



RCCM Annual Conference 2022: ABSTRACTS



ORAL PRESENTATIONS

Session 1: Integrated medicine for chronic illness: chronic illness and integration

Kirti Paik-Inkar

Feasibility study: Effect of virgin coconut oil to enhance the cognition, brain functions and quality of life in older adults diagnosed with mild to moderate dementia

Kirti Paik-Inkar, Dr. Amalia Tsiami, Dr Snorri Rafnsson, Dr John Hughes

Background

At present, more than 55 million individuals are living with dementia (ILWD) worldwide and this figure is expected to reach 139 million by 2050. There are no available treatments that will relieve the symptoms, cure or control the progression of dementia. Thus, this study would evaluate the effectiveness of self-management in chronic conditions by conducting a feasibility study to determine the practicality of delivering virgin coconut oil (VCO) in ILWD and having mild cognitive impairment (MCI).

Research Question: How effective is it to employ a self-management approach and utilise VCO in ILWD to assess overall cognition, Quality of life, Ketone concentration, Verbal Memory, Verbal Fluency, Processing Speed, Attention and visual Spatial memory.

Methods

This study will employ a mixed- method randomised parallel- group exploratory study design.

Stages of the Feasibility study

Stage 1 - To review and critically evaluate the literature.

Stage 2 - Conduct Delphi Survey model validity.

Stage 3 - Mixed methods to analyse quantitative and qualitative components.

Proposed Steps for Stage 3.

- Initial Contact Informed consent. Information (20min).
- 1st T0 Initial Assessment
- Randomisation T1- Group allocation



- Follow up after 6 weeks T2
- Follow up after 12 weeks T3

Memory test, Questionnaire, Ketone test, 4- day food test will be done on the 1st, 3rd and 4th assessment days.

Results

The findings will be utilised to assess the feasibility of design utilised. The main objective is to understand whether the study design would accurately assess the effectiveness of the intervention, sample size required, appropriate outcome measures, best way to recruit the participants.

Conclusion

The intervention may possibly assist the ILWD to understand their self-care/ management options. These self-management interventions could benefit the economy by lowering the national financial burden by reducing hospitalizations and improving overall well-being, which will promote independent living for as long as possible.

Klara Dolakova

Integration of Complementary and Alternative Medicine (CAM) into the Czech healthcare system: possibilities, benefits, risks, and detection of some ethical dilemmas

Klara Dolakova, Department of Doctoral Studies, Charles University in Prague, Faculty of Humanities, Field of Applied Ethics

Anetta Jedlickova, Department of Doctoral Studies, Charles University in Prague, Faculty of Humanities, Field of Applied Ethics

Background: Ethical principles should play a key role in the decision-making process regarding public health. One of the topics that prompt lively ethics discussions is the integration of complementary and alternative medicine (CAM) into the national healthcare system. With the growing demand for CAM approaches, the number of countries integrating these methods into the national healthcare system, thus following the recommendations of the WHO traditional medicine strategy 2014-2023, has increased over the past years. However, the degree of CAM integration varies broadly and, is often influenced by the regulation of these methods or their integration within the education system in each country. Discussions regarding the regulation of CAM have been repeatedly held in the Czech Republic, however, no legislation or other measures have been adopted. Rather than raising the matter of possible integration of CAM within the Czech healthcare system, it seems that ethical concerns are at the center of attention. Contrarily, in the UK, some of the CAM methods have already been integrated into the National Health Service (NHS).

Aim of the study: This study explores professionals' experiences and views of CAM integration within the NHS in the context of ethics. The main aim is to find out in which circumstances, according to professionals based in the UK, it is ethically acceptable to integrate a particular CAM method into healthcare.

Methods: Semi-structured expert interviews with professionals experienced in both CAM and biomedical fields were conducted. The outline of the interview was based on questions arising

from the Czech literature review regarding the topic of CAM and ethics. Sampling was purposive and framework analysis was performed.

Kereaseen Oluwatobiloba

Wearable technology for promoting physical activity in middle-aged adults with chronic musculoskeletal pain

Kereaseen Oluwatobiloba Eboime (PhD Student Researcher), School of Biomedical Sciences, University of West London, London.

Dr Jin Luo: School of Biomedical Sciences, University of West London, London.

Dr John Hughes: School of Biomedical Sciences, University of West London, London.

Prof Raymond Lee: Faculty of Technology, University of Portsmouth, Portsmouth.

Background

Middle-aged adults with musculoskeletal chronic pain are often physically inactive. This inactivity is linked with constant pain, tiredness, and disability. National Institute for Health and Care Excellence (NICE), guidelines recommended group or individual based physical activity for musculoskeletal patients with chronic pain. Wearable technology has been used as an intervention to motivate middle-aged adults to increase physical activity (PA), but its application on musculoskeletal chronic pain patients' needs more investigation.

Objectives

The purpose of this study is to evaluate the acceptability of all aspect of a proposed randomised control trial (RCT) of wearable devices as an intervention to increase PA in middle-aged adults with musculoskeletal chronic pain. In testing for the objectives, the following areas of the feasibility study will be considered, recruitment and retention strategies for clinic and participants, the use of proposed outcome measures, and explored intervention acceptability.

Methods

A mixed-method randomised parallel-group exploratory trial will be used in this study. Participants will be recruited from a National Health Service (NHS) musculoskeletal clinic and randomised on a ratio 1:3 into control group (standard care) and intervention group (standard care combined with wearable device). The feasibility study will last for 18 months, participants involvement will be for 24 weeks (Intervention for 12 weeks with 12 weeks follow-up). Patients in both groups can participate in any lifestyle activity, including planned, structured, and repetitive bodily movement exercise or occupational and recreational PA. Qualitative semi-structured interview will conducted for participants at baseline and 12-week while outcome measures will be conducted for participants at baseline, 4-week, 8-week, 12-week, and 24-week to examine their pain, physical activity, and their responses to the trial. Intervention group participants will be required to wear the wearable device during the day for 12 weeks. Qualitative interview will be conducted for stakeholders which include clinicians and service managers after all patient data collection have been completed. Quantitative analysis will include descriptive statistics, appropriate tests for statistical significance and a statistical power calculation. Qualitative data will be analyzed thematically using framework approach.

Expected Findings

This study has the potential to make an original contribution to provide key data on the feasibility, acceptability, and effectiveness of using wearable technology to support physical activity intervention for middle-aged adults with musculoskeletal chronic pain. If shown to be acceptable and effective, a wearable device could be introduced for routine management of musculoskeletal chronic pain among NHS patients.

Lucy Doyle

Yoga Use and Quality of Life in Irritable Bowel Syndrome: A mixed-methods study

Lucy Doyle, University of Westminster

Dr Tina Cartwright, University of Westminster

Background: Irritable Bowel Syndrome (IBS) is a functional gastrointestinal condition common in the UK. It is often associated with reduced quality of life, poorer psychological wellbeing, and disruptions to social functioning. Yoga-based interventions for IBS have reported both physical and psychological benefits often comparable to the effects of more conventional treatments such as medication and dietary changes. However, less is known about yoga use in adults with IBS outside of structured interventions, including its associations with quality of life in relation to other factors, perceived benefits and barriers, and which specific aspects may be most beneficial. Understanding this could inform the design of more targeted interventions and help widen yoga participation amongst people with IBS.

