



## Trends in research involving the use of therapeutic touch as a nursing strategy

*Tendências da pesquisa envolvendo o uso do toque terapêutico como uma estratégia de enfermagem*

*Tendencias de la investigación que involucran el uso del toque terapéutico como una estrategia de enfermería*

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### ABSTRACT

Therapeutic touch (TT) is one of the oldest vibrational therapies still in use. Dolores Krieger and Dora Kunz, in the 1970s, pioneered the application of the method in nursing. Since then, research involving the use of therapeutic touch has been developed in order to demonstrate the effectiveness of the intervention to reduce the signs and symptoms related to various diseases. Many studies have evaluated the use of TT in isolation, however, a large part of these research studies compare this strategy with other complementary therapies, such as: music, guided imagery and relaxation. The results of these studies indicate improvement or reduction of signs and symptoms investigated in patients undergoing TT. However, methodological biases make it impossible to generalize the results, making it essential to conduct well-designed clinical trials capable of determining the effectiveness of the intervention, in addition to studying populations that have not yet been addressed, such as the elderly and newborns.

**Keywords:** Therapeutic touch/trends; Nursing strategy; Nursing care

### RESUMO

O toque terapêutico (TT) é uma das mais antigas terapias vibracionais ainda em uso. Dolores Krieger e Dora Kunz, na década de 1970, foram precursoras da aplicação do método na enfermagem. Desde então, as pesquisas envolvendo o uso do toque terapêutico têm sido desenvolvidas com o intuito de demonstrar a efetividade da intervenção na redução de sinais e sintomas relacionados a diversas doenças. Muitos estudos avaliam o uso do TT de forma isolada, porém, grande parte das pesquisas compara esta estratégia com outras terapias complementares, tais como: música, imagem guiada e relaxamento. Os resultados desses estudos apontam melhora ou redução dos sinais e sintomas investigados nos pacientes submetidos ao TT. Entretanto, vieses metodológicos impossibilitam a generalização dos resultados, tornando indispensável a realização de estudos clínicos bem delineados capazes de comprovar a efetividade da intervenção, além de estudar populações que por ora não são abordadas, como os idosos e recém-nascidos.

**Descritores:** Toque terapêutico/tendências; Estratégia de enfermagem; Assistência de enfermagem

### RESUMEN

El toque terapéutico (TT) es una de las más antiguas terapias vibracionales aun en uso. Dolores Krieger e Dora Kunz, en la década de 1970, fueron precursoras de la aplicación del método en la enfermería. Desde entonces, las investigaciones que involucran el uso del toque terapéutico ha sido desarrollada con la intención de demostrar la efectividad de la intervención en la reducción de signos y síntomas relacionados a diversas enfermedades. Muchos estudios evalúan el uso del TT de forma aislada, sin embargo, gran parte de las investigaciones compara esta estrategia con otras terapias complementarias, tales como: música, imagen guiada y relajación. Los resultados de esos estudios aseguran la mejora o reducción de signos y síntomas investigados en los pacientes sometidos al TT. Entre tanto, los sesgos metodológicos imposibilitan la generalización de los resultados, volviendo indispensable la realización de estudios clínicos bien delineados capaces de comprobar la efectividad de la intervención, además de estudiar poblaciones que por ahora no son abordadas, como los ancianos y recién nacidos.

**Descriptores:** Tacto terapéutico/tendencias; Estrategia de enfermería; Atención de enfermería

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## INTRODUCTION

Therapeutic Touch (TT) is one of the most ancient complementary therapies still in use<sup>(1)</sup>. Its theoretical/philosophical framework is based on the human ability to consciously re-balance vital energy, which when unbalanced contributes to the onset of diseases, a theory largely accepted in Eastern cultures<sup>(1-2)</sup>.

Dolores Krieger is a reference in the nursing field concerning studies addressing TT, which were initiated by Dora Kunz in the 1970s. According to this author<sup>(2-3)</sup>, the implementation of TT occurs in four phases: Centralization – the act of turning oneself inward; Evaluation – the search for unbalanced areas or deficits in the patient's energy field; Treatment – rebalance the energy field; Re-evaluation – occurs after each attempt to rebalance one's energy field.

Studies emphasize TT because it is a non-invasive technique in which the therapist can reduce diverse undesirable<sup>(4)</sup> states in the subject of the intervention, in addition to the positive results of its use in the treatment of various clinical conditions. Such aspects motivated conducting this study updating the state of the field.

This study presents the research trends in the field in relation to physiological, psychological and behavioral effects attributed to this intervention as well as some results obtained through studies comparing or associating TT with other interventions implemented for patients.

## RESEARCH TRENDS

### Physiological effects

Among the physiological effects attributed to TT in the literature, reduced pain is one of the most studied variables. One of the aspects highlighted by authors is related to the need to carefully and individually evaluate the effects of the intervention, such as imbalance in the patients' energy field<sup>(5)</sup>.

