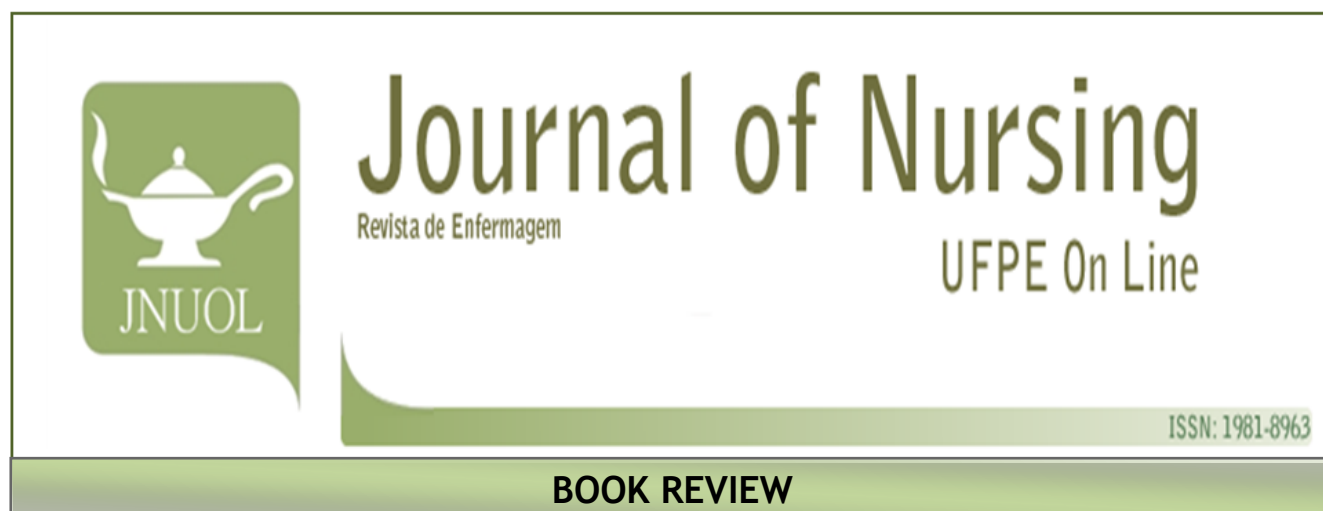




NURSING AND COMPLEMENTARY PRACTICES IN HEALTH

ENFERMAGEM E AS PRÁTICAS COMPLEMENTARES EM SAÚDE

ENFERMERÍA Y PRÁCTICAS COMPLEMENTARIAS EN SALUD

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Nursing is one of the professions that most embraces different therapeutic techniques. In the field of Integrative and Complementary Practices (ICP), the Brazilian Federal Nursing Council (COFEN) allows nurses to apply acupuncture, medicinal herbs, iridology, reflexology, chiropractic, massage therapy and vital expressive movement, among others.¹

In order to laud these skills the book *Enfermagem e as Práticas Complementares em Saúde*² presents a compilation of 14 articles which cover a set of integrative therapeutic techniques, written by different nurses all belonging to the Study Group for Alternative or Complementary Practices in Health, linked to the University of São Paulo.

In the text of 227 pages the authors, all women, circumscribe their fields of work and develop themes like acupuncture, anthroposophical medicine, aromatherapy, auriculotherapy, herbs, iridology, massage, meditation, music, reflexology, reiki, floral therapy and therapeutic touch.

The first chapter titled "Complementary Practices and Nursing" displays a good synthesis of the historical trajectory of these practices, offering explanations on terminology, characteristics, fundamentals, the regulating legislation of the COFEN, theories in nursing on the practices, the assistance of nursing in the field and research.

Interestingly, in COFEN's regulation #004/95 dated 18th of July 1995 there already was a warrant for nurses to specialize in acupuncture and medicinal herbs, but it would not be until Resolution COFEN #197, in

1997, that the comprehensive usage of these practices by nurses was approved.

Each chapter follows a pattern, *grosso modo*, presenting the following subtitles on the respective theme: concept and history; most known purposes; principles that substantiate the practice; usage in nursing; research and bibliographic references.

Following the unfolding of the book, we present a résumé of the usage of ICP.

Traditional Chinese Medicine (TCM) - Acupuncture, moxibustion

Applications: to evaluate former conditions of energetic imbalance; risk diagnosis in nursing; controlling signs and symptoms which don't yet constitute grave illnesses: non-infectious diarrhea; electrolytic imbalance; vomit control; diminishing secondary effects related to drug treatments; constipation; anxiety control; improvement of stress; risk of solitude; lack of energy; appetite balance; improvement of the capacity of digestion; absorption and elimination; treating urination disorders; insomnia; neuromuscular pain; disturbed energy field; anxiety; chronic confusion; impaired memory; sexual dysfunction; fear; bouts of cholera; ire; feelings of impotence; weeping and sadness; tiredness; fatigue; blood circulation; edemas; wound healing.

