

Predictors of Use of Complementary and Alternative Therapies Among Patients With Cancer

Judith M. Fouladbakhsh, MSN, APRN, BC, AHN-C, CHTP, Manfred Stommel, PhD, Barbara A. Given, RN, PhD, FAAN, and Charles W. Given, PhD

Purpose/Objectives: To determine predictors of use of complementary and alternative medicine (CAM) therapies among patients with cancer.

Design: Secondary analysis of two federally funded panel studies.

Setting: Urban and rural communities in the midwestern United States.

Sample: Patients with lung, breast, colon, or prostate cancer (N = 968) were interviewed at two points in time. 97% received conventional cancer treatment, and 30% used CAM. The sample was divided evenly between men and women, who ranged in age from 28–98; the majority was older than 60.

Methods: Data from a patient self-administered questionnaire were used to determine CAM users. Responses indicated use of herbs and vitamins, spiritual healing, relaxation, massage, acupuncture, energy healing, hypnosis, therapeutic spas, lifestyle diets, audio or videotapes, medication wraps, and osteopathic, homeopathic, and chiropractic treatment.

Main Research Variables: Dependent variable for analysis was use or nonuse of any of the identified CAM therapies at time of interviews. Independent variables fell into the following categories: (a) predisposing (e.g., gender, age, race, education, marital status), (b) enabling (e.g., income, health insurance status, caregiver presence, geographic location), and (c) need (e.g., cancer stage, site, symptoms, treatment, perceived health need).

Findings: Significant predictors of CAM use were gender, marital status, cancer stage, cancer treatment, and number of severe symptoms experienced.

Conclusions: Patients with cancer are using CAM while undergoing conventional cancer treatment.

Implications for Nursing: Nurses need to assess for CAM use, advocate for protocols and guidelines for routine assessment, increase knowledge of CAM, and examine coordination of services between conventional medicine and CAM to maximize positive patient outcomes.

The use of complementary and alternative medicine (CAM) therapies has increased dramatically since the 1990s in the United States and other industrialized countries around the world, in general populations and among those with cancer (Astin, 1998; Eisenberg et al., 1998; Ernst & Cassileth, 1998; Kessler et al., 2001; World Health Organization [WHO], 2002). Population studies have indicated that CAM therapy use ranges from 42%–75% in the United States (Barnes, Powell-Griner, McFann, & Nahin, 2004; Eisenberg et al.), with visits to CAM practitioners exceeding total visits to primary care physicians and out-of-pocket expenditures estimated at more than \$34 billion. The percentage of people using CAM therapies is estimated to be 48% in Australia, 70% in Canada, 38% in Belgium, and 75% in France (WHO), reinforcing the perception of

Key Points . . .

- ▶ The use of complementary and alternative medicine (CAM) therapies continues to increase in general populations and among those with cancer. It is important to understand the factors that predict use of these nonconventional methods of care and symptom management.
- ▶ In our study of patients with lung, breast, colon, or prostate cancer, nearly 30% used CAM therapies. The two most frequently used CAM therapies were herbal and vitamin supplements and spiritual healing.
- ▶ Factors that predict CAM use include gender, marital status, cancer stage, cancer treatment, and number of severe symptoms.
- ▶ To promote comprehensive quality care, nurses should assess for CAM use and increase their understanding of which CAM therapies patients are using and why.

a secular shift in attitudes toward healthcare services and health-seeking behavior.

Data from a nationally representative sample of adult U.S. residents revealed that 75% have used CAM at some time in their lives for health reasons, with 62% using CAM in the preceding 12 months (Barnes et al., 2004). CAM therapies used most frequently include personal prayer (43%), prayer



Judith M. Fouladbakhsh, MSN, APRN, BC, AHN-C, CHTP, is a doctoral candidate, Manfred Stommel, PhD, is an associate professor, Barbara A. Given, RN, PhD, FAAN, is a university distinguished professor, all in the College of Nursing, and Charles W. Given, PhD, is the associate chair for research and faculty in the Department of Family Practice, all at Michigan State University in East Lansing. This research was supported

by the following grants on which Barbara A. Given was principal investigator: #RO1 NRCA01915, "Family Home Care for Cancer—A Community-Based Model," funded by the National Institute for Nursing Research and the National Cancer Institute, and #RO1 CA56338, "Rural Partnership Linkage for Cancer Care," funded by the National Cancer Institute. This article received the 2005 Oncology Nursing Society Excellence in Cancer Nursing Research Award, supported by Schering-Plough Oncology.

Digital Object Identifier: 10.1188/05.ONF.1115-1122