Study aim: To: 1) Explore the relationship between yoga use, symptom severity, psychological symptoms, and quality of life in a sample of UK adults with IBS, 2) Explore experiences with and perceptions towards yoga in relation to IBS to gain a richer understanding of perceived benefits, barriers and limitations.

Methods: UK-based adults with IBS were recruited from social media, online forums and UK-based IBS and yoga organizations to complete an anonymous, mixed-methods online survey.

The survey included measures of demographic variables, general health, symptom severity, psychological symptoms, quality of life, and yoga-related variables. Data from a total of 219 adults (70 yoga practitioners, 149 non-practitioners; mean age 46.42 years) was analysed.

Results: A hierarchical linear regression model indicated that education, yoga use, depression, anxiety, symptom severity and general health accounted for 64.6% of the variance in quality of life, with yoga accounting for an additional 6.1% when education was controlled for. Thematic analysis revealed 6 overall themes and 12 sub-themes. Three themes reflected perceived benefits of yoga: IBS Relief, Holistic Wellbeing, and Yoga is a Coping Mechanism. Three themes reflected perceived barriers and limitations to yoga: Lack of Physical Capability, Lack of a Tailored Approach, and Yoga is Not For Everyone.

Conclusion: This study has furthered understanding of yoga's relationship with quality of life in IBS. Qualitative findings revealed both benefits and barriers to yoga practice, with commonly identified benefits such as symptom relief from yoga-based breathing techniques and postures reflecting findings from interventions, whilst barriers such as limited physical capability - often as a result of IBS, and limited ability to participate in all aspects of yoga suggest a need for more tailored yoga classes specific to people living with IBS.

Anne Majumdar

A mixed methods pragmatic trial of a pulsed electro-magnetic field device to improve feelings of wellbeing among those with Type 2 diabetes

Charlotte Foster Brown - St Mary's University

Dr Anne Majumdar - St Mary's University

Background: Type 2 Diabetes is a condition with high prevalence in the UK and globally. It is extremely important for sufferers to engage in healthy lifestyle practices and to take measures to reduce the risk of health complications of diabetes from developing. The burden placed on diabetes sufferers is an area of little extant literature, but is an important area to be researched.

Aims: The aims of this study were to explore the experiences of individuals with Type 2 diabetes, the burden placed on their lives by the condition, and their experiences of taking part in a trial of a novel intervention.

Methodology: This study had a qualitative design. People who suffered from Type 2 Diabetes and who were undertaking a pragmatic trial on an electromagnetic and infra-red emitting device, similar to a TENS machine were invited to complete a Measure Yourself Medical Outcome Profile (MYMOP) tool and to attend focus groups. N=3 focus groups were conducted with males and females who suffered from Type 2 Diabetes. The interview schedule explored their perceptions of managing the condition, symptoms, and experiences of completing the trial.

Ethical Approval was obtained from St Marys Research Ethics Committee.

Results and Discussion: n=42 participants completed the MYMOP tool, and n= 11 participants attended one of three focus groups. Focus group attendees included males and females between the age of 58-74. Common most pressing symptoms included neuropathic pain, mobility issues and anxiety around the progression of their condition. Themes emerging from the focus groups included frustration at medication overload, Importance of connecting to others, and the benefits of being forced into periods of relaxation.

Conclusion: A better understanding of those suffering from Type 2 Diabetes will provide invaluable insight to health professionals and interventions aimed at this population.

Miranda Harris

Nutritional knowledge, attitude, and behaviour of post-menopausal women living in the United Kingdom, and the relationship of nutritional knowledge, attitude, and behaviour with menopausal symptom severity.

Nicola Fellowes Dip CNM, mBANT, CNHC

Miranda Harris MSc FHEA mBANT CNHC, Senior Lecturer, Nutritional Therapy MSc, School of Allied Health and Community, University of Worcester, UK

Background

Approximately 12,000,000 women in the UK, are over the age of 51, (the mean age of menopause) and potentially post-menopausal. Implementing healthy eating plans is an easily modifiable factor with existing evidence to support benefits for post-menopausal women. This

study explored the connection between nutritional knowledge, attitude, and behaviour (KAB), and the relationship with menopausal symptom severity (SS).

Methods

A post-positivist, quantitative, cross-sectional, retrospective, observational study used an anonymous, online questionnaire. 181 post-menopausal women in the UK were recruited with non-probability, convenience sampling, using The Menopause Support Network and Nutritional Therapy (NT) clients. Internal consistency was checked using Cronbachs $\hat{\pm}$ and data was analysed with non-parametric Spearmans rank correlation rho tests using SPSS[®] V26.

Results

Results showed large, positive correlations between knowledge and attitude ($r = .50, p < 0.05$), attitude and behaviour ($r = .66, p < 0.05$), and knowledge and behaviour ($r = .42, p < 0.05$); partially controlling for attitude illustrated a small, positive relationship ($r = .10, p = .24$) between knowledge and behaviour, with a zero-order correlation coefficient ($r = .35$). Results showed small, negative correlations between SS and knowledge, attitude and behaviour ($r = -.10, p = .162$; $r = -.25, p < 0.05$, and $r = -.22, p < 0.05$).

Conclusion

The study illustrates as nutritional knowledge and attitude increase positively, so does behaviour, and the higher the KAB level, the more symptoms reduce. This contributes to existing evidence supporting nutrition as a means of caring for post-menopausal women, and further informs NT strategies. Study results have been collated into a leaflet to support NT.

Session 2: Integrated medicine for chronic illness: the practitioners' voice and including family

Anita Lienhard

What Are Fertility Physicians Professional Opinion About Traditional Chinese Medicine as Adjuvant Therapy? - A Qualitative Study Using Framework Analysis

Anita Lienhard, MSc

Lara McClure, BA(Cantab) MA(Cantab) PhD PGCHE,

Background

The past two decades have witnessed an increasing use of Complementary and Alternative Medicine (CAM) which includes Traditional Chinese Medicine (TCM) alongside fertility treatments among couples with difficulties conceiving. However, most of these studies have been conducted investigating experiences of women with TCM as adjuvant therapy for Assisted Reproductive Techniques (ART). The professional opinion of fertility physicians (FP) about TCM as adjuvant therapy has been neglected. Therefore, the research question of the present study is What are FPs' professional opinions about TCM as adjuvant therapy?

Aims and Objectives

This study aims to capture FPs' professional opinion about TCM as adjuvant therapy. To fulfil this aim six participants were recruited and interviewed using semi-structured interviews. The interviews were conducted in German either face to face or by telephone due to the pandemic situation in Switzerland. The recordings of the interviews were transcribed, analysed and summarised to English.

Methodology

A qualitative approach has been chosen to investigate FPs' professional opinion about TCM in depth. A purposive sampling strategy has been chosen to generate insight and an in-depth understanding. Questionnaires and surveys have been rejected because responses are limited to answering predetermined questions.

