

THE PSYCHOLOGY OF HEALING:
INTEGRATION OF CAM THERAPIES IN BREAST CANCER TREATMENTS

By

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Abstract

Complementary and Alternative Medicine (CAM), are therapies that can aid in the symptoms and emotional distress associated with breast cancer. The integrative health of the patient is explored through the following question - *“How might CAM therapies, specifically yoga, massage therapy and Chinese medicine, collectively contribute to the psychology of healing in breast cancer patients?”*. Breast cancer patients and survivors have constant emotional distress and physical problems with their diagnosis and subsequent treatment (Kacel et al. 2019). Yoga and meditation have been shown to have anti-depressive effects (Rao 2019), decrease IL-6 and salivary cortisol levels (Lengacher et al. 2019), and provide the ability to enhance acceptance of emotions (Henderson et al. 2012). Chinese Medicine has varying effects on breast cancer treatments symptoms such as: alleviating hot flushes and insomnia, reduce the risk of endometrial cancer induced by tamoxifen, and improve bone loss (Wang et al. 2019). Massage therapy techniques are helpful in aiding the physical toll of cancer. Swedish massage therapy (SMT) showed clinically significant relief of cancer related fatigue (CRF) (Kinhead 2017) and Classical massage may decrease the side effects of chemotherapy induced peripheral neuropathy from paclitaxel (Izgu et al. 2019). Through these CAM therapies, by treating the patient as a whole and being dedicated to their health in an all-encompassing approach, patients can achieve their new-found definition of health throughout their cancer journey.

Introduction

Approximately 34% of people will be diagnosed with cancer at some point during their lifetime (NIH 2018). Within the 34% that were diagnosed with cancer, 25% of women were diagnosed with breast cancer (BCRF 2019). Complementary and Alternative Medicine (CAM), a way to integrate non-traditional therapies in cancer treatment, is becoming an increasingly

popular addition to traditional cancer therapies. The development, research, and acceptance of complementary treatments is gaining traction in the field of oncology. The usage of yoga (including meditation), Chinese medicine, and massage therapy are popular for cancer patients because of their relative ease of access and emphasis on the combination of the mind and the physical body.

An underdeveloped area of CAM therapies is how they affect the patient's health psychology, which involves combining how biological, psychological, and social factors are involved in health and illness. A specific area of interest within CAM therapies is how they can impact breast cancer journeys. Utilizing CAM with traditional treatment is a crucial outlet for emotion, lessening stress, and providing additional support for breast cancer patients. Breast cancer is commonly associated with chronic pain, fatigue, long-term psychological distress and impaired quality of life (Cramer et al. 2017). A study in Jordan on women with breast cancer looked into the common themes of emotion experienced between them. The commonalities included: their body falling apart, broken future and even a broken heart (Alhusban 2019). The impact of complementary and alternative medicine offerings on cancer patients' emotional health and ability to self-manage health conditions shows that greater usage of CAM offerings was also associated with greater perceived benefits (Fitzsimmons et al. 2019). In terms of relative risk to patient health, CAM therapies are typically harmless and have minimal risk associated with them. The inclusion of CAM therapies is also a large step for improving healthcare integration, giving patients the power to explore different therapies while still giving them the lifesaving treatments they need.

Another unique approach to healthcare with similar themes to CAM therapies is integrative medicine. Integrative medicine focuses more on the complementary aspect of CAM

therapies. Essentially: How can we, as physicians, create a more well-rounded, integrative approach to health for our patients? According to the Andrew Weil Center for Integrative Medicine (AWCIM), Integrative medicine is, “healing-oriented medicine that takes account of the whole person, including all aspects of lifestyle” (Arizona Center for Integrative Medicine). While integrative medicine is not the focus of this thesis, it is important to note because it overlaps greatly with CAM therapies as will be seen later on.

