HPNA Position Statement
Complementary Therapies in Palliative Nursing Practice

Background

The goals of complementary therapies in professional nursing practice and palliative care aim to reduce suffering and enhance patient comfort, promoting dimensions of healing in the face of serious or life-threatening illness.

While the term *complementary and alternative therapies* is known and used by most practitioners, the National Center for Complementary and Integrative Health (NCCIH), the Federal Government’s lead agency for scientific research on complementary therapies, generally prefers the term *complementary health approaches*. This change is an effort to decrease confusion between the terms complementary, alternative, and integrative, which are often incorrectly used interchangeably.¹

Complementary and alternative medicine has been practiced for centuries. Ancient philosophers such as Hippocrates, Plato, and Aristotle refer to the use and efficacy of what is now regarded as complementary therapy.² The use of complementary therapies in nursing practice dates back to Florence Nightingale, the founder of secular nursing. She described the use of therapies such as aromatherapy, heat and cold, distraction, and nutrition in the holistic care of patients.³

People are living longer with chronic disease and are looking for ways to improve their quality of life, therefore the use of complementary health approaches in the United States is on the rise.⁴ According to a 2007 National Health Interview Survey (NHIS), conducted by the Centers for Disease Control and Prevention’s (CDC) National Center for Health Statistics (NCHS), the United States public spent $33.9 billion out-of-pocket on complementary health approaches over a 12-month period. This includes a total of 38.2% adults and 12% children using one or more complementary health approach.⁵,⁶ Complementary health approaches accounted for approximately 1.5% of the total healthcare expenditures and 11.2% of the total out of pocket expenditures by Americans.⁵,⁶
As a result of the increasing popularity of complementary health approaches in chronic illness, hospice and palliative care providers must be informed and educated on the types of therapies available, associated costs, interactions, risks and benefits for patients and should include as part of a comprehensive professional nursing assessment. A 2007 National Home and Hospice Care Survey (NHHCS) conducted by the CDC and the NCHS identified that 41.8% of hospices offered complementary health approaches through direct staff or contracted providers.13

Because the field is broad and constantly changing, there are many definitions associated with complementary therapy. NCCIH describes “complementary health approach” concept as “if a non-mainstream practice is used together with conventional medicine.”1 NCCIH also divides complementary health approaches into two subgroups: natural products and mind and body practices.1

Complementary health approaches are recognized as an aspect of the integrative nature of professional nursing practice. For this reason, it is important that nurses have education surrounding the safe use and efficacy of complementary health approaches. Most state boards of nursing now recognize the close relationship between complementary therapies and nursing. Each state board of nursing identifies what is within the scope of nursing practice and defines the basic education and competencies that are required for that practice. Many types of complementary health approaches are also provided by licensed and/or certified therapists and incorporated into the patient’s comprehensive plan of care.

Nursing care for those with serious or life-threatening illness has long embraced the individual as a whole, encompassing the physical, mental, emotional, and spiritual dimensions of care.4 Therefore, nursing is a natural fit for the use of complementary therapies. See Table 1 for some of the more common complementary health approaches used by nurses. When complementary health approaches are used in nursing and integrated into patient care, it should be documented within the scope of professional nursing practice. The action becomes an identified nursing intervention planned to address a nursing problem or concern, for example, the way music therapy may be used for a “disturbed sleep pattern.” The role of the professional nurse in complementary health approaches is ultimately important for positive patient outcomes.
Table 1: Common Complementary Health Approaches\textsuperscript{1,5,7,13}

<table>
<thead>
<tr>
<th>Natural Products</th>
<th>Mind and Body Practices</th>
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<tbody>
<tr>
<td>• Echinacea</td>
<td>• Acupuncture/Acupuncture</td>
</tr>
<tr>
<td>• Fish oil/omega 3s</td>
<td>• Aromatherapy</td>
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<tr>
<td>• Herbs (i.e., botanicals)</td>
<td>• Art therapy</td>
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<tr>
<td>• Minerals</td>
<td>• Chiropractic and osteopathic manipulations</td>
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<tr>
<td>• Probiotics</td>
<td>• Deep breathing/Relaxation techniques</td>
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<tr>
<td>• Vitamins</td>
<td>• Massage therapy</td>
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<td></td>
<td>• Meditation</td>
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<td></td>
<td>• Music therapy</td>
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<td></td>
<td>• Pet therapy</td>
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<tr>
<td></td>
<td>• Yoga/Pilates/Movement therapies</td>
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</table>

Although there is a lack of empirical evidence at a high level supporting complementary health approaches, anecdotal reports indicate that professional nurses who use these modalities report that patients experience an increased level of comfort and well-being after receiving these types of therapy.\textsuperscript{1,8,9}

Complementary health approaches cannot be considered risk free. There can be interactions between complementary health approaches and standard treatments. Ginkgo biloba has anticoagulant effects and when used with warfarin it can increase the risk of hemorrhage.\textsuperscript{10} St. John’s Wort can decrease the effectiveness of some antiretrovirals, antihypertension medication, and antidepressants.\textsuperscript{10} Physical mind and body practices can result in injury if not done properly and/or done by people with balance and weakness difficulties. For example, injuries with yoga (e.g., musculoskeletal, nervous, visual) are rare, but the risk increases when practiced by those with glaucoma or musculoskeletal conditions and those taking sedating or psychoactive drugs.\textsuperscript{11}

The Hospice and Palliative Nurses Association (HPNA) is committed to a comprehensive model of care that addresses physical, emotional, and spiritual concerns of persons at the end of life using conventional therapies and complementary health approaches.

**Position Statement**

- Acknowledge the increasing popularity and use of complementary health approaches and recognize that this trend has important implications for nursing practice, education, and research.
- Acknowledge the impact cultural diversity has on complementary health approaches in the United States.
• Recognize that many complementary health approaches provide a holistic approach to managing symptoms and promoting wellness at the end of life. The holistic approach is consistent with nursing’s historical and philosophical methods of practice.

• Recognize the current and potential role of complementary health approaches in the amelioration of symptoms and enhancement of quality of life for patients with serious or life-threatening illness.

• Assure that hospice and palliative nurses have sufficient access to resources about these therapies to guide patients in making informed decisions (i.e., benefits, burdens) regarding their care and to incorporate these therapies into a comprehensive plan of care.

• Acknowledge the lack of research surrounding complementary health approaches with children; therefore, its use should be discussed with the child’s healthcare provider.

• Support basic and continuing nursing education focusing on complementary health approaches for patients with serious or life-threatening illness.

• Support and encourage the competent practice of complementary health approaches for promoting holistic end-of-life care.

• Affirm that some complementary health approaches are within the scope of nursing practice.

• Promote regulatory and legislative clarification regarding the scope of nursing practice as it relates to complementary health approaches.

• Support safe, rigorous, and ethically sound research that examines the efficacy, costs, and adverse effects of complementary health approaches.

• Educate nurses regarding state and federal regulations on complementary health approaches.

• Support the use of licensed and/or certified complementary health approaches therapists in the delivery of these services.

Definition of Terms

*Alternative therapies*: using a non-mainstream approach in place of conventional medical and surgical therapies. In contrast, *complementary therapies* are non-mainstream approaches used together with conventional medicine.¹

*Holistic nursing practice*: “nursing practice that has healing the whole person as its goal.” Holistic nursing “draws on nursing knowledge, theories, expertise, and intuition to guide nurses in becoming therapeutic partners with people in their care. This practice recognizes the totality of the human being – the interconnectedness of body, mind, emotion, spirit, social/cultural, relationship, context, and environment.”¹²
References