Results

All participants attested to TCM having a beneficial effect for specific clients, whether for relaxation to counterbalance the technical procedure of ART or for improving wellbeing, as TCM treats a different branch of health to orthodox medicine. The findings will be underpinned by verbatim quotes from participants.

Leisa Bellmore

Hand self-shiatsu to promote sleep among Veterans and their family members - A non-randomized, multiple-methods study

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Leisa Bellmore; AI & Malka Green Artists' Health Centre, University Health Network; Canada
Morgan Kane; Department of Occupational Therapy, University of Alberta; Edmonton, Canada
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Background

Sleep deficiency is a growing problem across all populations and is experienced by Veterans, military members and their intimate partners at higher rates than others. Sleep deficiency compromises health and well-being. Current guidelines for sleep deficiency recommend non-pharmacological sleep interventions. Hand self-shiatsu may be one such intervention that is easy to learn, cost-effective and pragmatic. It is a self-management technique that patients can actively control thereby contributing to their feelings of self-efficacy.

Aims

The aim of this study was to determine if a standardized hand self-shiatsu intervention would result in objective and subjective improvements in sleep measures.

Methods

This was a non-randomized controlled study involving both objective and subjective measures. Objective measures (actigraphy) along with several standardized self-report questionnaires were used to collect data at baseline and at four and eight weeks post-intervention. Additionally, participants completed a detailed sleep log.

Results

Fifty people were recruited to the study, with 30 assigned to the intervention group and 20 to the control group. The sleep dimensions as measured by actigraphy showed no significant differences across the three measurement periods in either the intervention or the control group. In regards to the self-report measures, a statistically significant change was noted in sleep disturbance ($\chi^2_2 = 10$ [$n = 25$], $p = 0.007$) for the intervention group and 77% stated they would recommend hand self-shiatsu to others. There was also a significant change in two self-report measures for the control group, possibly an artifact from the sub-optimal recruitment to this group due to the restrictions imposed by the coronavirus pandemic.

Conclusion

Objective data from the actigraphy did not support the hypothesis. However, subjective self-report measures showed significant improvement in sleep disturbance and qualitative information from participants' interviews at study termination indicated endorsement of hand self-shiatsu for managing sleep problems and for increasing self-efficacy.

Laurie Heaps

What dosas of acupuncture do UK-based acupuncturists use to treat endometriosis-related symptoms? A mixed methods practitioner survey.

Laurie Heaps, British Acupuncture Council (BAcC) member, Northern College of Acupuncture.

Background

Endometriosis is a chronic condition with no cure which affects an estimated 10% of the world's population born with a uterus. A wide range of symptoms may be experienced, and pelvic pain is common. Healthcare professionals regard endometriosis treatment strategies as complex and advocate a multi-disciplinary treatment approach which can include acupuncture.

Study aim

This study explored what dosages of acupuncture (AD) UK-based acupuncturists use to treat endometriosis-related symptoms. Models of ADs in research were investigated and compared to study findings; acupuncturists' perception of the importance of individual AD components were investigated; reasons for component choices explored; recommendations for future research offered.

Methodology

Cross sectional, sequential explanatory mixed methods survey methodology collected data from two tiers. Tier 1 (T1) online questionnaire gathered mostly quantitative data from 47 respondents. Tier 2 (T2) semi-structured interviews with a subset of 7 self-identified endometriosis experts collected qualitative data and explored T1 significant findings, identified barriers to component use, offered alternative uses. Extant literature for both AD and endometriosis studies was juxtaposed with anticipated and emergent themes from this study's findings.

Results

A range of 82 acupuncture points are 'frequently / always' used by T1 respondents, of which Sp 6, Liv 3, Sp 10, Ren 4, Ren 6, St 36 are most prevalent. Most T1 respondents treat

endometriosis patients for 6 months and initially once a week. T2 themes included the problem of under-treatment and that being an acupuncturist revealed nuances in use of AD components. The research findings are contextualised with reference to extant literature for both AD and endometriosis studies.

Conclusion

T1 respondents use a wide range of ADs to treat endometriosis-related symptoms. Explanatory models used to interpret diagnostic information and style of acupuncture practised influences AD. Both the acupuncturist and patient shape the AD.

Session 3: Integrated medicine for chronic illness: cancer

Beverley de Valois

Acupuncture in the real world: evaluating a 15-year NADA auricular acupuncture service for breast cancer treatment related hot flushes

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Background

While clinical trials provide valuable data about efficacy of interventions, findings often do not translate into clinical settings. We report real world clinical outcomes of a 15-year service offering breast cancer survivors auricular acupuncture to manage hot flushes and night sweats (HFNS) associated with adjuvant hormonal treatments.

Aims

This service evaluation aims to 1) assess whether usual practice alleviates symptoms in a clinically meaningful way and 2) compare these results with scientific evidence.

Methods

Data were analysed from 415 referrals to a service offering women eight standardised treatments using the National Acupuncture Detoxification Association (NADA) protocol. Outcome measures administered at baseline, end of treatment (EOT), and four- and 18- weeks after EOT included Hot Flush Diaries, Hot Flush Rating Scale (HFRS) and Women's Health Questionnaire (WHQ).

Results

2285 treatments were given to 300 women; 275 (92.3%) completed all eight treatments. Median daily frequency of HFNS reduced from 9.6 (IQR 7.3) to 5.7 (IQR 5.8) at EOT and 6.3 (IQR 6.5) 18 weeks after EOT. HFRS problem rating showed a clinically meaningful reduction of 2 points at all measurement points. WHQ showed improvements in several symptoms associated with the menopause. Two adverse events were reported, neither were serious. Results are comparable to published research.

Conclusion

This first analysis of a long-term auricular acupuncture service compares favourably with outcomes of other studies for reducing HFNS frequency and associated menopausal symptoms. In day-to-day clinical practice, NADA appears to be a safe effective intervention for breast cancer survivors. It also appears to be a sustainable intervention over the long-term for all parties, including managers, funders, therapists, and breast cancer survivors.

Lorna Duncan

Perceptions of breast cancer patients and healthcare professionals on self-administered mistletoe (*viscum album*) therapy: a qualitative study.

Lorna J Duncan, University of Bristol

Susan Bryant, University of Bristol

Gene Feder, University of Bristol

Alyson L Huntley, University of Bristol

Background

A Cochrane review of mistletoe therapy concludes that, while there is some evidence that mistletoe extracts benefit quality of life during chemotherapy for breast cancer, the results need replication. Mistletoe therapy is common in Germany and Switzerland, but its use is limited in the UK, predominantly private but with some provision in the NHS and through charitable organisations. Treatments are generally administered subcutaneously, with a sustained local skin reaction used to indicate the optimal dose. We report on the embedded qualitative study of a feasibility randomised controlled trial of mistletoe therapy in patients with breast cancer in England.

Study aim

The overall aim of the pilot study was to test the feasibility of conducting a trial of mistletoe therapy within an NHS setting. The qualitative component of the study was undertaken to understand the perspectives of patients and healthcare staff, and the facilitators and barriers to its success.

