

Biofield Therapies and Cancer-Related Symptoms: A Review

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Patients with cancer can experience several treatment-related symptoms, and conventional care focuses primarily on cure and survival without a holistic approach to disease. Subsequently, an increasing number of patients are accustomed to complementary modalities to improve well-being. Biofield therapies (BTs) are complementary and alternative medicine (CAM) modalities based on the philosophy that humans have an energetic dimension. Physical and psychological symptoms may cause imbalance, and BTs are believed to balance disturbance in the energy field. This article provides a study review of the main BTs (i.e., therapeutic touch, healing touch, and Reiki) in the treatment of cancer-related symptoms. Although BTs are among the most ancient healing practices, data on their effectiveness are poor and additional multicenter research with larger samples are necessary. BTs may eventually become an autonomous field of nursing activity and allow professionals to build a relationship with the patient, thereby improving motivation. The idea that this method can be self-managed and may effectively reduce pain for patients with cancer can improve satisfaction challenges experienced by the current healthcare system.

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Patients with cancer can experience several treatment-related symptoms, such as fatigue, nausea, vomiting, pain, insomnia, anxiety, and depression, which can negatively influence their health-related quality of life (QOL) (Jackson et al., 2008). Conventional care focuses primarily on cure and survival without a holistic approach to the patient (Anderson & Taylor, 2012). Therefore, particularly in the palliative phase, patients are accustomed to complementary modalities to improve well-being and increase their own self-control (Henderson & Donatelle, 2004; Lengacher et al., 2002; Molassiotis et al., 2005; Pud, Kaner, Morag, Ben-Ami, & Yaffe, 2005). Predictors of complementary and alternative medicine (CAM) use among patients with cancer include female gender, stage of disease at diagnosis, age, higher education, higher income, race, geographic location, and living farther from healthcare providers (Anderson & Taylor, 2012). However, in a five-year report period, Barnes, Bloom, and Nahin (2008) found that CAM use is increasing among all patients, with about 4 of 10 adults using CAM.

Biofield therapies (BTs), one of the most renowned CAM modalities, are based on the philosophy that humans have an energetic dimension (Anderson & Taylor, 2011). BTs are believed to balance out disturbance in the energy field caused by physical and psychological symptoms (Anderson & Taylor, 2011, 2012). BTs include therapeutic touch (TT), healing touch (HT), Reiki, Qigong, and polarity therapy (Jain & Millis, 2011; National Center for Complementary and Alternative Medicine, 2006; Vitale, 2007).

Although the use of CAM is increasing, patients often do not inform their doctors about their use of CAM (Barnes, Powell-Griner, McFann, & Nahin, 2004; Barnes et al., 2008; Ott & Lynch, 2002), showing inadequate communication between patients and providers. In the early 1990s, 34% of Americans used CAM; however, 60% of their doctors were not informed (Barnes et al., 2004). Other Canadian, British, and Australian studies showed similar data (MacLennan, Wilson, & Taylor, 1996; Millar, 1997; Thomas, Carr, Westlake, & Williams, 1991).

The current authors agree with a holistic healthcare paradigm where the individual and environment relationship is an