## **Editorial**

## **Cancer- and Chemotherapy-Related Symptoms and the Use of Complementary and Alternative Medicine**

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lthough chemotherapy has significantly improved overall survival, patients experience a wide range of physical and psychological symptoms that impact their quality of life. Symptoms seldom occur in isolation. Chemotherapy-induced hair loss remains greatly feared, with a negative impact on the well-being of many cancer patients. Cancer- and chemotherapy-induced poor appetite is usually the result of taste changes, mouth sores, nausea and vomiting, increased satiety, medication side effects, pain, fatigue, depressed mood, and anxiety. The associated decline in nutritional intake is often associated with progressive weight loss in cancer cachexia. Mouth sores, associated pain, and poor nutrition can place immunocompromised patients at an increased risk for infection. Conversely, some of the patients may be suffering from chemotherapy-related fluid retention edema which may lead to significant weight gain during chemotherapy. Fatigue was the most upsetting and unmanageable symptom among frequently occurring side effects during treatment. Moreover, fatigue is a hidden source of other upsetting

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symptoms. It seems possible that chemotherapy-related fatigue was significantly more intense, incapacitating, distressing, or depressing. Fatigue, sleep disruption, pain, and depressed mood are positively interrelated and co-occur, exacerbating one another and decreasing the quality of life of a patient during chemotherapy. These multiple concurrent physical symptoms and psychological distress during chemotherapy are often very debilitating in nature, resulting in significant interference in daily life, consequently affecting patients' ability to receive prescribed treatments. The impact of these multiple symptoms on the patient can be collectively described as "symptom burden," a concept that includes the occurring of symptoms, the level of distress, and manageability of the symptom experienced. Therefore, symptom burden is a distinct concept in symptom experience that contributes to an understanding of patients' physiological and psychological functioning during the diagnosis and treatment of cancer.<sup>[1]</sup>

Despite the fact that patients' symptoms are managed through established conventional medical treatment,

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Cite this article as: Chui PL. Cancer- and Chemotherapy-Related Symptoms and the Use of Complementary and Alternative Medicine. Asia Pac J Oncol Nurs 2019;6:4-6. patients often use complementary and alternative medicine (CAM) in conjunction with conventional medical treatment for symptom relief.<sup>[2,3]</sup> This could be as a result of poor symptom management or the popularity of CAM due to media publicity. According to the National Center for Complementary and Integrative Health, these CAM approaches are further grouped into natural products (NPs), mind-body practices (MBPs), and traditional medicine. NPs are often used to reduce physical symptoms and side effects while MBPs used to reduce psychological distress. The effective use of CAM may relieve physical symptoms or psychological distress as well as offer patients with cancer a feeling of control over their illness, which would, in turn, empower them and encourage involvement in their own care. However, the use of CAM is controversial because the perceived benefit of using CAM concurrently with chemotherapy is debatable. It is very common patients consume some self-selected form of dietary supplements and herbal medicine to empower themselves and an attempt to take control of their health as well as to increase their quality of life. The additional use of NPs may help patients to maintain their energy balance to better tolerate activities of daily living. Consequently, less depressed mood may be reported. Moreover, some NPs have been claimed to be able to cure cancer. This false hope is misleading for patients but is likely to help patients feel better and to lower their depressed mood at least temporarily. The consumption of NPs might be attributable to the extensive availability of over-the-counter NPs, as publicised by the media and direct sales products recommended by friends or relatives. Patients who consumed NPs may be at risk of drug-herb interactions that may lead to febrile neutropenia, chemotherapy-dose reduction, or chemotherapy-dose delay for subsequent chemotherapy. Therefore, the consumption of NPs should proceed with caution because the potential harm may outweigh its putative benefits. Additional research and policies are needed to guide decisions on the use of evidence-based NPs for cancer- and chemotherapy-related symptoms.