Options for using CAM therapies are vast but one such therapy that has shown promising benefits is yoga. Yoga can improve quality of life and cancer-related symptoms for women with breast cancer. Seventeen studies compared yoga versus no yoga, and evidence showed that yoga improved health-related quality of life, reduced fatigue and reduced sleep disturbances in the short term (Cramer et al. 2017). Another CAM therapy of interest is Chinese medicine; while it may not be effective in tumor shrinkage it has proven exemplary in improving symptoms associated with breast cancer treatments (Wang et al. 2019). Lastly, message therapy techniques such as Swedish Massage Therapy (SMT) have shown great promise in reducing cancer related fatigue (CRF) (Kinkead 2017). With these techniques, *“How might CAM therapies, specifically yoga, massage therapy and Chinese medicine, collectively contribute to the psychology of healing in breast cancer patients?”* - An Analysis of CAM therapies will be explored in order to examine its impact on the integrative health of the patient.

Psychology Behind Being a Cancer Patient

Sometimes the deepest scars cut the least visible. Like nooses around our necks, the emotional and physical trauma we endure can weigh down day-to-day living, even effecting our physical health. Everyone deserves to have an outlet for these emotions and a way to process

them, however, this is especially important for people getting diagnosed with a terminal disease such as breast cancer. Women with breast cancer already go through so many trials physically such as chemotherapy, radiation and surgery that any additional stress, mental or physical, can be extremely detrimental. In fact, the impact of living with and being diagnosed with breast cancer is destructive to the psyche.

One such example of the emotional distress breast cancer patients endure is presented in a study in Florida. The purpose was to look at how psycho-oncology providers could impact integrative medicine practices for women diagnosed with breast cancer (Kacel et al. 2019). In order to execute this idea, “A pilot program was initiated at a large academic medical center to explore benefits of a collaborative clinic visit conducted with psycho-oncology and integrative medicine within an existing supportive oncology clinic” (Kacel et al. 2019). This collaborative clinic aimed to enhance patient quality of life and reduce symptom burden. Startlingly in the results, “Sixty-eight percent of patients rated their emotional distress at or above clinical cutoffs, indicating unmet supportive care needs” (Kacel et al. 2019). From this, Kacel et al. concluded that it was a common trend for breast cancer patients and survivors to have constant emotional distress and physical problems with their diagnosis and subsequent treatment. This is an obvious cry for reform as sound mental health is paramount for anyone but especially so for women struggling with chronic illness.

What do we know about the assessment of quality of life outcomes? Mindfulness-based interventions for cancer survivors are important areas of focus for mental health, specifically quality of life, in terminally or chronically ill women with breast cancer. Mindfulness-based interventions (MBIs) are integrative mind-body practices that support wellness and can alleviate suffering, therefore enhancing the capacity for quality of life (Sinatra and Black 2018). However,

there are many difficulties with conceptualizing and measuring QOL. The issue with measuring QOL is, “QOL is an “umbrella term” covering a variety of concepts including functioning, health status, perceptions, life conditions, behavior, happiness, lifestyle, and symptoms, but has been delineated as analogous to “satisfaction with life”” (Sinatra and Black 2018). Though it is a difficult task to quantify these emotions, it is important to be able to measure QOL especially when looking for ways to improve it for women with breast cancer.

Psychologically, the concept of health is very personal and interpretive. Health is not only physical and mental wellbeing, but perception of the physical body. An examination of women’s perceptions of changes to their body image during breast cancer treatment was explored at a hospital in Jordan. The core theme from this study was, “broken things cannot be repaired” (Alhusban 2018). The subthemes from the study were: changes in physical wellbeing (“my body fall apart”), changes in emotional wellbeing (“broken heart”), changes in social wellbeing (“broken future”), and coping strategies (“repairing what has been broken”) (Alhusban 2018). Additionally, Religion and family support were major factors helping the women cope with their condition. Overall, Alhusban concludes that, “Nurses and other healthcare providers need to be aware of body image changes of women with breast cancer to initiate timely, and culturally sensitive nursing intervention and support” (Alhusban 2018). Nurses, or other healthcare providers for women enduring breast cancer treatment, should support patients in finding their own sources of strength to facilitate their healing process. Within these parameters, CAM therapies are essential for breast cancer patients.