Quantitative studies<sup>(6-7)</sup> addressing the application of TT to reduce non-oncological pain report that the intervention was effective in reducing the intensity of pain with statistically significant results ( $p=0.035$  and  $p=0.007$ , respectively).

Similar results are found in studies that used TT to reduce fatigue both in patients with<sup>(8)</sup> ( $p=0.028$ ) and without cancer<sup>(6)</sup> ( $p=0.035$ ).

The effectiveness of TT in changing the parameters of vital signs such as blood pressure, heart and respiratory frequency has been verified in cancer patients<sup>(8)</sup>, critical patients<sup>(9)</sup> and in healthy individuals<sup>(10)</sup>.

Among the most recent studies addressing TT, a clinical trial was conducted to investigate its effectiveness in improving sleep patterns, among other variables, and the authors found statistically significant results for latency ( $p=0.000$ ), duration ( $p=0.008$ ), habitual efficiency ( $p=0.021$ ), disorders ( $p=0.000$ ), daily sleepiness and sleep disorders during the day ( $p=0.002$ )<sup>(7)</sup>. According to the

authors, this improvement may be related to diminished pain, another effect found in the study.

Children and preterm infants have not been the main focus of attention in most of the studies addressing TT.

### Psychological and behavioral effects

The studies addressing the effects of TT on anxiety and mood disorders have used questionnaires such as the Profile of Mood States<sup>(8)</sup> and State-Trait Anxiety Inventory<sup>(10)</sup>. The results, statistically significant for both ( $p=0.001$  and  $p=0.003$ ), indicate the improvement of symptoms. The study using the State-Trait Anxiety Inventory in Brazilian college students to evaluate the effect of TT in three successive sessions identified significant differences before and after the interventions in both studied groups through the statistical technique of generalized linear model. The group submitted to the intervention also had advantages over the control group in relation to reduced anxiety, though with no statistically significant differences. The authors took into account the potential effect of proximity between therapist and subject in the control group, in which the procedure was mimicked<sup>(11)</sup>. Studies investigating the improvement of behavioral symptoms such as agitation have focused on the elderly population with chronic diseases, such as dementia<sup>(12)</sup> and Alzheimer's<sup>(13)</sup>. The results revealed that TT was considered effective in the treatment of these symptoms in both cases ( $p=0.001$  and  $p=0.005$ , respectively), though the frequency of sessions was not standardized; they ranged from once a day for eight weeks<sup>(12)</sup> to once a day for five days<sup>(13)</sup>.

## STUDIES COMPARING OR ASSOCIATING TT WITH OTHER INTERVENTIONS

Even though many studies evaluate the use of TT in isolation, clinical trials have investigated the effectiveness of this strategy in comparison to or in association with other interventions already used in clinical practice, such as: progressive muscle relaxation<sup>(6)</sup>, massage<sup>(8)</sup>, cognitive-behavioral therapy<sup>(14)</sup>, music and guided imagery<sup>(15)</sup>.

In the comparison between TT and progressive muscle relaxation in the reduction of pain and stress in patients with neuropathic pain<sup>(6)</sup>, the authors found pain improved when TT was implemented ( $p=0.035$ ), in addition to greater satisfaction with life; the latter showed no statistical significance ( $p=0.27$ ). The absence of statistical significance was attributed to methodological limitations such as sample size.

When TT was compared to massage for treating cancer patients<sup>(8)</sup>, both interventions were effective in reducing respiratory frequency ( $p=0.001$ ), heart rate ( $p=0.001$ ), and diastolic blood pressure ( $p=0.001$ ). The use of massage ( $p=0.001$ ) was as effective as TT in reducing pain ( $p=0.001$ ), though TT was more effective ( $p=0.028$ ) in reducing fatigue when compared to massage, which did not obtain statistical significance ( $p=0.057$ ).

The evaluation of the treatment of chronic pain with cognitive-behavioral therapy in isolation (control group) or associated with TT (experimental group) revealed that randomized patients who received TT had a reduction of 15% in this symptom while the control group had a reduction of 4%<sup>(14)</sup>.

The use of TT compared to no treatment and TT associated with music and guided imagery to evaluate improvement in variables related to a good health status showed that the groups treated with TT presented less stress and greater relaxation ( $p \leq 0.0003$ ). The authors also found an interaction between the therapist's level of training and increased production of salivary IgA ( $p \leq 0.021$ ), considering that high concentrations of this immunoglobulin are correlated with a greater resistance to respiratory infections and overall immune competence<sup>(15)</sup>.

Considering the ethical and legal implications of practicing alternative therapies by nurses<sup>(16)</sup>, improved research will favor the use of TT as a nursing intervention in care provided to populations with specific characteristics and distinct needs.

## FINAL CONSIDERATIONS

TT is the complementary therapy that has been most

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