

The Use of Complementary and Alternative (CAM) Therapies to Reduce Pain Levels in Laboring Women

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Background

The use of Complementary and Alternative Medicine (CAM) therapies for pain has become widespread; and within the context of laboring women, it may be an integral method of holistic pain relief. The term CAM refers to interventions done alongside mainstream medicine and pharmacology to enhance relief of the body, mind and spirit. CAM is used in conjunction with traditional medical care and under the guidance of a healthcare provider to incorporate within the patients' birth plans. CAM can help patients feel more in control during the labor process to alleviate any distress and pain. Many of the CAM interventions can include (but are not limited to) acupuncture, aromatherapy, music therapy, yoga, and even guided imagery. There is a need to establish protocol to fully integrate CAM therapies as first line options for laboring women in the hospital.

Literature Search Criteria

- **Databases used:** PubMed, CINAHL, ScienceDirect (Elsevier), Cochrane Library, AWHON, JSTOR, Scopus
- **Key terms:** complementary and alternative therapies, post-cesarean pain, back and pelvic pain, non-pharmacological therapies, relaxation techniques, CAM, alternative medicine
- **Selection criteria**
 - Resource type: published articles
 - Published language: English
 - Subject: pregnant women, pregnancy, nursing, complementary therapies utilization
 - Publication date: 2019-2023
 - Population: women experiencing labor pains
 - Limit to: Research studies, available online
 - Aligns with research topic: use of CAM therapies in laboring women

PICOT Question

Population	Laboring women
Intervention	Use of CAM therapies
Comparison	No use of CAM therapies
Outcome	Reduced pain levels
Time	Within 6 months



Synthesis of Findings

- ❖ Multiple sources found significant differences regarding pain reduction before and after applying back massage and reflexology during the first stage of labor, specifically in creating reduced pain levels.
- ❖ Sources found connections between the use of heat application and decreased pain levels for patients during all stages of labor. Therefore, heat application and massaging can be used as a safe and effective midwifery intervention to reduce the perception of pain in pregnant women and provide comfort during labor. ¹
- ❖ Results across sources showed that thermotherapy with the use of infrared belts and hot water bags was also effective in reducing labor pain, as infrared belts being the most used complementary method in reduction of labor pain intensity in all trials. ³
- ❖ The mean total pain score in majority of trials showed that breathing techniques with the use of lavender scented oils significantly reduced labor pain at the end stage of labor compared to mothers using only sterile water vaporization. ⁶
- ❖ The findings provided that women are using CAM in pregnancy as a means of supporting their sense of self-determination, to pursue a natural and safe childbirth, and because they experience a close affiliation with the philosophical underpinnings of CAM and valued the time spent with CAM practitioners. ⁵
- ❖ Trials proved that reflexology is probably effective and safe for labor pain, duration of labor, and anxiety in pregnancy, but most sources also proved that reflexology for LBPP, fatigue, sleep quality, constipation symptoms, and ankle and foot edema during pregnancy were insufficient. ⁴



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Acknowledgements

Academic scholarships were received by the Gessner Family, Inez German Warren Endowed Scholarship in Nursing Undergraduate, and the Hamill Foundation. We would also like to thank Dr. Connelly, PhD, DNP, MSH, CNS, APRN, CNOR for the guidance in the development of this project.

Decision to Change

- ❖ In comparison to the use of narcotics that can promote more effective severe pain relief, many side effects or potentially impact the fetus upon use. CAM therapies are considered for women who want to avoid or minimize drug use during labor and can also be used in conjunction with pharmacological methods.
- ❖ RCTs have helped determine whether CAM therapy has a significant impact on the reduction of labor pain compared to other treatments or with no treatments at all. With systemic reviews, studies have analyzed data from multiple trials to compose an assessment on the evidence of CAM therapy use and overall effectiveness on pain.
- ❖ All options and information about CAM therapies would be made available to all mothers upon admission prior to the use of narcotics and pain relief medicine. A guideline will be made to educate mothers and nurses on which CAMs are appropriate for the presenting description of the pain. For example, the use of back massaging and application of heat is used for back pain and the use of music and virtual reality therapy can be used for anxiety and distraction.

Evaluation

- ❖ During the 6-month implementation period, it will be reported that utilization of CAM therapies in laboring women will help reduce pain levels by at least 20-30% versus no usage of CAM therapies.
- ❖ To evaluate the effectiveness of CAM therapies, the Numeric Pain Rating Scale (NPRS) will be used to evaluate pain levels for laboring women who are implementing CAM therapies as well as be used to evaluate pain levels for laboring women who are not implementing CAM therapies. The data will be collected, recorded, and compared throughout the 6-month implementation.
- ❖ All studied women will fill out the Holistic Complementary and Alternative Health Questionnaire (HCAMQ), an 11 item, self-complete questionnaire that measures attitudes to complementary and alternative medicine and holistic health beliefs to provide further information regarding whether utilizing or not utilizing CAM therapies impacted their pain levels.
- ❖ All nurses will be educated on the usage of CAMs and appropriateness for each therapy through staff education trainings and CEUs

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