♦ Anthroposophy

Applications: to care and assist comprehensively the human being approaching him, on one hand, from a quadruple perspective: physical, etheric and astral bodies, and the organization of the self; and on the other, from a triple perspective

(neurosensorial, metabolic, interrelated through the rhythmic); use of the skin for the absorption of different medicinal plant, mineral and animal principles, and dry, hot, humid and cold therapy to rebalance the calorie body, vitality, to stimulate certain organs; use of compresses; poultices; baths; clay treatments; friction techniques; topical application of tinctures; medicinal herbs or essential oils, wraps and bandages; to help the patient perceive harmony and be conscious of his individuality.

◆ Aromatherapy:

Applications: to assist the patient in his physical and emotional imbalance, applying essential oils to a variety of symptoms: disturbed adaptation, anxiety, low self-esteem, constipation; hopelessness; airway clearance; acute and chronic pain; fatigue; hyperthermia; hypothermia; disturbed skin and tissue integrity; impaired social interaction; fear; impaired memory; nausea; breathing problems; tissue perfusion; immunological inefficiency; urine retention; chronic sadness; disturbed spontaneous ventilation.

◆ Auriculotherapy

Applications: the illnesses are not evaluated, but instead the sick individual. Diagnosis of risk; health promotion; well-being; nutrition; elimination and exchange; activity and rest; perception and cognition; coping/tolerance to distress, etc. Examples: lack of energy; difficulty to fall asleep; anxiety; depression; physical discomfort; stress; nervousness; irritability; suffering; apprehension; impaired attention; unrest; heightening of tension.

◆ Medicinal herbs

Applications: various bibliographic references about the usage in primary care are mentioned covering different age groups, respecting creeds, values, life styles and care for the people.

◆ Iridology

Applications: diagnosis can reveal compromising signals and sick organs. Examples: an iris with an allergy lining indicates allergic tendencies and suggests a more cautious care when taking medications; in hypertensive patients the “sodium and cholesterol ring” assumes more serious proportions; in surgical patients, signals in the iris like venous return, lymphatic rosary and phlegm suggest and need for ambulation. Moreover, it is possible to identify certain behaviors with the biotypes: flower, gem, chain and spearhead.

◆ Massage

Applications: nursing diagnosis with indications for the use of massage and acupressure as the intervention: disturbed tissue integrity; sleep privation; control of pressure in certain parts of the body; intrapartum care; impaired physical mobility; skin care; care with lesions; fatigue; calming techniques; anxiety reduction; pain control.

◆ Meditation

Applications: taking the patient to listen to singing, to look at images of nature; calming, taking the focus off the illness; easing pain; helping the patient to better obtain the fullness of his being; to approach the full healing in the physical, social, psychic and spiritual dimensions. Helps to liberate oneself of fear and travel to the other shore with more power, courage, etherealness and serenity.

◆ Music therapy

Applications: disturbed energy field; acute and chronic pain; fatigue; delayed surgical recovery; intolerance to activity; impaired sensorial visual perception; dysfunctional ventilatory weaning response; provision for improved sleep; disturbed sleep pattern and sleep privation; anxiety; social isolation; fear; sense of regret in advance; stress syndrome due to change; rape trauma syndrome; deficient recreation activities; decisive conflicts; chronic confusion; predisposition for increased childish behavior, impaired thinking processes; syndrome of impaired interpretation of environment; spiritual anguish; risk of spiritual anguish; anxiety related to death; hopelessness; increased predisposition for well-being and risk of spiritual suffering.

◆ Reflexology

Applications: to provide well-being to patients; disturbed energy field; acute and chronic pain; impaired comfort; nausea; insomnia; fatigue; anxiety; dysfunctional gastrointestinal motility; respiratory disorders; usage for pregnant women with preeclampsia; among others.

◆ Reiki

Applications: relaxing; diminish anxiety and pain; diminish secondary effects of the more aggressive treatments; disturbed energy field; insomnia; sleep privation; fatigue; overburdened stress; impaired comfort; nausea; dysfunctional gastrointestinal motility; hopelessness; feeling of impotence; ineffective coping; fear; regret; impaired individual resilience; among others.

◆ Flower Therapy

Applications: anxiety; chronic low self esteem; disturbed energy field; conflicting decisions; predisposition for increased decision-making; hopelessness; pain; ineffective coping; overburdened stress; fatigue; insomnia; fear; chronic sadness.

◆ Therapeutic Touch

Applications: disturbed energy field; to teach husbands to apply the therapy to their pregnant wives; in the operating room; in psychiatric centers; hospitalized children; terminally ill patients (with the purpose of easing pain and providing a truce to anxiety and turmoil of sleepless nights); women receiving chemotherapy.

The book is both the consolidation of the integrative practices in nursing and a call into action to young nurses in training, who are interested in general therapeutic techniques, not only the ones included in the Brazilian Policy for Integrative and Complementary Practices.⁴

Furthermore, we would like to draw attention to an important synchronicity: in 2010 the first North American book on integrative oncology in nursing³ was launched by the *Oncology Nursing Society*, of which a review was published in this journal in vol. 7, #6 (2013).

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