
Uses different blends of aromatic essential oils from plant sources which are applied to the skin during massage. The addition of aromatic oils is thought to further reduce stress and anxiety, and enhance feelings of wellbeing. However, patients should avoid applying oils to the skin if they are having chemotherapy or radiotherapy as the skin can become very sensitive.

Aromatherapy can also be inhaled and this can be beneficial in relieving nausea and promoting relaxation.

**Reflexology**
Is a specialised form of therapeutic massage to the feet or hands based on the theory that different areas of the sole of the foot or hand represents different parts of the body. Pressure applied to specific points can help relieve pain, fatigue and nausea. Users report that this type of massage can be very relaxing and some patients report improvement in peripheral neuropathy symptoms following reflexology massage.

**Shiatsu and acupressure**
Are forms of massage in which the therapist applies varying rhythmic pressure using the fingers on particular parts of the body to help improve circulation, restore energy and reduce pain.

**Healing and energy-based therapies**
The aim of healing and energy-based therapies is to rebalance the energy fields in the body. Some rely on little, if any, physical contact for their effects while others may involve touch or body movements. They may be used to reduce pain, relieve stress and promote a sense of calm and relaxation.

**Acupuncture**
Originates from traditional Chinese medicine and is based on the theory that the body has a system of energy channels (chi) which can be blocked during illness. Sterile needles are applied to certain points in the body just below the skin to release the flow of chi and restore health and balance in the body. Practitioners of western medical acupuncture believe that acupuncture stimulates the nervous system and causes the release of endorphins. It can be used in myeloma patients to help alleviate pain (particularly neuropathic pain), nausea and vomiting. While acupuncture is generally very safe, it is not recommended for patients who have: neutropenia (even though the risk of infection is extremely low); a platelet count less than 25 x 10^9/L or a tendency to bleed easily; clinically significant cardiac arrhythmias or other unstable medical conditions.

**Reiki**
Is a Japanese healing practice which uses the body’s energy to restore a sense of balance and calm. The therapist gently lays their hands on or slightly above the patient’s body in a sequence of positions that covers the entire body. Each position is held for a few minutes with the aim of stimulating energy flow to encourage healing. It helps to release tension and reduce pain.

**Mind-body therapies**
Mind-body therapies are based on the theory that a person’s thoughts and feelings can affect physical and mental status. Patients who practise them report a greater sense of wellbeing and enhanced quality of life. All types of mind-body therapies are considered safe for myeloma patients.

**Relaxation and meditation**
Relaxation usually includes slow breathing and gentle muscle loosening exercises to physically and mentally calm the body. Meditation involves focusing on one thing such as breathing to relax the body. Both are
useful in reducing stress, anxiety and pain, and can also be used to aid sleep.

**Visualisation**

Also known as guided imagery, this involves mental exercises such as imagining scenes, sounds, smells or other sensations to help the body relax and improve well-being. Other types of visualisation may involve patients imagining their myeloma and how the body can combat it.

**Hypnotherapy**

Is a form of deep relaxation used to help people become more aware of their inner thoughts. This can help patients overcome mental blocks that have previously prevented them from gaining control of issues such as anxiety, fear, pain and insomnia.

**Art and music therapy**

Uses art or music to help patients express themselves and understand their emotions and concerns. Both types of therapy help patients feel more in control, reduce anxiety and improve mood.

**Dietary interventions and herbal remedies**

Patients can make changes to their diet to improve their overall health and/or help them cope with the side-effects of treatment. For example, they may eat more of or avoid certain food groups or take dietary supplements (including vitamins, minerals and amino acids).

While dietary interventions of this kind can be helpful for patients who are struggling to maintain a normal healthy balanced diet, taking large amounts of a particular nutrient can otherwise be potentially harmful. Some may also interfere with drug treatment e.g. large amounts of vitamin C are known to inhibit the anti-myeloma effects of Velcade®.[10]

Some patients may choose to use herbal remedies but these should be taken with caution as some can interact with conventional treatments or even promote cancer growth. For example, green tea is known to block the effect of Velcade®[10] while St John’s wort can speed up the rate of clearance of drugs, leading to sub-therapeutic concentrations[12]. These should be avoided during, and for a few weeks before and after, each course of treatment.

**Physical therapies**

Physical therapies work the body and mind to achieve feelings of wellbeing. Most tend to involve gentle, controlled, low-impact movement in conjunction with breathing exercises.