Methods

15 patients with a new diagnosis of early/ locally advanced breast cancer and a standard treatment plan of chemotherapy with/ without radiotherapy were recruited through Bristol Haematology and Oncology Centre (August 2019-March 2020). Participants were randomised to one of two types of mistletoe (Iscador M or Iscador P) or physiological saline which they administered subcutaneously. Follow-up was completed by Dec 2020.

For the qualitative study, semi-structured interviews were conducted with participants (towards the beginning and again at the end of treatment), and also with healthcare staff. Topic guides considered knowledge of mistletoe therapy; views on, and use of, complementary therapies; and recruitment, retention and blinding within the trial. Interviews were analysed thematically.

Results

10 participants, two oncologists and three nurses were interviewed. One member of staff, but no participants, had prior knowledge of mistletoe therapy. Enablers to recruitment included anticipated side-effects of chemotherapy, the familiar nature of mistletoe, and the therapy's

accepted use elsewhere. Enablers to retention included the skin reaction indicating to participants they may be receiving mistletoe, and the positive responses of friends and family. Injections were the main issues for both recruitment and retention. Adherence and safety were very good. Most participants were curious about their treatment and based thoughts on their allocation around skin reactions and response to chemotherapy.

Conclusion

This feasibility trial, the first of its kind in the UK, was acceptable to participants and staff in an NHS setting. While aspects such as blinding require consideration, we plan to undertake a full-scale mistletoe trial.

Nicola Brough

The implementation of the Warwick Holistic Health Questionnaire (WHHQ-25/18) and service evaluation in an oncology department using complementary and Integrative approaches.

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Julie Crossman, Complementary Therapy Service Clinical Lead, Harrogate and District NHS Foundation Trust. Sir Robert Ogden Macmillan Centre, Harrogate.

Background

The need to evaluate healthcare services is multifaceted including the monitoring of quality and effectiveness of services and improving patient care and outcomes. Identifying patient reported outcome measures that sufficiently capture outcomes, are well liked by staff, patients and can robustly measure the impact of a service takes time and resources.

Study Aim

This study reports on the implementation of the Warwick Holistic Health Questionnaire (WHHQ-25/18) and outcomes of a complementary therapy service (CTS) evaluation within an NHS oncology setting.

Methods

The process of implementation was documented and reflected on to observe use of the WHHQ alongside existing PROMs used. Referrals came via a multi-disciplinary team within the patient wellbeing service. A pragmatic approach to CTS delivery of six sessions (offering reflexology, massage, Bowen therapy, auricular therapy, and reiki) was used as part of the routine clinical care.

WHHQ-25 was completed at baseline and at the end of treatment six. Comparative statistics were generated from the baseline WHHQ compared to the follow up WHHQ. Data was extracted from the WHHQ-25 to assess and compare the results of the WHHQ-18 in the same sample. For test for statistical significance a Paired t-test was used.

Results

The service evaluation was carried out during the pandemic between the start of November 2020 and the end of January 2021.

N=49 patients participated, Female (n=29) 59%, Male (n=6) 12%, Missing (n=14) 29%. Ages ranged from 25 years to 65+.

WHHQ-25 pre (T1= 63, SD = 15.3) and post-intervention (T2 = 72, SD = 13.5) showed changes in wellbeing resulting in a statistically significant improvement (df= 48, t=6.0, p <0.05).

WHHQ-18 pre (T1 = 45, SD = 10.8) and post-intervention (T2 = 51.5, SD = 9.9) indicate that the changes in wellbeing resulted in a statistically significant improvement (df =48, t=5.9, p <0.05).

Conclusion

This was the first time the WHHQ-25/18 had been used within an NHS oncology setting. Team reflections were encouraging, reporting that data input and analysis proved more straightforward than other measures used. There was little difference between the statistical outputs of WHHQ-25 & WHHQ-18 in this sample, both indicated positive changes in wellbeing in those using the CTS. Ethical approval was not sought as this was a service evaluation carried out as part of the routine care. The WHHQ-25/18 was a useful addition to evaluate the CTS within this oncology department.

Beverley de Valois

An evaluation of a ScarWork service for cancer survivors experiencing adverse effects of surgery and/or radiotherapy

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Clare Scarlett, SORT ENHT

Emma Holly, Restore Therapy Ltd

Background

In the UK, 68% of early stage cancer patients undergo surgical resection, which may result in troublesome physiological and psychosocial symptoms from scars associated with this curative-intent surgery. Additional radiotherapy may further damage the tissues, leading to fibrosis.

There is little in the medical literature about scarring and cancer survivorship, and little clinical emphasis on providing scar-specific treatment for cancer survivors. To begin to address this gap, we evaluated a 12-month service offering ScarWork, a light-touch manual therapy developed by Sharon Wheeler (USA) that addresses scar-related tissue damage, to further our understanding of this novel intervention.

Aims

To assess the:

- symptoms cancer survivors find troublesome in relation to their scars
- effect of ScarWork treatment on these symptoms
- usefulness of the outcome measures we had identified.

Methods

A National Health Service (NHS) cancer centre offered eight ScarWork treatments to survivors who had undergone surgery and/or radiotherapy for any of these cancers: breast, colorectal, gynaecological, head and neck, or melanoma. To further our understanding of the scar-related problems survivors experienced and how ScarWork might address them, we administered

validated Patient Reported Outcome Measures (PROMs). We chose to use the Patient Scar Assessment Questionnaire (PSAQ) and the Measure Yourself Medical Outcome Profile (MYMOP), administered at baseline and end-of-treatment. Patients could specify one or more scars to be treated; treatments were individualised taking into account patient priorities and sensitivities. A semi-structured questionnaire administered at end-of-treatment collected patients' impressions of ScarWork.

Results

Nineteen cancer survivors attended the clinic during 2019- 2020. They reported 25 scars; the mean scar age was 4.2 years (range 6 months to 17 years). They received a median of six ScarWork treatments (range: 0-12). Analysis of PSAQ data showed significant ($p < 0.5-1.0$ points is clinically significant). Patients, in written feedback, reported benefits including improved appearance, texture, mobility, wellbeing and acceptance of scars. No serious adverse events were reported.

Conclusion

A key aim of this evaluation of a pragmatic service was to obtain a first measure of clinical results of ScarWork; prior to this there was only anecdotal evidence. Data collected using PSAQ and MYMOP show positive trends in improving scar-related symptoms. In addition, patients reported a range of improvements on physical, emotional and psychosocial levels, with many feeling better able to accept their scars and the consequences of their cancer treatment. Valuable experience in administering outcome measures, especially PSAQ, was gained. This evaluation helped us to develop a 3-step programme to investigating ScarWork and building up the evidence base for its clinical application, and facilitated the next step which will be a formal research study. In summary, it appears that ScarWork may have potential to help survivors to live well with cancer.

