

# Oncology Pain and Complementary Therapy: A Review of the Literature

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Half of all patients with cancer experience some level of pain, so pain management is an important topic for oncology nurses. Pharmacologic measures traditionally are the primary intervention for bone, visceral, neuropathic, and procedural pain; however, many patients are turning to an integrative approach of Western and complementary therapies for pain and symptom management. The authors explored the current evidence concerning the effectiveness of complementary therapies in relation to cancer pain and symptom control.

**M**ost patients with cancer experience pain at some time during their cancer experience. Seventy-five to 90% of all patients with advanced cancer experience pain, and 50% of those describe their pain as moderate to severe (National Pain Foundation, 2009). Although many guidelines are available for clinicians and patients, cancer-related pain continues to be undertreated (Lorenz et al., 2006). Barriers to effective pain management exist among nurses and patients with cancer (National Cancer Institute [NCI], 2009). For nurses, limitations to effective pain management include a lack of (a) appropriate assessment skills, (b) knowledge about effective intervention strategies, (c) information related to controlled substance abuse, and (d) understanding about patients becoming tolerant to analgesics (NCI, 2009). For patients, barriers in pain management include a reluctance to report pain, worries that pain is a sign of worsening disease, and a fear of addiction (NCI, 2009).

Uncontrolled pain can lead to physical and psychological distress. Cancer-related pain results from interruption of bone, visceral, and neural structures because of direct tumor involvement or metastases, treatment effects (e.g., diagnostic procedures, surgery, radiation therapy, chemotherapy), or a combination (Gatlin & Schulmeister, 2007; Shaiova, 2006) (see Table 1). These types of pain often are relieved by a combination of pharmacologic and nonpharmacologic interventions. Although medication is one means of therapy for pain relief, many patients with cancer have turned to alternative modalities to assist them with their physical, emotional, and spiritual well-being. Oncology nurses play an important role in educating and informing patients regarding non-

## At a Glance

- ♦ Pain is the most common symptom experienced by patients diagnosed with cancer.
- ♦ Cancer-related pain results from the interruption of bone, visceral, and neural structures because of direct tumor involvement or metastases and/or side effects of treatment.
- ♦ Complementary therapies, such as massage therapy, acupuncture, therapeutic touch, and hypnosis, can be useful to reduce pain and associated symptoms.

pharmacologic measures that may be employed for pain management. Complementary therapies (CTs) can help relieve pain and improve quality of life. The purpose of this review is to provide oncology nurses with information about the evidence related to several CT intervention strategies that can be used in addition to traditional medical treatments to alleviate or arrest cancer pain.

CTs, as defined by the National Center for Complementary and Alternative Medicine (2009), are a group of diverse medical and healthcare systems, practices, and products that are not presently considered to be part of conventional medicine. Specific types of CT include but are not limited to massage therapy, acupuncture, hypnosis, healing touch, therapeutic touch, reflexology, and meditation. According to the National Health Interview Survey, about 38% of all American adults use some type of complementary and alternative medicine and they spent about \$34 billion on related products and practitioners over the prior 12 months (Barnes,

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