

# ONCOLOGY NURSING SOCIETY POSITION



## The Use of Complementary, Alternative, and Integrative Therapies in Cancer Care

Complementary, alternative, and integrative therapies are healthcare systems, practices, and products not considered a part of conventional medicine. Complementary therapies are used concurrently with conventional medicine, alternative therapies are used in place of conventional medicine, and integrative therapies combine mainstream medical therapies with complementary or alternative therapies for which some high-quality scientific evidence of safety and efficacy exists (National Center for Complementary and Alternative Medicine, 2009).

In the United States, about 4 in 10 adults and 1 in 9 children are using some form complementary, alternative, or integrative therapy according to the National Health Interview Survey (Barnes, Bloom, & Nahim, 2008). These therapies have been broadly categorized as alternative medical systems, energy therapies, exercise therapies, manipulative and body-based methods, mind-body interventions, nutritional therapeutics, pharmacological and biologic treatments, and spiritual therapies (Office of Cancer Complementary and Alternative Medicine, 2009). Non-vitamin, non-mineral natural products are the most commonly used complementary, alternative, or integrative therapies among adults. Use has increased for many therapies, including meditation, massage therapy, deep breathing exercises, and yoga (Barnes et al., 2008). The list of therapies will likely continue to evolve as novel approaches are proven to be safe and effective, accepted as mainstream medicine, and integrated into cancer care.

Researchers report that patients with cancer and survivors are more likely to use these therapies than those without cancer (Basch & Ulbricht, 2004; Fouladbakhsh & Stommel, 2008). The most common reason for using them is a strong belief in their efficacy (Verhoef, Balneaves, Boon, & Vroegindewey, 2005). Methodologically rigorous preclinical and clinical research continues in the effort to establish safety and efficacy of these therapies through government and nongovernment funding sources. A clinical challenge is that 40%–77% of use remains undisclosed because of patients' beliefs that these therapies are natural and safe to use, concern that providers may react negatively, or simply, providers do not ask about their use (Robinson & McGrail, 2004).

Oncology nurses may be caring for patients without knowledge of concurrent complementary, alternative, and/or integrative therapy use. Routine assessment of use and close monitoring of patients using these therapies have the potential to enhance patient safety and promote integrative care (Lee, 2004).

### It Is the Position of ONS That

- Oncology nurses evaluate their personal and professional beliefs regarding the use of complementary, alternative, and integrative therapies and recognize how these values can affect the care of patients seeking or using these therapies.
- Oncology nurses assess patients for the use of these therapies and provide evidence-based information and resources as well as information about verifying practitioners' qualifications and credentials.
- Oncology nurses have an awareness of the differences among terms applied to complementary, alternative, and integrative therapies and use the terms with consistency and in an appropriate context.
- Formal cancer education programs in schools of nursing and continuing education platforms include reliable information and access to learning about the therapies and promote integrated education with other health disciplines.
- Oncology nurses develop an awareness of complementary, alternative, and integrative therapies that potentially can interfere with the outcome of other cancer treatments.
- Oncology nurses document patients' use of and potential response to complementary, alternative, and integrative therapies.
- Oncology nurses seek proper training and obtain necessary credentials if practicing with complementary, alternative, and integrative therapies.
- Oncology nurses develop a working knowledge of cost reimbursement, liability, ethical, and legal issues surrounding

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complementary, alternative, and integrative therapies use in oncology care.

- Oncology nurses establish evidence-based practice in these areas by synthesizing present knowledge with regard to safety, efficacy, concurrent use with conventional therapy, and long-term use.
- ONS and its affiliates promote funding and collaboration in the design of methodologically rigorous treatment and supportive care clinical trials to study the impact of complementary, alternative, and integrative therapies on cancer care outcomes.

## References

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