As MBPs are a wide range of nonpharmacological and noningested therapies used to harmonize communication between the mind and body to maintain health, this is rather encouraging as some of these MBPs are relatively simple to learn, inexpensive and can easily be integrated into daily life. Although far from conclusive, the perceived helpfulness of MBPs perhaps ought to be recommended as a supportive therapy to increase patients' sense of well-being and wholeness help in healing the body's inner strength and reducing stress, even though they may feel healed but not cured. Further interventional studies with greater statistical power should be pursued to build a larger body of evidence with more substantive conclusions. The use of traditional medicine, specifically traditional healers, is likely due to strong cultural beliefs that it may provide a cure for many diseases. The belief that traditional healer could be used to treat cancer is an issue of concern for surgeons and oncologist as the survival of patients with cancer is dependent on the early detection and early treatment.

In an era where patients attempt to have a more proactive role in relation to their health and well-being, it is important that patients receive unbiased information on CAM use during chemotherapy. Patients should be informed of the potential benefits and contraindications as well as the possible adverse effects of CAM use for managing their cancer- and chemotherapy-related symptoms. An open discussion on the necessity of CAM use and its related misleading information is essential to avoid patients resorting to unnecessary CAM during chemotherapy, a vulnerable period when patients are desperate for relief from burdensome side effects/symptoms.

Through effective communication between patients and health-care workers, potentially hazardous interactions between CAM use and conventional cancer therapy could be kept to a minimum. Moreover, patients should be cautioned that much of the information related to CAM available on websites is distorted and deceptive. Many articles were promotional and/or misleading in depicting CAM as potentially curative, as this encouraged patients to use CAM in the hope of a cure. Consequently, this leads to patients being unable to make sound decisions on which CAM to use or avoid and to become users of multiple CAM approaches. It is important to help guide the patients to allow them to distinguish between quackery and evidenced-based CAM<sup>[4,5]</sup> as well as to discern between "complementary" and "alternative" therapy. Ultimately, the patients should be enlightened that conventional medicine cannot be replaced by CAM because questions related to the safety and benefits of CAM remain unanswered. The role of CAM should be mainly supportive and used to manage the side effects and symptoms of cancer treatment to better tolerate prescribed conventional medical treatment. A paradigm shift which integrates conventional medicine and evidence-based CAM is inevitable. Therefore, educating patients and health-care workers about CAM use is imperative. The emerging goals of CAM education for health professionals are to equip them with the following competencies: to know how to ask patients about their use of traditional medicine and CAM; to be familiar with the most commonly used forms of traditional medicine and CAM so they can discuss these practices with their patients; to be able to refer interested patients to reliable sources of information; and to know how to obtain reliable information on the safety and efficacy of traditional medicine and CAM.<sup>[6]</sup> This will enable health-care workers to answer patients' queries on CAM use and guide their patients in seeking additional information or referrals for a particular therapy. Patients would ideally receive the maximum benefits from both conventional medicine and CAM.

## References

- Gapstur RL. Symptom burden: A concept analysis and implications for oncology nurses. Oncol Nurs Forum 2007;34:673-80.
- 2. Chui PL, Abdullah KL, Wong LP, Taib NA. Complementary and alternative medicine use and symptom burden in women

undergoing chemotherapy for breast cancer in Malaysia. Cancer Nurs 2018;41:189-99.

- 3. Hwang JH, Kim WY, Ahmed M, Choi S, Kim J, Han DW, et al. The use of complementary and alternative medicine by Korean breast cancer women: Is it associated with severity of symptoms? Evid Based Complement Alternat Med 2015;2015:182475.
- 4. Williams JT. Credible complementary and alternative medicine websites. J Adv Pract Oncol 2013;4:123-4.
- 5. NCCIH. Finding and Evaluating Online Resources; 2018. Available from: https://www.nccih.nih.gov/health/ webresources. [Last accessed on 2018 Jul 25].
- 6. Pearson NJ, Chesney MA. The CAM education program of the national center for complementary and alternative medicine: An overview. Acad Med 2007;82:921-6.