



# Developing an Integrative Medicine Educational Program to Support Oncology Patients through Radiation Treatment

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## INTRODUCTION

Patients with cancer often lack internal resources for managing treatment-related toxicities. The psychosocial stresses imposed by radiotherapy (RT) cause a perceived lack of control, barring patients from effective self-management. In contrast, integrative medicine equips patients with complementary health approaches (CHAs) to manage symptoms on their own. We proposed an integrative medicine educational program (IMEP) to improve patients' self-efficacy in managing their radiation-related symptoms.



### OBJECTIVES:

- To develop an IMEP that provides efficacy beliefs and behavior models to manage fatigue, anxiety, poor mood, lymphedema, and nutritional status
- To collect preliminary self-efficacy data on the IMEP's ability to improve self-management

## METHODS

### PROGRAM OVERVIEW:

A structured curriculum of four one-hour sessions covered topics of meditation, yoga, massage therapy, and nutrition, each led by a topic expert. Sessions included didactic and interactive components. The content of sessions was determined by literature review of unmet needs and input from radiation oncologists and integrative medicine practitioners. The primary outcome was self-efficacy measured by 5 items on 9-point Likert scales via pre- and post-session surveys.

### RECRUITMENT:

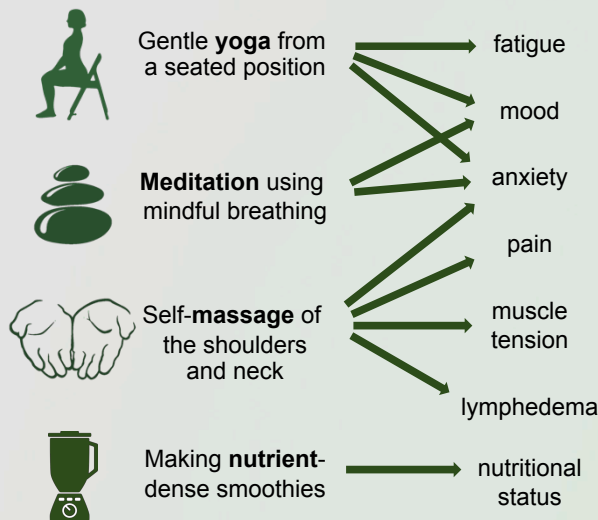
#### Passive methods:

- Flyers at high-traffic locations

#### Active methods:

- Nursing staff during on-treatment visits
- Radiation therapists during treatment sessions
- Designated study team member in waiting room

### CURRICULUM:



## RESULTS

Of ~100 eligible patients approached on the day of each session, 5-7 elected to participate. Overall, 22 patients attended one or more sessions, yielding 43 completed surveys. Twelve patients (54.5%) attended more than one session. Most were Caucasian (81.4%) with higher educational background (69.8%) and had a diagnosis of breast or prostate cancer (60.5%). There were no significant differences in outcomes based on number or content of sessions attended.

# sessions attended	Total patients (n = 22)
1	10 (45.5%)
2	7 (31.8%)
3	0
4	5 (22.7%)

Topic	Total survey participants (n = 43)
Yoga	11 (25.6%)
Massage therapy	14 (32.6%)
Meditation	9 (20.9%)
Cancer nutrition	12 (27.9%)

No. Survey Participants n = 43 (%)	
Age (yr)	43 63 81
Male/Female	53/47%
Race/Ethnicity	
White	81%
Hispanic	9%
Black	5%
Asian	5%
Education	
High school	30%
College	51%
Graduate	19%
Cancer site	
Prostate	33%
Breast	28%
Head/neck	14%
Gynecologic	12%
Brain (CNS)	12%

Of the 5 self-efficacy measures, there were significant post-intervention increases in 3 of the measures compared to baseline, as well as a trend towards increase in a fourth measure. Namely, participants demonstrated improved ownership over their health, acquisition of tools to manage their disease, control over their cancer, and potentially an enhanced belief that achieving wellness is due to their own efforts.

Self-efficacy statement	Pre (mean, SD)	Post (mean, SD)	p-value
I have ownership over my health	7.72 (1.90)	8.14 (1.32)	0.02
I have tools to manage my dz on my own	5.67 (2.52)	6.67 (1.85)	0.01
I have control over my cancer	5.30 (2.87)	6.05 (2.39)	0.01
I am effective in coping with my cancer	7.49 (1.68)	7.44 (1.68)	0.77
Achieving wellness is due to my efforts	6.74 (1.87)	7.07 (1.79)	0.15

## CONCLUSIONS

### Novelty:

- This is the first radiation oncology-focused IMEP of its kind

### Benefits:

- Improved capacity for self-management of radiation-related symptoms
- Benefits seen even after attending one session

### Drawbacks:

- Substantial time needed to plan sessions and coordinate logistics
- Unable to incorporate recruitment into existing workflows – study team member required
- Attendance limited by timing, transportation, and low performance status
- This and other common integrative medicine care models are most accessible to healthier patients with higher socioeconomic status

### Future directions:

- Must focus on incorporating integrative care into existing oncologic workflows that are accessible to all patients

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