

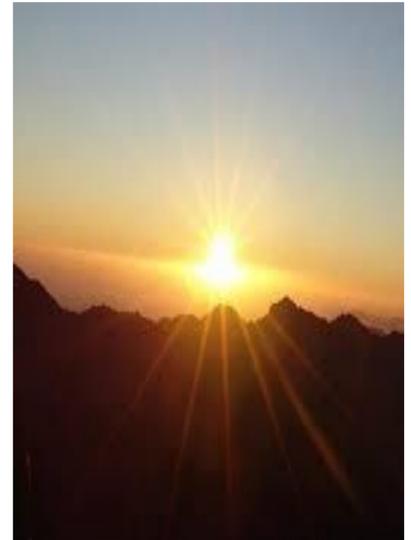
USE OF COMPLEMENTARY AND ALTERNATIVE MEDICINE IN PATIENTS UNDERGOING HEMODIALYSIS



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Backgrounds

Patients with chronic renal kidney apply to complementary and alternative medicine (CAM) for many reasons although potential for harm exists. Nephrotoxic effect of several CAM therapies used in patients with renal impairment could disturb hemodynamics by reducing the glomerular filtration rate. When patients using this method, they are unable to predict what might happening possible harmful effects and commonly they do not share the methods they use to with healthcare team.

Aim

This study aims to evaluate the prevalence and associated factors for the use of complementary and alternative medicine in patients undergoing hemodialysis.

Method

This study used a cross-sectional, correlational descriptive design. The study included a convenience sample of 268 patients diagnosed with ESRD at HD centers in Sivas, Turkey. Subjects were excluded from the study if they were younger than 18 years, had a diagnosis of major psychiatric disorders or cerebrovascular diseases that affect cognitive ability. The data were evaluated by Pearson's chi-square test and Fisher's exact test.

Data were collected through interviews. Participants were assessed using Personal Information Form (PIF), Complementary and Alternative Medicine Methods Form (CAMMF).

PIF : It consisted of 15 questions, eight of which were related to patient demographics, seven regarding health and clinical characteristics of hemodialysis patients.

CAMMF: Data were collected about the use of specific CAM modalities. These modalities were chosen following a literature review, and they represent the modalities most frequently reported in previous studies undertaken in Turkey and internationally. Classification of the CAM categories was constructed based on CAM classification of the National Center for Complementary and Alternative Medicine (NCCAM), where CAM therapies are classified as follows: (1) alternative and medical systems (AMS; acupuncture, homeopathy); (2) mindbody interventions (MBI; relaxation techniques, imagery, spiritual healing/prayer, biofeedback, hypnosis); (3) biologically based therapies (BBT; herbal therapy, dietary supplements); (4) manipulative and bodybased methods (MBBM; massage therapy, exercise, chiropractic, or osteopathy); and (5) energy therapies (ET ; energy healing, reiki).

Ethical considerations

The study was approved by the Ethics Committee of Cumhuriyet University and informed consent was obtained from the study patients.

Results

It was found that 46.2 % (124 patients) of the hemodialysis patients used complementary medicine methods. The mean age of patients was 51,2 ± 14,5 years and 57.3 % men and most of these patients were married (82.3%) and unemployed (42.7 %). Herbal and natural products were the most commonly used type of CAM (61.3 %), followed by mind and body procedures (28.2 %) (Table1, Figure 1).

The most used herbal products were garlic, parsley and stinging nettle (Figure 2).

On the other hand, CAM users were more likely to be females, married, have higher income; ≤ 5 years illness duration; and lower education.

Table 1: Prevalence of CAM modalities in patients undergoing HD (n:124)

CAM modality	n (%)
Alternative medical systems (homeopathy)	3 (2.42)
Manipulation and body-based practices (massage therapy, exercise)	10 (8.06)
Biologically based products (Herbal products)	76 (61.29)
Mind-body practices (Prayer)	35 (28.23)

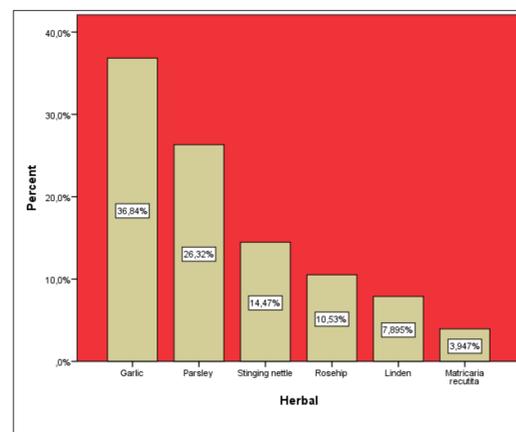
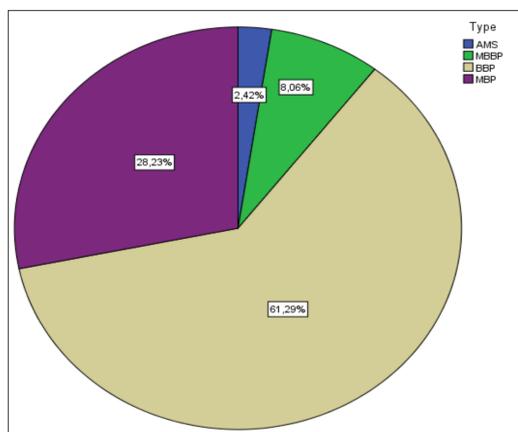


Figure 1: Prevalence of CAM modalities in patients undergoing HD (n:124)

AMS:Alternative and medical systems (homeopathy),MBI: mind body Interventions (Prayer), BBT: biologically based therapies (Herbal products), MBBM: manipulative and bodybased methods (massage therapy, exercise).

Figure 2: The most frequently used herbal products in patients undergoing HD (n = 76)

Conclusions: CAM is highly prevalent among HD patients. Some of these practices are potentially harmful and may affect patient compliance to modern medicine. Physicians commonly ignore to inquire about these practices, which frequently reflect patient frustration with modern medicine efficacy and/or price.

Relevance to clinical practice: Health care personnel should learn more about CAM methods in order to avoid unwanted situations that could develop after the application of CAM methods. When patients using this method, they are unable to predict what might happening possible harmful effects and commonly they do not share the methods they use to with healthcare team. Patients should be informed correctly and scientifically about these methods to avoid harmful and unnecessary uses.

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