

Naturopathic Approach to End- of- Life Care

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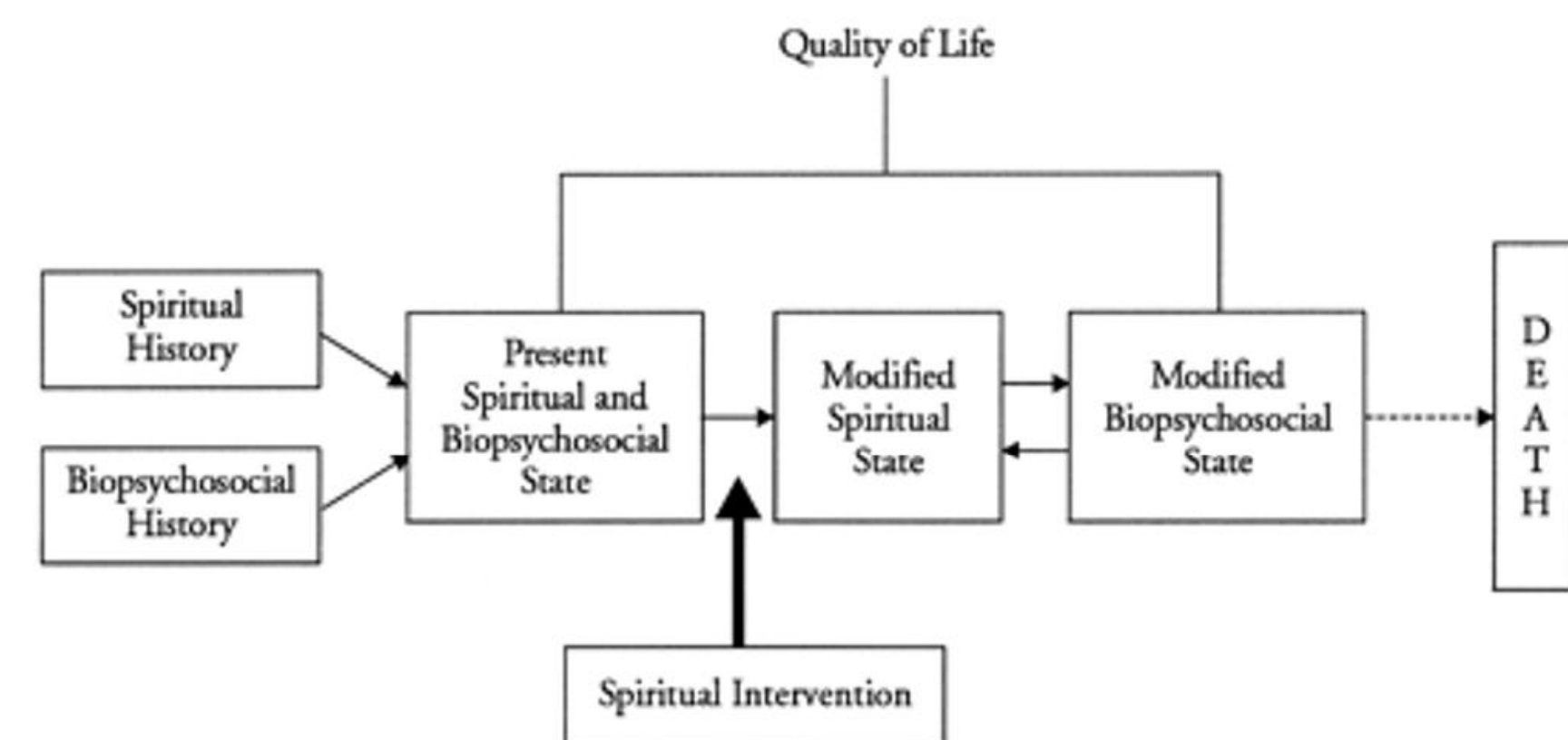
OVERVIEW

Defining End- of- Life Care:

- End –of- life care care is for patients with life-threatening diseases, with a life expectancy of 6 to 12 months.
- The aim is to ensure a peaceful, comfortable, and dignified passing.
- It tackles physical discomforts, as well as psychosocial and spiritual issues.
- As the disease progresses, the usage of health services increases.

