Healing Touch for Pain Management in a Radiation Oncology Setting

Eva B. Burgan RN, OCN, Edna C. Wilson RN, BSN, OCN
Hendricks Regional Cancer Center, Medical Director, Stanley S Givens, MD

ABSTRACT

The field of oncology is always looking for interventions to improve the adult cancer patient’s quality of life (QOL). One of the most complicated and frustrating symptoms to control in the these patients is pain. Side effects of multiple medications used for symptom management, along with the treatment itself, can create a significant decrease in QOL for these patients.

There is a need for research in the field of complimentary medicine. While this study looks at several QOL indicators, our main goal was the effect of Healing Touch on the adult cancer patient’s perception of pain.

METHODOLOGY

All patients who were seen at the HRH Cancer Center were offered the availability of a Healing Touch session that would be used in conjunction with conventional therapies to reduce both acute and chronic pain.

The patients completed a pre and post questionnaire that included both objective and subjective data, taken after the patient was in the recumbent position and prior to them sitting up when the session was completed.

Each session included:

• Healer Preparation
• Chakra Connection
• Mind Clearing
• Scudder Technique
• Grounding and Release

A total of forty sessions were provided at the Cancer Center and incorporated the same spa-like music, low lighting, warm blanket, private room and massage table.

OUTCOMES

Mean Vital Sign Changes Following Healing Touch

<table>
<thead>
<tr>
<th>SBP (p=.01)</th>
<th>RESP (p=.01)</th>
<th>PULSE (p=.01)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-HT</td>
<td>Post-HT</td>
<td>Pre-HT</td>
</tr>
<tr>
<td>120</td>
<td>118</td>
<td>72</td>
</tr>
<tr>
<td>18</td>
<td>18</td>
<td>68</td>
</tr>
</tbody>
</table>

Mean Changes in Two Variables Following Healing Touch (HT)

<table>
<thead>
<tr>
<th>I Feel Tense (p=.02)</th>
<th>Pain Scale (p=.01)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-HT</td>
<td>Post-HT</td>
</tr>
<tr>
<td>2.5</td>
<td>2.8</td>
</tr>
<tr>
<td>1.4</td>
<td>3.6</td>
</tr>
</tbody>
</table>

DISCUSSION

As previously noted, the theory regarding the pain cycle provides evidence that when one component of the cycle is removed or reduced, there is a direct impact on the level of pain. Therefore, a reduction in tension, would support the use of Healing Touch to decrease perception of pain.

One limitation identified, as the study progressed, was a potential Hawthorne effect. The patients were aware of what researchers were studying, raising a concern, that the patients may have allowed their desire to “help” researchers, as their caregivers, to affect reporting of symptoms.

CONCLUSIONS

Healing Touch does appear to benefit adult cancer patients in the perception of their pain.

Additional research is warranted. One consideration is to provide a Healing Touch (HT) practitioner other than a direct caregiver to safeguard any potential bias. Further studies might be conducted to compare HT versus massage therapy in regards to pain management.

Other areas to broaden the investigation of (HT) might include the chronic pain patient, post-operative pain management, and a non-medical approach for palliative care or hospice patients.

Consideration of the use of Healing Touch in managing caregiver stress would be an appropriate nursing intervention.

Another interesting component revealed in the study showed a level of significance for decreasing systolic blood pressures, pulse and respirations. This may present an opportunity for additional studies in non-medical stroke management and hypertension control.

The Cancer Center will continue to offer Healing Touch as a complimentary intervention, as long as, patients perceive it as beneficial in improving their quality of life.

REFERENCES

1. The Cochrane Collaboration: Touch Therapies for Pain Relief in Adults. Copyright 2009, J. Wiley & sons, Ltd
3. Additional references are available upon request.