

UNIVERSITI TEKNOLOGI MARA

**COMPLEMENTARY AND ALTERNATIVE
MEDICINE (CAM) USE AMONG CANCER
PATIENTS**

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ABSTRACT

The Traditional and Complementary Medicine (TCM) Unit was established in three hospitals; namely, Hospital Kepala Batas in Pulau Pinang, Hospital Putrajaya in the Federal Territory of Putrajaya and Hospital Sultan Ismail in Johor, which was approved by the Malaysian Cabinet in 2006. The unit initially provided three modalities of treatment comprising of acupuncture, Malay traditional massage and herbal therapy as adjunct treatments for cancer. Despite significant advances in treatment and the incidence of cancer in adults continuing to rise worldwide, many cancers remain incurable. One of the most feared symptoms in cancer is pain. It will affect most patients at some stage during their illness.

The objectives of the study are to assess patients' beliefs and reasons on the use of Complementary and Alternative Medicine (CAM) with conventional medicine in patients with cancer, to assess the relationship between demographic factors and beliefs towards using CAM, to find the relationship between beliefs and pain and to assess patients' attitudes toward pain on CAM use in cancer.

Patients (with cancer) from the (TCM) Unit Hospital Putrajaya, Hospital Kepala Batas and Hospital Sultan Ismail were identified for this study. A questionnaire on CAM usage, beliefs associated with CAM usage by Rakovitch et al., (2005) were adopted and modified to answer study objectives. Patients' beliefs on CAM usage were assessed using a Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). An adapted version of the Short-form McGill Questionnaire from Melzack 1987 by Bond and Simpson (2006) was used to assess pain in cancer among patients.

Taking into account that the sample of the study was not normally distributed in terms of race, gender, age and site of sample taken, non-parametric statistics was used in this study to assess the relationship between demographic factors and belief towards using CAM. Correlation between beliefs about CAM usage and pain dimension was tested using the Pearson Correlation.

Ninety-four patients, 26 of them from Hospital Putrajaya, 66 from Hospital Kepala Batas and 2 from Hospital Sultan Ismail participated in this study. About 68.1% of the patients had been using herbal treatment for more than 6 months. The main purpose for using herbal medicine is to relieve pain (35.5%) followed by to increase body immune system (12.9%). The most common reasons and beliefs regarding CAM therapies in this population are to relieve symptom, to assist other treatments to work and prevent the spread of the cancer. The demographic factors that are related to beliefs associated with CAM usage in this study are hospital (site of sample taken), gender, cancer support group, insurance, ethnic, employment status, duration of using CAM, purpose of undergoing CAM therapy and type of conventional medical treatment that had been received for their cancer. Beliefs had a weak positive relationship with pain dimension in terms of sensory and affective, $p=0.05$. More than half of the patients ($n=51$) claimed that they had no pain during the time the study was conducted.

As the use of CAM for adjunct therapy and preventive strategy presumably becomes increasingly popular, at least for some methods, further research is strongly recommended.

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CHAPTER 1

Introduction

Background

Malignant neoplasma persists as one of the five principle causes of national mortality in Malaysia. It was reported in 2005 that cancer contributed an approximate 10% of all deaths in government hospitals compared to 7.4% in 1975. The incidence of cancer is estimated to be about 150 for every 100,000 population and the estimated number of new cases per year is approximately 40,000 (Ministry of Health, 2009).

Many cancers remain incurable despite significant advances in treatments and the incidence of cancer in adults continues to rise worldwide (Bond and Simpson, 2006). One of the most feared symptoms in cancer is pain (Potter and Higginson, 2004). It will affect most patients at some stage during their illness. The prevalence of pain in cancer varies with the nature of the cancer, the stage of the disease and methods used for assessment (Bond and Simpson, 2006). Using complementary and alternative medicine (CAM) as an adjunct treatment for cancer plays a useful role in relieving related cancer symptoms side effects (MoH, 2009).

According to Cassileth, Heitzer, and Gubili J (2008), CAM is not used for the primary treatment of the cancer, but to manage symptoms and to control side effects from conventional treatments. Besides, they also offer patients the opportunity to select and participate in their own recovery (Cassileth et al., 2008). Efforts to subject complementary therapies to rigorous scientific research started only in the past decade or so although many of these therapies have been practiced over time as components