POSTER PRESENTATIONS

Kirsty Baxter

Exploring the lived experience of personal growth in individuals who have experienced weight loss - An Interpretive Phenomenological Analysis study

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Dr Paula Seth, DProf, MSc, MA, PGCE, MBACP(Accred), UKCP (Reg), Northern College of Acupuncture

Background: As a weight loss intervention, a personalised therapeutic approach is complex due to the psychological limitations obesity places on an individual's well-being. Considering how to



enhance a personalised therapeutic approach, furthering first-person perspectives of the positive psychological aspects of weight loss could enhance complementary and alternative therapeutic interventions. This study aimed to describe what it is like for individuals who have experienced personal growth as a consequence of losing weight during a structured weight loss programme and to support a novel evidence-based therapeutic approach to weight loss.

Methods: This qualitative study applied Interpretative Phenomenological Analysis (IPA) in design and analysis. Using a phenomenological lens to explore the phenomenon, semi-structured interviews with a purposive, reasonably homogeneous sample of four female participants, aged between 22-55 years, who shared similar experiences of weight loss of one year or longer who were recruited using a respondent-driven sampling strategy.

Results: Three main themes of the experience of personal growth emerged on the journey of weight loss: (1) Being physically large, the unknown self; (2) evolving from worthlessness to self-awareness and (3) finding self-awareness.

Conclusion: This paper has explored real-life aspects of personal growth as a positive consequence of weight loss. These findings advocate enhancing the therapeutic approach to weight loss by exploring positive psychological aspects pertinent to clients, improving outcomes based on understanding the client's values and strengthening the therapeutic relationship.

Leisa Bellmore, MSc, ST

The experience of Shiatsu for care partners and persons living with dementia: A qualitative pilot study

Leisa Bellmore, MSc, ST; University Health Network

Background

Dementia is a progressive neurological condition that affects over 50 million people worldwide. It results in changes to physical abilities, cognition, behaviour and emotions. It has a great impact on quality of life, not only for those diagnosed, but for their care partners as well. It also impacts the relationship between the two. Non-pharmacological strategies to enhance quality of life and relationships are needed. Shiatsu may enhance care partners' well-being. Using touch through shiatsu may offer a meaningful way for care partners and their partners living with dementia to interact and connect.

Aim

The aim of this study was to explore care partners' experience of using self-shiatsu and shiatsu with their partner living with dementia, and to explore care partners' perceptions of the impact of shiatsu on the quality of their relationship.

Methods

This was a qualitative study, which used an interpretive/descriptive approach. Participants were persons living with dementia and their care partners who attended programs for this population at a facility associated with a large urban health sciences center. Care partners attended a workshop in which they learned self-shiatsu for stress management and a short, simplified shiatsu routine to use with their partner. Semi-structured interviews were conducted two and six weeks post-workshop to capture care partners' experiences and explore their ongoing use of shiatsu.

Findings

Four care partners completed the study. They reported a broad range of experiences with shiatsu, representing four key themes: Enhanced Awareness, Integrating Shiatsu into the Relationship, Barriers and Facilitators and Potential and Possibility. Two care partners found self-shiatsu helpful. Two persons living with dementia were resistant to receiving shiatsu and two care partners felt shiatsu was an additional demand upon their time. Using shiatsu with their partners was a positive experience for only one, who felt it benefited her partner and created closeness and connection between them. None of the participants felt using shiatsu with their partners affected the quality of their relationship.

Conclusions

The findings of this study are inconclusive. Self-shiatsu may be a beneficial self-management technique for some care partners, but not for others. Shiatsu for persons living with dementia may not fit many care partners' routines or lifestyles. For others, however, it may provide a meaningful way to engage and connect.

Andrew Fortuna

Ketone bodies and the brain: Investigating the potential neuroprotective role of ketones in Alzheimers disease by modulating brain energy metabolism.

ANDREW FORTUNA BSc (Hons) Nutritional Science, Nutritional Therapy (dip)

Objectives

Alzheimer's disease (AD) is a progressive neurodegenerative disease characterised by neuronal loss, decline in brain glucose uptake and brain energy metabolism (BEM), reduced memory and cognitive function, and accompanied with varying changes in personality and behaviour. Currently there are no pharmacological therapies proven to be effective at improving or reversing AD. Emerging research suggests ketone bodies may be an alternative therapy in AD by modulating BEM. This Research Project (RP) will investigate the mechanism by which ketones may modulate BEM in AD, with the view that it may help direct future research in to developing personalised nutritional interventions (PNI) based around the Functional Medicine Model (FMM).

Methods

A systematic and replicable search of the literature to investigate the underlying mechanisms of ketones modulating BEM in AD was performed in three tranches, using PubMed as the primary database. A total of 9331 papers were screened and 123 papers read in full to assess the relevance to the research mechanisms based on defined inclusion and exclusion criteria. 55 studies including 15 review, 20 mechanistic (in vitro / animal), and 20 human studies relating to BEM were accepted for review, appraised and critically analysed.

Results

Evidence from in-vitro, animal and human studies, showed that ketones could improve BEM in AD, partly by compensating for the reduced glucose uptake characteristic of healthy aging and AD in animals and humans. However, ketones failed to improve BEM on APOE4+ allele carriers, which could have been as a result of the short duration of studies, lower power and some weakness in the included study designs, which would require more research.

Conclusion

Based on the reviewed evidence, ketones induced via nutritional interventions did appear to have beneficial effects on modulating BEM in-vitro and in both healthy and animals models of AD, by partly recovering brain energy deficits caused by reduce glucose uptake and utilisation as a consequence of the aging process and poor diets. The effects of ketones on BEM were generally positive in humans except for APOE4+ carriers, which would require more research to establish the reasons and to fully establish the evidence base to develop PNI for AD. It remained unknown If the observed benefits of ketones on BEM, could have any effects on cognition which would require longer, more robustly design studies in animals and humans. For the time being, ketone therapy for AD shows great promise.

Elaine Hamilton Grundy

Could consumer research play a role in establishing efficacy in CAM? A study on the benefits of Reiki as reported by Reiki practitioners.

Elaine Hamilton Grundy, The Reiki Centre

Background:

Reiki is a subjective and personal inward journey, encouraging the person to grow, discover their inner life, and rebalance themselves.

Medical studies have their place in a narrow band of research on Reiki, but consumer research explores a wider range of benefits and uncovers the mechanisms of what makes a successful outcome. Consumer research affords more flexibility in recording data in the form of perception and experience.

Study Aim:

1. To quantify evidence on the benefits of Reiki
2. To gather qualitative anecdotal evidence in the form of personal stories
3. To understand the key criteria for successfully utilizing Reiki to provide the maximum benefits.

Survey Methodology:

The survey questionnaire was online from 27 April to 2 June 2020. A total of 1180 responses were collected. The questionnaire measured perceptions of the benefits of Reiki across three areas of wellness: general or lifestyle; physical issues; and mental/emotional measures using a Likert 5-point scale. Respondents were self-selecting Reiki practitioners across a wide range of experience, levels of Reiki training, and countries.

Results:

The most significant benefits were seen around mental/emotional well-being, 87% reported less anger, 86% less anxiety and worry, and 84% more happiness since beginning a Reiki self-practice. Thousands of personal stories supported this with anecdotal evidence of personal empowerment, life balance and transformation.