**Tai Chi and Qi Gong**

Both involve slow fluid movements and breathing which focus on building strength, balance and flexibility. They can help improve muscle tone and mobility, reduce fatigue, aid sleep and enhance wellbeing.

**Yoga**

Yoga involves positioning and stretching the body in different ways, incorporating breathing exercises and/or some form of meditation or relaxation. There are many different types of yoga but it is important to note that some involve more vigorous physical movement which may not be suitable for myeloma patients, particularly those with spinal problems or other mobility issues.
Nursing interventions and management

Nurses play an important role in advising patients on the use of complementary therapy and in referring them to suitably qualified therapists.

The following provides best practice recommendations for nursing interventions and management related to the use of complementary therapies in myeloma.

**Interventions**

- Take a detailed history of any use of complementary therapy at the time of the initial diagnosis and at regular intervals, particularly before the start of any treatment.
- Inform the medical team about existing use of complementary therapy so that an assessment can be made of whether it is safe/appropriate to continue, and record in patients’ notes.
- Perform regular assessments that include exploration of psychological aspects including feelings of fear, hope, optimism and personal control to determine whether patients might benefit from complementary therapy.
- Identify what patients prefer when deciding on a type of complementary therapy to use, what type of complementary therapy has worked or failed in the past, and whether cultural or other beliefs might influence a decision.
- Coordinate referrals to complementary therapists where available within the hospital or at local facilities.
- Liaise with pharmacy to obtain information about potential drug interactions.
- Inform patients who are using dietary supplements or herbal remedies such as green tea and St John’s wort, of the potential drug interactions with Velcade and advise to avoid these supplements during treatment.

**Management**

- Advise patients to consult with their medical and nursing team before using complementary therapy as medical approval may be needed for certain forms.
- Spend time talking to patients and families about how well they are coping physically, psychologically and emotionally.
- Help patients understand how complementary therapy may be beneficial in managing symptoms of myeloma and side-effects of treatment, as well as promoting wellbeing.
- Provide information to patients and their families about the different types of complementary therapy available at the hospital and local centres.
- Be sensitive to factors such as cultures and beliefs when assessing patients for the potential use of complementary therapy.
- Advise patients to seek reputable therapists, if done privately, and to disclose the fact they have myeloma.
- Advise patients where possible to seek therapists who will be aware of the specific risks for myeloma.
Summary

Complementary therapy can play an important role in the supportive care of myeloma patients. Nurses have a central role in assessing how different types of complementary therapy may potentially benefit individual patients and providing relevant information and guidance about their use along with any associated risks.

The nurse’s role in supporting myeloma patients who use or may wish to use complementary therapy is crucial, and can lead to improvements in quality of life, sense of wellbeing and patient-reported outcomes.
7. Complementary and Natural Healthcare Council (CHNC) http://www.cnhc.org.uk/ [accessed April 2016]
ABOUT THE NURSING BEST PRACTICE GUIDES

The Nursing Best Practice Guides have been developed by Myeloma UK and an expert nursing advisory group, with input from relevant specialist healthcare professionals. They have been developed to enhance nurse knowledge, inform nursing practice and support nurses in the delivery of high quality treatment and care to myeloma patients and families.

Nursing Best Practice Guide series:

- Complementary therapies
- Fatigue
- Gastrointestinal toxicities
- End of life care
- Myeloma bone disease
- Myeloma kidney disease
- Myelosuppression
- Oral mucositis
- Pain
- Palliative care
- Peripheral neuropathy
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- Steroids
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ABOUT THE MYELOMA ACADEMY

The Myeloma Academy provides healthcare professionals involved in the treatment and care of myeloma patients with access to comprehensive accredited learning resources and tools in an innovative online environment and through educational events.

It supports the education and continual professional development of myeloma healthcare professionals so they can provide optimum patient-centred treatment and care within the current UK health and policy environment.

For more information visit: www.myeloma-academy.org.uk or by email academy@myeloma.org.uk

ABOUT MYELOMA UK

Myeloma UK is the only organisation in the UK dealing exclusively with myeloma.

Our mission is to provide information and support to people affected by myeloma and to improve standards of treatment and care through research, education, campaigning and raising awareness.

For more information about Myeloma UK and what we do, please visit www.myeloma.org.uk or contact us at myelomauk@myeloma.org.uk or +44 (0)131 557 3332.

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