Complementary and Alternative Medicine (CAM)

The emotional and physical trauma experienced during the diagnosis and treatment of breast cancer is unique to every person, but complementary and alternative medicine is a necessity during this difficult process. In Germany, clinicians led an over-the-phone consultation about CAM therapies for cancer patients in which they concluded that it gives patients opportunity to use CAM to help with symptom management, psychological support, and individual self-care (Horneber et al. 2018). This study supports an open dialogue between practitioner and patient, an emphasis in new-wave medicine. Lastly, Horneber et al. insist that CAM therapy consultation should be provided from the beginning of cancer diagnosis and not be separated from conventional care consultation (Horneber et al. 2018).

The onslaught of CAM therapies as an option for additional treatment has gained the most traction in breast cancer care. Breast cancer patients have the highest use of CAM therapies among other cancer types, as do breast cancer survivors (Saquib et al. 2011). In a study involving 2,562 breast cancer survivors, aged 28 to 74 years, about 50% reported CAM usage for cancer purposes. The most common types of CAM therapies used were visual imagery, spiritual healing, and meditation (Saquib et al. 2011). Greater usage of CAM offerings was also associated with greater perceived benefits (Saquib et al. 2011).

Within CAM offerings, there are many different types of therapies to take advantage of such as acupuncture, yoga, mindfulness-based stress reduction, and herbal medicine. In a systematic review on CAM therapies for breast cancer patients in Japan, they deduced that acupuncture decreased frequency of hot flashes; yoga had a beneficial effect on depression and health-related quality of life; mindfulness-based stress reduction had a beneficial effect on anxiety and depression; combination of herbal medicine and chemotherapy synergistically improved clinical outcomes; and acupuncture did not show significant effect on the severity of

hot flushes and cancer-related pain (Sasaki et al. 2019). In this review they were not able to conclude if yoga had an effect on cancer-related pain and physical well-being, however, CAM therapies could be helpful for treating specific breast cancer related symptoms (Sasaki et al. 2019).

Yoga and Meditation

One common therapy option within CAM therapies is yoga and meditation. Yoga, originating from a Hindu spiritual discipline, in its native language translates to union. This union can come in many forms such as the combination mind and body, spiritually, psychologically and emotionally (Yogic Encyclopedia 2020). Emphasized in the practice of yoga is ujjayi (breath control), alignment of the body, and meditation. Meditation focuses on quieting the mind in order to attain an inner state of awareness and personal growth (Yogapedia 2020). Though there are many different types of yoga and meditation, both carry similar motifs that makes the two almost inseparable from the other. These two therapies, considered under the same umbrella, have shown promise in improving cancer symptoms but are severely understudied (Porter et al. 2019). For women with metastatic breast cancer, yoga was an acceptable intervention but there are challenges in its implementation such as the patient being employed or having children: these two challenges can be difficult because doing long yoga sessions may not be feasible to their schedule (Porter et al. 2019). Nonetheless, yoga is still a very promising therapy option for breast cancer patients.

A particular study analyzed if yoga can improve quality of life and mental health/symptoms in women with breast cancer. The trauma, distress, fatigue, and more associated with breast cancer is incredibly stressing on their bodies. However, yoga is known to

be an incredible combination of ethical lifestyle, spiritual practice, physical activity, breathing exercises and meditation (Cramer et al. 2017). In seventeen studies comparing yoga versus no yoga, evidence showed that yoga improved health-related quality of life, reduced fatigue and reduced sleep disturbances in the short term (Cramer et al. 2017). There was moderate-quality evidence proving that yoga is a beneficial supportive intervention for improving health-related quality of life. This includes reducing fatigue and sleep disturbances when being compared to no therapy, with a reduction of depression, fatigue and anxiety when compared to psychosocial interventions (Cramer et al. 2017). Safety risks associated with yoga have been questioned in previous studies, however, this study has interestingly found that there was no evidence of serious risks of yoga among women with a diagnosis of breast cancer (Cramer et al. 2017).