80% of respondents found they suffered from less colds/flu, 72% saw improvements in headaches/migraines and 69% in muscle cramp/pain. 66% reported improved sleep. As a method for self-help, the results indicated a huge variety of applications.

Self-practice was the key parameter for success, and it appeared cumulative - the more Reiki a respondent did over time, the better the reported results. Significant improvement in overall

wellbeing varied from 26% (respondents doing Reiki 3 hours or less a week with under a year experience) to 70% (respondents doing Reiki 4 hours or more a week with over 10 years of experience)

Conclusion:

Consumer research suggests the benefits of Reiki occur over time and practice. The culmination of results also points to a flaw in medical research studies that often only provide a brief snap shot over very limited Reiki sessions.

It could be argued that consumer research provides a more realistic and holistic approach to the benefits of CAM and should be considered further.

Miranda Harris

A Pilot Study into the Effectiveness of an Internet and Video Consultation Multidisciplinary Programme for Chronic Fatigue Syndrome/Myalgic Encephalomyelitis and Fibromyalgia

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Introduction:

There are currently no disease modifying treatments for chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) or fibromyalgia, and multidisciplinary therapy (MDT) is of interest. The purpose of this study was to evaluate the effectiveness of a three-month Internet MDT in the patients' homes on dietary and lifestyle behaviours, disease impact and symptoms.

Methods:

This was a pilot study conducted between November 2020 and March 2021, and 26 participants were recruited via advertising on UK social media. 18 participants completed the study in non-individualized Internet programme (N=12) and individualized Internet programme and video consultation (N = 6) intervention groups. The Internet programme included modules on nutrition, endocrinology, mental health, lifestyle, relationships and exercise and the individualized group received video consultations with Nutritional Therapists or Peer Counsellors in addition.

Outcome measures included the Revised Fibromyalgia Impact Questionnaire (FIQR), Hospital Anxiety and Depression Anxiety Subscale (HADS-A), the short Food Frequency Questionnaire (FFQ) and a lifestyle questionnaire.

Results:

After three months there were statistically significant improvements in dietary quality (p-value <0.0005), FIQR (p-value <0.014), symptom subscale (p-value < 0.006) and HADS-A (p-value 0.04) and HADS-A (p value > 0.01) than the non-individualized group.

Conclusions:

This pilot study shows improvements in dietary quality, disease impact, symptoms and anxiety in CFS/ME and fibromyalgia might be found through an Internet based MDT; however possible bias exists and randomized controlled trials with a larger sample are required.

Miranda Harris



Nutritional knowledge, attitude and dietary behaviour regarding the role gut bacteria contributes to optimal health

Clare Cutler MSc mBANT, CNHC & Miranda Harris MSc FHEA mBANT CNHC, Senior Lecturer, Nutritional Therapy, School of Allied Health and Community, University of Worcester, UK.

Introduction

Interactions between gut bacteria and the body are modulated by diet and may affect health. This study aims to understand nutritional knowledge, attitude and dietary behaviour (KAB) of UK adults, regarding the role gut bacteria contributes to optimal health, through evaluating KAB relationships, exploring KAB differences between sex, age and education, and developing strategies to improve KAB.

Methods

An observational, cross-sectional quantitative study recruited 126 participants through social media to undertake an online anonymous survey. Data was analysed using non-parametric tests with SPSS® V26.

Results

Statistically significant positive correlations were found between knowledge and behaviour ($r=0.50$, $n=126$, $p<0.001$), knowledge and attitude ($r=0.49$, $n=126$, $p<0.001$), and attitude and behaviour ($r=0.39$, $n=126$, $p<0.001$). A statistically significant difference in nutritional knowledge was found between females ($Md=92$, $n=103$) and males ($Md=86$, $n=23$), $U=1546$, $z=2.29$, $p=0.022$, $r=0.20$. Statistically significant age differences in nutritional knowledge were seen between 18-38 years with 47 years and over ($p=0.033$), and between 18-38 years with 39-46 years ($p=0.001$), and by education between school/college/trade/technical with degree educated ($p=0.026$), and between school/college/trade/technical with postgraduate educated ($p=0.007$). There were no statistically significant differences for dietary behaviour or attitude by sex, age or education.

Conclusions

Findings suggest nutrition knowledge and attitude affect dietary behaviour, and females, those in age groups of 39 years and over, and those with a higher education were associated with higher nutrition knowledge levels. Strategies to improve KAB include promoting gut bacteria roles and their health effects, providing practical ‘how to’ informative material and support with long-term behaviour change.

Dima Ivanova

Mixed Methods Systematic Review of the Literature Base Exploring Working Alliance in the Chiropractic Profession

Dima Ivanova, MSc - University of Southampton

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Jonathan Field, PhD - University of Southampton

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Background: The construct of working alliance has been used to operationalise the patient-clinician relationship. Research evidence from the rehabilitation literature has established an association between the construct and several patient outcomes. The aim of this systematic literature review was to study working alliance in the chiropractic discipline.

Method: This review followed a mixed method systematic review methodology : EBSCO (The Allied and Complementary Medicine Database), EBSCO (MEDLINE), EBSCO PsycINFO, Web of Science Core Collection, Chiro index, and grey literature were searched for quantitative, qualitative, and mixed methods studies on 17th March 2021. Qualitative appraisal was conducted using the Mixed Methods Appraisal Tool, version 2018. The qualitative component was synthesised via thematic synthesis and explored patients'and chiropractors'perceptions of the nature and role of working alliance. The quantitative component was synthesised via narrative synthesis to examine how the construct has been measured in research and what its effect on clinical outcomes and patient satisfaction is. The findings were integrated in the discussion section.

Results: Thirty studies were included . The qualitative component found that both patients and chiropractors consider working alliance as a key factor in the treatment journey. T he findings illustrated that the construct includes the bond between a patient and a chiropractor which is underpinned by trust and attentiveness to patients'needs, values and preferences. Qualitative data also suggested that strong working alliance has the potential to improve patients'adherence to treatment and that it is characterised by ongoing negotiation of expectations about the goals of care and the tasks involved in the treatment plan. The quantitative component highlighted that even though working alliance is relevant to the chiropractic discipline, very few studies have quantitatively measured the construct and its effect.

Conclusion: The findings of this review emphasise the subjective importance of working alliance in the chiropractic clinical encounter. However, there were not enough homogenous studies measuring the effect of working alliance on clinical outcomes and patient satisfaction to conduct a meta-analysis. Future research should focus on evaluating potential direct and mediated effects on patient outcomes.

Dr Anne Jensen,

A Novel Approach to Pain Management using an Emotional-Somatic Release Technique in a Yoga Context

Dr Anne Jensen, MSc, DC, DPhil (PhD) - Central Queensland University, Australia

Ms Judith Hotek, BSc - Private Practice

BACKGROUND

The link between chronic pain, stress, emotion, and the fascial system has become compelling. It is now clear to effectively help those in chronic pain, both physical and mental/emotional aspects of pain must be addressed. Less evident is how, since mindbody approaches (e.g. mindfulness and yoga), show small effect sizes and inconsistent outcomes, compared to traditional pharmaceutical approaches. Correspondingly, many commonly used pain

medications have negative consequences, such as drowsiness, constipation, dependence, and addiction. Consideration of new approaches is warranted.

