





What it is: Complementary therapies (CT) are often used alongside conventional medical treatments but have not been developed using the same evidence approaches. CT cover a variety of practices and physical therapies including aromatherapy, herbal medicine, and massage therapy.

Why it matters: CT are often used in Australia. Therefore, patients who transition to palliative care may already be using CTs or may wish to start to use CTs.

Some forms of CT can interfere with medications or cause harm. It is important to know what is being used.

What I need to know: CT may be used by palliative care patients to relieve physical symptoms, help control treatment side effects, and/or improve their wellbeing.

CT nutritional supplements can interact with medicines or cause adverse events. It is important to know what is being taken.

The range of CT practices used by people with life-limiting illness includes:

- acupressure
- acupuncture
- aromatherapy
- art therapy
- massage
- meditation
- music therapy

The person's relationship with the complementary therapist can be important.

CT benefits may be uncertain or short-lived but can provide the opportunity for the person to 'escape' or 'live in the moment'. This might reduce their worries about their disease and future.

Note

Remember that most people are waiting to be asked before they disclose their use of CT.

Lifestyle coordinators may be able to help with some approaches to CT.

Do

Talk openly with the person and do not judge them. CT is a very personal choice.

Do

Record information about the CT that people in your care are using and let your supervisor know.

Do

You may wish to ask:

Have you tried anything else like herbal or natural remedies to help?

If so, then ask:

- Have you noticed any benefit?
- Have you noticed any side effects?

Do

Ask if they would like help to understand any information about the CT and let your supervisor know.

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My reflections:

What complementary therapies do I use?

What questions can I ask to find out what therapies a person I care for is using or wanting to use?

My notes:

See related palliAGED Practice
Tip Sheets:
Pain Management
Person-Centred Care
Talking About Dying