A trial done in 2019 aimed to study the correlation of mindfulness-based stress reduction (MSBR), a type of meditation-based therapy, for breast cancer survivors and their salivary cortisol/IL-6 levels. Cortisol is known as the stress hormone and IL-6 is a pro-inflammatory cytokine. Chronic cortisol and IL-6 is associated with widespread inflammation, pain, sleep disturbances, and decreased overall physical health. In this study, participation in the meditation sessions immediately reduced salivary cortisol levels but they could not conclude how long the reduction persists after the session (Lengacher et al. 2019). There were also significant relationships with small effect sizes that were observed between IL-6, both symptoms and quality of life in both groups suggesting that MSBR may reduce salivary IL-6 levels in breast cancer survivors, at least temporarily (Lengacher et al. 2019). This article is helpful in suggesting that there is not only an improvement in the mind-body connection for these breast cancer survivors, but MSBR also may assist in the reduction of stress.

In India, a comparative study was done on breast cancer patients enduring traditional treatment while also practicing yoga with supportive therapy and their self-reported symptoms of depression (Rao 2019). Yoga intervention in breast cancer patients also undergoing traditional treatment could have possible antidepressant effects. Depressive symptoms decreased 42% post-op, 28.1% during and 28.5% after radiotherapy, and lastly 39.5% during and 29.2% after chemotherapy (Rao 2019).

Along with yoga, meditation has been known to help decrease psychological symptoms in women with early stage breast cancer. MSBR, mindfulness-based stress reduction, includes cognitive-behavioral therapy, group support, experiential focus, and a strong educational orientation (Henderson et al. 2012). These techniques were used in a randomized controlled clinical trial at UMass to determine the effectiveness of MSBR. The women in the study were newly diagnosed with either stage 1 or 2 breast cancer and between the ages of 20-65 (Henderson et al. 2012). The measurements in question were cancer-specific quality of life and coping mechanisms with secondary outcomes like depressive and anxiety symptoms as well as general distress. The results indicate that in early-stage breast cancer patients, MBSR may provide the ability to enhance acceptance of emotions, reduce stresses such as depression, hostility and alienation, improve coping mechanisms and, “ increase sense of meaning and spirituality in relation to self, personal health, and recovery factors” (Henderson et al. 2012).

Lovingkindness meditation (LKM), a specialized type of meditation, centers on the development of positive emotions and disengaging from negative emotions (Wren et al. 2019). A study completed in a southeastern U.S. academic medical center investigated the effectiveness of LKM during breast cancer diagnosis and surgery. Each participant was randomly assigned to either LKM, music or standard care during their biopsy or procedure. Surprisingly, while body

pain remained constant in LKM and increased in standard care, LKM had no effect of breast pain when compared to music and standard care. LKM could reduce anxiety in patients by about four points per assessment and also led to “improvements in positive psychological and physiological adjustment ... specifically self-compassion” (Wren et al. 2019).

While therapy and medications may be able to manage the majority of fragmented psyche of breast cancer patients, alternative therapies such as meditation have the added benefit of addressing intangible aspects of cancer such as the repairing the relationship between self and health. One of the main issues with getting these services readily available to all breast cancer patients is physician beliefs on yoga and meditation. A trial in Wisconsin assessed healthcare providers’ beliefs about yoga/meditation and the effectiveness of a succinct educational presentation of yoga/meditation in order to increase referral (Koula & Knight 2018). A striking 43% of healthcare providers surveyed did not know yoga and meditation classes were offered at their cancer center and 55% said they rarely recommend yoga/meditation to patients (Koula & Knight 2018). However, after the presentation, 90% of providers stated they would be more inclined to recommend yoga/meditation (Koula & Knight 2018). The most important facet of this study is that health care providers were receptive to these therapies once their knowledge of the subject increased. This can lead to larger utilization of yoga/meditation which could have physical and emotional benefits for patients (Koula & Knight 2018).