STUDY AIM

To investigate if a new mindbody intervention should be considered for management of chronic pain.

METHODS

Participants were recruited from a bimonthly 1-hour gentle yoga class. Along with the gentle movements, participants were invited to participate in a new mindbody intervention that involved feeling specific feelings. The instructor guided participants through feeling several emotions, whose goal was to release pain, muscle tension and fascial adhesions. Volunteers completed a 0-10 numerical pain rating scale (NPRS; 0=No pain, 10=Worst pain ever), before and after class. Using a paired sample t-test the differences in NPRS scores were analysed.

RESULTS

In the 12 classes, a total of 96 participants provided NPRS feedback, including 16 males and 80 females (17% males, 83% females). The mean number of participants providing feedback each class was 8 (SD=2.2), representing approximately half of each class. Over the 12 classes, the mean pre-class NPRS was 5.5 (SD=2.3), and the mean post-class NPRS was 2.9 (SD=2.7), which difference reached statistical significance ($p<0.01$). In all 12 classes, the mean NPRS scores were lower after class compared to before class, which reached significance ($p<0.05$) in 10 of the 12 classes..

CONCLUSIONS

These preliminary results suggest that this novel mindbody, emotional-somatic release technique may be useful in lowering subjective pain in those suffering from chronic pain. Limitations of this study include the lack of control group and the inability to blind participants and the instructor. Further research is warranted and should incorporate more comprehensive blinding and a control group. As an example, a control group could participate in only the yoga aspect of the class, while the experimental group would receive the emotional-somatic release intervention as well as the yoga class. Until such a randomised controlled trial is completed, no causation of effect can be established, and therefore, caution is urged when interpreting these results.

Sarah Churchward

"The sessions have been a real lifeline": User experiences and outcomes of integrative cancer support delivered online

Sarah Churchward, Penny Brohn UK, Bristol

Rachel Johnson, Penny Brohn UK, Bristol

Background

Penny Brohn UK (PBUK) is a leading UK charity specialising in helping people live well with the impact of cancer through its programme of integrative advice and support. Due to the COVID-19 pandemic, all in-person services were halted in March 2020; a comprehensive suite of online group sessions were developed. Sessions included integrative doctor support, nutrition information/advice, exercise, relaxation, mindfulness/meditation, and guided practice in a range



of other self-care techniques.

Study Aim

To evaluate the overall acceptability of the online services, including user experiences and self-reported outcomes. To explore changes in people's needs since the pandemic and gauge preferences for online or face-to-face support.

Methods

Quantitative and qualitative data were collected via an online questionnaire. Participants were invited to take part over email; emails were sent to anyone who had attended at least one PBUK online group session. Quantitative data were analysed using descriptive statistics (SPSS V27). Thematic analysis was used to analyse qualitative comments.

Results

Responses were received from 344 online service users (mailing list n=1035; response rate 33%). Respondents were mostly female (91%), White (93%), average age 58 (range 34-93). 91% had been diagnosed with cancer; 52% of these had breast cancer. Most respondents had attended 5-20 online group sessions (42%). All sessions were regarded as 'very' or 'extremely' helpful by at least 50% of respondents, with only 2/12 sessions rated highly by less than 75%. Self-reported outcomes were very positive; 76% said the sessions had improved their overall wellbeing; 58% improved their lifestyle; 52% were more resilient; 51% had improved their use of self-help techniques; 86% were managing their health and wellbeing more effectively. Respondents diagnosed/treated for cancer during 2020 reported significant disruptions to their medical treatment including delayed/cancelled follow-up appointments (21%) and having to attend medical appointments alone (32%). More than half of respondents said their cancer experience was made worse by not being able to engage in normal activities or attend face-to-face support services. 65% said they would like to attend face-to-face PBUK services in future.

Conclusion

Qualitative and quantitative data evidenced the trauma of being diagnosed with/treated for cancer during 2020 and highlights the increasing need for integrative support services. The online services were extremely well received, users reported mostly very positive experiences and improved health/wellbeing outcomes. Penny Brohn UK has since developed a hybrid online/in-person services model and is currently trialling face-to-face Wellbeing Days and Residential Retreats at its National Centre

Tomas Pfeiffer

Alternative Medicine (Cam) In The World - What Is Silenced

Tomas Pfeiffer (Institute for TCIM/CAM, Soukenicka 21, 110 00 Prague 1, Czech Republic)

Background: The professional and general public in the Czech Republic have been receiving incomplete and often biased information on Complementary and Alternative Medicine (CAM). Leading international authorities WHO, Council of Europe, CAMbrella research funded by the European Commission, EUROCAM network, are all in favour of CAM, and recommend further CAM research and integration into mainstream healthcare.

Study Aim: Main objective is to provide a thorough review of the current state of CAM worldwide, so that the evidence-based CAM information could raise awareness of both the



professional and general public, especially in the Czech Republic, but also on international level.

Methods: The investigation was focused on the current state of the CAM research, international legislation including recommendations of leading world authorities, education possibilities, use of CAM by patients, health insurance coverage, and other information related to the development of CAM area outside the Czech Republic.

Results: We have found a large number of scientific evidence supporting safety, efficacy and cost-effectiveness of CAM methods, however a double standard is often used when integrating CAM methods into mainstream healthcare. There is an extensive use of CAM by patients (30-70%) and doctors (40-60%) in developed countries. CAM methods are implemented in study programs of 50.8% of medical faculties in the USA, and 42% in the old member states of EU. CAM is also investigated in many specialized research centres, offered in hospitals, and recommended by leading international authorities, such as WHO, WHA, European Parliament, The Council of Europe, or NATO [1].

Conclusion: This freely available review publication [1] is one of the most comprehensive sources of evidence-based information in the area of complementary medicine. Originally enforced by the poor situation of CAM in the Czech Republic, the review eventually overreached the national framework. It is an interest of not only the Czech Republic, but any country lacking a more diverse, holistic, and patient-centred healthcare system, to pay attention to the international experience, gathered over the past 25 years, during which CAM gradually developed worldwide. We hope that this review might facilitate dialogue with professional medical community and policymakers, and last but not least, provide the general public with essential evidence-based information on the potential benefits of CAM for human health.

[1] Professional Chamber Sanator, Alternative Medicine (CAM) in the World - What is Silenced (2019). [https://www.itcim.org/knihy/CAM/Alternative-Medicine-\(CAM\)-in-the-World.pdf](https://www.itcim.org/knihy/CAM/Alternative-Medicine-(CAM)-in-the-World.pdf) Online; accessed 16-July-2022.

Tomas Pfeiffer

Biotronics Czech spiritual healing method: who seeks Biotronics, why and what they experience, a mixed-method study

Background: Spiritual healing has the potential to offer non-pharmacological, patient-centered, complementary therapy to conventional care, and thus sustainably support the future of the healthcare system. Previous studies show the possible benefits of these therapies on numerous different diagnoses including cancer, with various outcomes such as relaxation, stress relief, pain relief, and overall improved well-being. Although in a limited number, a provision of spiritual healing within conventional care is available in the UK. A study, mapping the demography, health problems, and experiences of clients seeking healing in the UK showed that clients of an average age of 57, mainly women, sought healing for mental health problems and pain.