(Lai et al. 2018)

The biopsychosocial-spiritual model of the care of dying persons:



Extracted from Figure 2, (Sulmasy 2002)

Principles of Naturopathic Medicine:

- The Healing Power of Nature – Naturopathic medicine recognizes the body's natural healing ability, and trusts that the body has the innate wisdom and intelligence to heal itself if given the proper guidance and tools.
- Identify and Treat the Causes– NDs attempt to identify and treat the underlying cause of illness, rather than focusing on individual presenting symptoms.
- First Do No Harm) – NDs begin with minimal interventions and proceed to higher level interventions only as determined necessary.
- Doctor as Teacher – NDs educate patients, involve them in the healing process, and emphasize the importance of the doctor-patient relationship.
- Treat the Whole Person – Naturopathic medicine considers all aspects of an individual's health including physical, mental, emotional, genetic, environmental, social, and spiritual factors.
- Prevention – Naturopathic medicine emphasizes optimal wellness and the prevention of disease.

(Gutknecht and Fleming,2010)

Naturopathic Therapeutic Order:

- 1) Establish the conditions for health
 - Identify and remove disturbing factors
 - Institute a more healthful regimen
- 2) Stimulate the healing power of nature (vis medicatrix naturae): the self-healing processes
- 3) Address weakened or damaged systems or organs
 - Strengthen the immune system
 - Decrease toxicity
 - Normalize inflammatory function
 - Optimize metabolic function
 - Balance regulatory systems
 - Enhance regeneration
 - Harmonize life force
- 4) Correct structural integrity
- 5) Address pathology: Use specific natural substances, modalities, or interventions
- 6) Address pathology: Use specific pharmacologic or synthetic substances
- 7) Suppress or surgically remove pathology

(Finnell,et al. 2019)

DATA

TABLE 1:

Type of therapy, author and year:	Details:
Massage, simple touch (Kutner et al., 2008)	<ul style="list-style-type: none"> • Conducted a multisite randomized controlled trial (RCT) with 380 advanced cancer hospice patients. • Compared the effects of massage with simple-touch sessions. • Found immediate beneficial effects on pain from massage, but these were not sustained over time. • Observed significant improvements in pain and symptom distress in both groups, with no increase in pain medication use. • Found no significant differences between groups in sustained outcome pain measures.
Therapeutic massage, guided meditation (Downey et al.)	<ul style="list-style-type: none"> • Conducted an RCT with 167 hospice patients. • Compared the effects of therapeutic massage and guided meditation with an attention control group (friendly visits). • Found no significant treatment effects for pain or pain distress post-intervention.
Therapeutic massage with exercise (López-Sendín et al., 2012)	<ul style="list-style-type: none"> • Conducted a 2-group RCT in Spain. • Found significant improvements in worst pain scores and pain right now in the massage/exercise group. • Found that physical distress and least pain scores were no different between the massage/exercise and simple touch group.
Music therapy, progressive muscle relaxation (PMR) (Choi, 2010)	<ul style="list-style-type: none"> • Conducted a four-group quasi-experimental study. • Found that music therapy alone and in combination with muscle relaxation resulted in significant differences in pre and post-test anxiety scores.

Extracted from Table 2, (Lekhak et al. 2021)

Table 1- Level of evidence:

- Level I: Systematic review & meta-analysis of randomized controlled trials; clinical guidelines based on systematic reviews or meta-analyses
- **Level II: One or more randomized controlled trials**
- Level III: Controlled trial (no randomization)
- Level IV: Case-control or cohort study
- Level V: Synthesis review of descriptive & qualitative studies
- Level VI: Single descriptive or qualitative study
- Level VII: Expert opinion

PRELIMINARY CONCLUSION

- The study emphasizes the importance of holistic care for patients with life-threatening diseases, focusing not only on physical discomforts but also on psychosocial and spiritual concerns.
- The research explores the effectiveness of therapies such as massage and biofield therapies, like reiki, in improving various outcomes like pain, discomfort, anxiety, mood, stress, and quality of life.
- The study also outlines the principles of naturopathic medicine and the naturopathic therapeutic order, emphasizing the healing power of nature, treating the whole person, and prevention.
- The naturopathic approach to end-of-life care offers a holistic and patient-centered approach, potentially improving the quality of life for patients in their final stages.

Future Implementations:

Advocacy efforts could be made for the inclusion of naturopathic treatments in palliative care guidelines and policies, given their potential benefits in improving patient comfort and quality of life based on the evidence in Lekhak et al. article.

REFERENCES:

