

This material is protected by U.S. copyright law. To purchase quantity reprints, e-mail reprints@ons.org. For permission to reproduce multiple copies, e-mail pubpermissions@ons.org.

Complementary and Alternative Medicine Used by Pediatric Patients With Cancer in Western Turkey

Rabia E. Genc, PhD, RN, Selmin Senol, PhD, Ayse S. Turgay, PhD, and Mehmet Kantar, MD

Complementary and alternative medicine (CAM) encompasses a wide range of approaches, including herbal medicine, manual healing techniques, traditional therapies, and mind-body interventions (Gozum, Tezel, & Koç, 2003). The National Center for Complementary and Alternative Medicine (NCCAM, 2007) in the United States defines CAM as a group of diverse medical and healthcare systems, practices, and products that are not presently considered to be part of conventional medicine. NCCAM has developed five categories to classify CAM: alternative medical systems, mind-body interventions, biologic-based therapies, manipulative and body-based methods, and energy therapies.

CAM is widely used throughout the world to treat a variety of illnesses and to maintain health. Ernst and Cassileth (1998) examined data from 13 countries and reported that the incidence of CAM use in adults with cancer was 7%–64%. In an Australian study conducted by Smith and Eckert (2006), the use of CAM in children was 164 (18%) of 911 children with various illnesses.

Children diagnosed with cancer have to cope with many disease-related and treatment-related symptoms. Studies conducted in countries worldwide have reported that 31%–84% of pediatric patients with cancer use CAM (Arush et al., 2006; Bold & Leis, 2001; Fernandez, Stutzer, MacWilliam, & Fryer, 1998; Fletcher & Clarke, 2004; Friedman et al., 1997; Gagnon & Recklist, 2003; Grootenhuis, Last, de Graaf-Nijkerk, & van der Wel, 1998; Kelly et al., 2000; Langler, Spix, Gottschling, Graf, & Kaatsch, 2005; Martel et al., 2005; McCurdy, Spangler, Wofford, Chauvenet, & McLean, 2003; Molassiotis & Cubbin, 2004; Neuhouser et al., 2001; Yeh, Tsai, Li, Lee, & Yang, 2000). Reasons that CAM is used in pediatric patients with cancer include improving children's general health (Kelly et al.; Molassiotis & Cubbin; Yeh et al.), treating cancer and coping with the side effects of treatment (Molassiotis & Cubbin; Yeh et al.), religious or other beliefs (Friedman et al.), improving the immune

Purpose/Objectives: To determine the extent of complementary and alternative medicine (CAM) use, the types of therapies employed, and the reasons for choosing those therapies.

Design: Descriptive type, cross-sectional.

Setting: Pediatric oncology department in western Turkey.

Sample: 112 children receiving or completing treatment for cancer.

Methods: Parents of 112 children completed a questionnaire regarding CAM use. Analyses included examining correlations between CAM use and demographic variables.

Main Research Variables: CAM use and demographic variables.

Findings: 77% of the patients used one or more type of CAM, with herb use being the most common.

Conclusions: About 75% of parents used CAM for their children. However, about 25% sought discussion with the physician about the CAM they were using.

Implications for Nursing: Nurses should approach their patients without prejudice, gather information about the various CAM techniques, and share this knowledge with their patients.

system, and preventing the recurrence of cancer (Molassiotis & Cubbin).

Studies that have examined the extent of CAM use in adult patients with cancer in Turkey have reported an increase of CAM use in the past few years. According to data from 2001–2005, the incidence of CAM use in adults with cancer was reported to be 39%–61% (Algier, Hanoglu, Ozden, & Kara, 2005; Ceylan, Hamzaoglu, Komurcu, Beyan, & Yalcin, 2002; Gozum et al., 2003; Isikhan et al., 2003; Samur, Bozcuk, Kara, & Savas, 2001). Although many studies have been conducted in Turkey for adults with cancer, very few have looked at pediatric patients with cancer. To date, only two (Gozum, Arikan, & Büyükavci, 2007; Karadeniz, Pinarli, Oluz, Gürsel, & Canter, 2007) have been