A unique form of spiritual healing called Biotronics, was started by Josef Zezulka in 1950 and has been practiced for over 72 years. Although it is available in the Czech Republic, it hasn't been appropriately researched yet. However, rich documentation and testimonials of positive healing experiences over the past 40 years of practice collected by the healer Tomas Pfeiffer



might suggest a potential correlation between Biotronics healing and possible beneficial health outcomes for the clients. This spiritual healing method, therefore, deserves the attention of scientific research.

Study Aim: The main aim of the study is to find out who is seeking Biotronics, with what health problems, and get an understanding of the experiences of the clients in the Czech Republic.

Methods: A mixed-method study will be performed over the course of 3 months in the healing center located in Prague, Czech Republic. Forms, asking about the demography of the client, the reason for the healing consultation, and outcomes will be distributed. Both quantitative and qualitative data will be analyzed.

Kritika Pandey

A Pilot Study of community-based Integrative Ayurveda Program in patients with Fibromyalgia

Background: Studies have demonstrated that self-management has the potential to improve the health status and decrease health care utilisation of patients with chronic diseases.

Study Aim: This study was evaluated the hypothesis that an Integrative Ayurveda-based intervention for fibromyalgia (FM) would lead to sustained improvements in health and quality of life, as well as reductions in health care utilisation.

Methods: Twelve female participants in community-based 12-step program for fibromyalgia and chronic fatigue syndrome were retrospectively studied. The group intervention protocol included two components: once-weekly group sessions and one individualized therapy for twelve weeks. The group intervention protocol included two components: once-weekly group sessions and one individualized therapy for twelve weeks.

In group sessions, each week aspect of Ayurveda was introduced: understanding of fibromyalgia, factors associated, diet, lifestyle, daily exercise, sleep, self-help techniques using music, marma, addressing long-term trauma, emotional, mental health issues, and finally, moving forward as a community. Second, each patient participated in an hour-long personalized yoga therapy session supervised by Ayurveda practitioners. Self-administered questionnaires assessed self-efficacy, pain, overall health, quality of life, and health care utilization at baseline and 3 months.

Results : There were no withdrawals. Self-efficacy and quality of life ratings increased significantly ($P=0.000$). Overall, pain scores decreased by 52 %. The utilization of health care decreased by 82 %.

Conclusion: A community-based self-managed program led to clinically significant improvements in quality-of-life measures, pain, and health care utilisation. Typically, such improvements do not naturally occur in FM patients, indicating that Integrative Ayurveda deserves further consideration as a treatment for FM.

Jo Sorotos

An evaluation of trial design and methodology within asthma and acupuncture randomised controlled trials: a critical literature review

Background:

Asthma is a significant chronic condition in terms of prevalence, morbidity and mortality, as well as healthcare and economic burden (GINA, 2021; Simpson and Sheikh, 2010). It accounts for 6.3million primary care consultations, 60,000 hospital admissions and 200,000 bed days/year (Mukherjee et al., 2016; NICE, 2021).

Mild/moderate asthma is often well-controlled, initially with short-acting β_2 agonists (SABA), and inhaled corticosteroids (ICS) (Chung et al, 2014). However, medication compliance is frequently problematic, commonly related to perceived or real side effects (Martinez and Vercelli, 2013; Anthonisen, 2011), as well as severe asthma being poorly managed (Chung et al., 2014). Many asthma patients use acupuncture (Slader et al., 2006; Passalacqua et al., 2005) and empirically may find benefit (Medici et al., 2004). However, Cochrane reviews of asthma and acupuncture trials found limited quantity and variable methodological quality of research, resulting in inconclusive evidence regarding efficacy. There was a noted ongoing issue in relation to trial comparator approaches (Linde, Jobst and Panton, 2000; McCarney et al., 2004). Therefore, due to a lack of high-quality trials, there is a lack of guidance for patients who are seeking additional treatment.

Study aim:

To evaluate the trial design and methodology in general, and comparator approaches specifically, within asthma and acupuncture randomised controlled trials since the last Cochrane Review update.

Methods:

A literature selection process was carried out using defined search queries in five databases. Further specified selection criteria were applied to the results. The databases were: The Cochrane Library; Web of Science; Medline; AMED; and the University of Westminster Library. The selected trials were analysed using the CONSORT framework in conjunction with the STRICTA extension.

Results:

Six randomised controlled trials were retrieved for review. They exhibited a high level of heterogeneity in trial design and methodological quality, as well as specific study focus. Condition categorisation and medication use is not standardised universally. Comparator issues are still problematic and two of these trials could arguably be challenged as being controlled'trials.

Conclusions:

The quantity of asthma and acupuncture trials remains limited, and those published provide variable quality of evidence. Their heterogeneity compromises meaningful meta-analysis. Both sham acupuncture and other controls remain problematic. The Cochrane reviews'recommendations are yet to be widely adhered to. However, there are some aspects of robust and innovative trial design amongst the reviewed trials, most notably in the pilot study by Choi et al. (2010).

Information for patients remains limited and contradictory.

Nicola Wardhaugh

Participants' perception of effects of auricular acupuncture on people affected by the Grenfell Tower Fire: a cross-sectional survey

Background

72 people died as a result of the Grenfell Tower Fire in June 2017 and many others experienced bereavement, displacement and trauma. A volunteer clinic was established to treat people affected by the fire using auricular acupuncture. The clinic had a need to demonstrate the clinic's impacts in order to secure future funding.

Aims & Objectives

The study aimed to investigate perceived effects of auricular acupuncture on people affected by the Grenfell Tower Fire who attended the clinic for treatment. The main objective was to design and conduct a small-scale, cross-sectional survey to investigate participants' perception of the effects of auricular acupuncture.

Methods

A qualitative cross-sectional survey design was used to explore participant perceptions of auricular acupuncture effects. Convenience sampling identified 13 participants who completed face-to-face semi-structured interviews. Interviews were audio recorded, transcribed verbatim and analysed using reflexive thematic analysis (Braun & Clarke, 2019).

Findings

Besides symptomatic improvements, patients reported wider Whole Person Effects relating to Changes in State and Changes in Personal and Social Identity following acupuncture treatment. Several patients reported non-positive effects. The practice of reflexivity highlighted key influences which shaped the research relating to positionality and vicarious trauma.

Conclusion

The unique contribution of this study concerns its use of reflexivity to highlight subjective influences which shaped the research including vicarious trauma. When conducting research with HAS-affected populations, careful examination of factors relating to vicarious trauma at the planning stage and incorporating reflexivity throughout the study are advised to safeguard participants and researchers while achieving rigour. The benefits reported by patients following treatment provide a basis from which to conduct additional research examining the strength and direction of association between acupuncture and its effects in this population. Further studies with larger numbers of participants adopting a longitudinal approach are required