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*Introducing the complementary care methods
for the hospitalized cancer patients*

During the academic year 2002/2003 in the curricula program for the Master degree in Nursing Sciences of the Faculty of Nursing and Health Sciences, Medical University of Lublin graduate students of the final IVth year realize their classes in the Oncology Nursing and Palliative Care. The elements of the CAM (Complementary and Alternative Medicine) methods in cancer care were introduced for the 1st time. It consists of the lectures on the human response to cancer as a life-threatening disease as well as the methods of possible support within the whole spectrum of a human being. Among the other subject the role of touch and a gentle massage was discussed. It was explained to the students that massage could be seen like an active meditation. In order to give the gentle massage to oncology patients, students should be calm and completely absorbed in what they would do. While concentrating on the rhythm of massage, the person would soon relax and that relaxation would be transmitted to the massaged person. The positive thing with massage is that you can show that you care about someone; you convey a sense of sharing and intuitive understanding, reassurance and give some pleasure to those who suffer.

The main teaching goal was to gain the understanding of the natural and powerful healing role of touch.

METHODS

The assumption of the whole quasi-experimental initiative was the following: The benefits of massage are felt not only by the person being massaged, the masseur benefits just as much. In the situation <cancer patient versus caregiver> they both need to overcome the distance between each other in order to establish the background for the tender loving care. The therapeutic use of touch may help many nurses to become aware of its importance for enhancing the well-being of the patient and to use themselves as the primary “mind-body” intervention. As for logistics, arrangements were made to host one afternoon teaching class within the Department of the Surgical Oncology of the University Hospital. Every week a new group of students arrived at the department, and the experimental classes were realized. The patients were offered gentle message, and almost everyone agreed. They were expecting that and their family members or friends were also informed. The afternoon teaching program (2pm–7pm) started with the explanation and a discussion about the use of complementary care.

The gentle relaxing massage of back and a massage of hand for hospitalized cancer patients were chosen as the most suitable for hospitalized cancer patients. In the nursing literature, gentle, slow-stroke massage is proved to enhance relaxation and it increases the feeling of well-being. The tutor realized the demonstration of gentle massage – back rub on a student volunteer. After the initial demonstration students spent their time on exercising the massage technique on each other, under the close supervision of the tutor.

The actual massage was realized in the patient's rooms, starting from 5:00 pm. Each student was assigned to one hospitalized patient and provided the massage to one client for the 30 minutes. Patients were seated in comfortable positions with the proper support. For those who were unable to move in the bed, the massage of hand was performed. The special delicate massage oil offered by the Polish cosmetic company was used. After the completion of the massage, students were back in the seminar room for the feedback and discussion.

PROFESSIONAL BACKGROUND

We would like to describe shortly the authors' activity connected with the academic-clinical research and teaching process as the Medical University employees and volunteers within the NGO organizations as we represent 3 different organizations, which are in constant mutual cooperation:

DEPARTMENT OF ONCOLOGY NURSING, FACULTY OF NURSING & HEALTH SCIENCES,
MEDICAL UNIVERSITY OF LUBLIN

Nursing Faculty of the Medical University in Lublin came into life after insistent efforts of the representatives of nursing and medical professions and University authorities tending towards the creation of the first master school in the former block of socialist countries in the academic year 1969/1970. During over 30 years Diplomas of Nursing and Master's degree titles were given to 3,653 graduates, including a total number of 1,901 full-time students and 1,752 part-time students. Faculty recently offers comparative systems of education (B.Sc. and M. Sc.) for nurses, midwives, dieticians and physiotherapist according to WHO Copenhagen 1999 directory of the European Community Council and law regulation and standards. The Department of Oncology Nursing was created in the 1990. Apart from teaching the students, the main research area remains the psychosocial and spiritual problems of individuals and families affected by cancer. The direction toward an integrative approach within the oncology care is highly promoted.

DEPARTMENT OF SURGICAL ONCOLOGY, CHAIR OF ONCOLOGY, FACULTY OF MEDICINE,
MEDICAL UNIVERSITY OF LUBLIN

The Medical and Pharmacy Faculties were established in 1944 within the University of Maria Curie-Skłodowska. In 1950 the Faculties were separated from the University and were included in the newly established institution – the Medical University. The Medical University provides graduate and postgraduate teaching, it serves as the center of excellence and supervision for 4 University Hospitals in the Lublin Region. Within the structure of the Chair of Oncology, the Department of Surgical Oncology was established in the 2002. The diagnosis, surgery, chemotherapy and intraoperative radiotherapy are offered to patients with cancer of the breast, thyroid, pancreas, liver and colorectal yearly. Over 1,200 patients are admitted and treated yearly. The oncology surgeons and nurses are often confronted with a wide range of psychosocial and spiritual problems, and are aware of the lack

of the suitable methods of help. Therefore, the scientific and medical staff is open to the integrative approach to oncology care and looks forward to the professional development in that particular area.

FOUNDATION FOR EARLY CANCER DETECTION IN LUBLIN

The Foundation of Early Detection of Cancer was established in Lublin, Poland in 1990, and began its activity in 1991 in response to an enormous demand for prophylactic examinations of female patients caused by significant insufficiency of such examinations in the State-governmental health sector. The main idea behind its establishment was improving breast cancer detection and propagating its prophylaxis. A specialist polyclinic was started which has performed clinical examinations and tests, i.e. FNB, USG until the present day. Until the year 2000 the Foundation had been financed solely from its own resources, which were generated by the polyclinic or raised at various health education conferences and mass events. Since its establishment approximately 50,000 female patients have been examined and 534 cases of breast cancer have been detected. The current transformation in Poland necessitates reforming the Foundation management system and to search for new sources of the treatment offered. We currently discuss the possibility of including some of the methods of integrated cancer care within our professional offer.

DISCUSSION

During the whole experimental teaching time 117 cancer patients (N=117), mostly breast cancer patients (n=100), head and neck (n=14), kidneys (n=2) and colon (1) used the described complementary methods. The overall response was very positive. The patients (100%) reported getting into the state of relaxation and calmness. The nursing staff of the department reported that patients were easily getting rest and were sleeping better the following night, and the atmosphere in the department was much more relaxed than usually. Nurses told us that patients were awaiting the afternoon and many of them kept asking them "would students provide the massage today for sure?". The clients themselves were very satisfied, and many expressed the need for learning that skill, and so did some family members. Students were offering the "on-side" instructions to the spouses, children and other family members (2, 3, 6). Completing the massage gave the students a special insight, which was openly discussed between each other and with the tutor in the seminar room. Many students (70%) reported the initially present anxiety connected with entering the oncology department as well as the fear (30%) caused by the touching of the cancer patients. There were also patients who were initially unhappy about the proposition and refused to have a massage. During the further conversation they expressed the fear that their disease (cancer) could be caught by the students. It was necessary to provide explanation to those patients, and they were eager to get the massage later on (4, 11).

In Polish society some cancer patients are still in a need of fighting the "untouchable" syndrome. Providing the relaxing gentle massage mostly served as "breaking the ice" communication between cancer patients and their caregivers and served as a powerful support method. The Master students' response to that experimental method was very positive, in the feedback the respondents stressed how they valued the human touch as a form of a caring as well as expressing their positive professional approach.

The massagist Clare Maxwell-Hudson speaks about overcoming the social inhibitions: "Despite all this evidence to show the benefits of touch, we are still hesitant about touching each other. I think this is due to confusion between sensuality and sexuality. Because we are so afraid of the connection between sex and touch, we have formalized touch. There are only few occasions when adults are allowed to touch each other freely. Massages remove the taboos of touching and allow people to touch in a positive way" (8).

Complementary nursing interventions such as Mind-Body therapies and the use of touch can be used throughout the patient's journey with cancer in many different settings, from inpatients units and ambulatory clinics to the patient's home. They can be offered as interventions for various symptoms and side effects. It is particularly important for Polish health care system, where nurses look for the new areas of professional activity, and where many patients with chronic diseases and their families are searching actively for the new methods of the quality of life improvement among non-professionals. Many interventions have self-help components and can also be taught to family members. "The therapeutic use of self is the primary 'mind-body' intervention used by many nurses (5, 9)".

Certain approaches may have a positive effect on a patient's quality of life. Various adverse conditions, such as pain, anxiety and emotional distress, physiologic arousal and tension, nausea, anorexia, and the feelings of isolation and vulnerability have been noted to improve when patients use nontraditional practices. Methods that have been used include massage (4). Most patient use these interventions as an adjunct to, rather than a substitute for, standard treatment.

CONCLUSIONS

For many oncology professionals the major concern is that the massage may aid the cancer in spreading because of increased circulation. Although this belief is taught in massage therapy schools, there are no research findings to support this theory. On the contrary the nursing literature proves that the gentle, slow-stroke massage enhances relaxation and increases the feeling of well being. In the year 2005, a new group of students will be involved; this time the authors hope to use more standardized & qualitative approach in research the methodology.

Further research is recommended to enrich the scientific body of knowledge and to support the implementation of C&AM therapies in cancer care. The integrated oncology care should become an area of professional interest to those who provide the professional education to doctors and nurses, and practice within the cancer care (1, 7, 10).

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SUMMARY

The goals of that presentation were to discuss integrating complementary therapies into mainstream care from an educational perspective. The main goal was to understand the significance of educational programs in integrating complementary therapies into mainstream care and to present beginning strategies to develop educational programs in academic centers. Right now medicine undergoes the paradigm shift: we need to understand the need for a change of bio-technical model based on the reductionistic scientific perspective to the new medicine. In order to achieve those goals we need medical education that focuses on humanistic values that recognize and acknowledge the importance of the mutual connection of mind and body and the importance of the humanistic and therapeutic relationship.

Wprowadzanie metod opieki komplementarnej u pacjentów hospitalizowanych w placówkach onkologicznych

Celem pracy było ukazanie próby włączenia elementów opieki komplementarnej do zakresu opieki nad pacjentem onkologicznym, a następnie omówienie perspektywy edukacyjnej. Obecnie medycyna przeżywa etap poszukiwania kierunków dalszego rozwoju. Niezwykle istotną rolę odegra tu model opieki zintegrowanej. Dotychczasowy model biotechniczny, pomimo niezwykle dynamicznego rozwoju, jest krytykowany głównie ze względu na dehumanizację idei opieki i leczenia.