Chinese Medicine

Chinese medicine has been a prevalent way of healing for thousands of years. However, once western medicine took over as the primary form of treatment, Chinese medicine was often discredited as “fake” or a “placebo”. Regardless of western societies’ views on alternative

medicines such as Chinese medicine, the studies speak to the benefits of using this modality with breast cancer treatments.

While the modern methods to increase survival rates amongst breast cancer patients such as chemotherapy, surgery, and more are often successful, the main side effect of these treatments are perimenopausal symptoms. Such perimenopausal symptoms are: vasomotor symptoms, sleep problems, arthromuscular symptoms, and osteoporosis (Wang et al. 2019). These symptoms can be very debilitating to breast cancer patient's quality of life. Since there are currently no official treatments for perimenopausal symptoms, CAM therapies represented by Chinese medicine, acupuncture, massage, and psychotherapy can be possible treatments of interest (Wang et al. 2019). Wang and his fellow researchers aimed to look at using these techniques and their effectiveness against perimenopausal symptoms (Wang et al. 2019).

The major area of interest was herbal Chinese medicines, specifically Shugan Liangxue Decoction, Erxian Decoction, and Xiaoyao Powder. All of these are prescriptions that are made of traditional Chinese herbs. Shugan Liangxue Decoction experiments have shown that it may, “enhance osteogenesis, and improves bone metabolism, suggesting that Shugan Liangxue Decoction may improve bone loss caused by endocrine drugs” (Wang et al. 2019). Clinical studies have also proven this decoction can alleviate hot flushes and insomnia in breast cancer patients taking tamoxifen (Wang et al. 2019). Importantly, this herbal prescription, “did not affect tumor recurrence or metastasis” (Wang et al. 2019).

Erxian decoction is mainly used for menopausal syndrome, osteoporosis, and premature ovarian failure. It has been used for decades for menopausal symptoms such as: hot flushes, night sweats, insomnia, and depression (Wang et al. 2019). It has definite therapeutic effect and no reported adverse reactions. In clinical studies, Erxian Decoction may positively affect

perimenopausal symptoms. When comparing tamoxifen vs. tamoxifen taken with Erxian decoction, perimenopausal symptoms (fatigue, loss of appetite, hot flashes, night sweats, sleep quality) were significantly improved after 2 months treatment in the tamoxifen taken with Erxian decoction group (Wang et al. 2019). There has also been evidence through In vitro studies that Erxian decoction can, “stimulate estrogen production and inhibit proliferation induced by estrogen and metastasis of breast cancer cell as well” (Wang et al. 2019).

Xiaoyao powder and modified Xiaoyao powder are used mainly for menopausal or premenstrual syndrome, cancer, insomnia, and so on. Analysis shows that the application of CMs (Chinese medicines) reduced the risk of endometrial cancer induced by tamoxifen (Wang et al. 2019). Similar to studies done on the other 2 CM drugs, Xiaoyao powder showed improved of perimenopausal symptoms of breast cancer. However, Xiaoyao powder had no effect on estrogen levels. In both *in vivo* and *in vitro* studies, Xiaoyao powder induced apoptosis of hormone dependent breast cancer cells and inhibits hormone dependent and independent growth of breast tumor (Wang et al. 2019).

While in this large study there were many different types of Chinese herbal medicine explore, it still only represents a small portion of the subject of Chinese Medicine. The treatments seen are very promising due to the relief of many symptoms associated with breast cancer as stated above and seem to offer alleviation of symptoms that Western medicine cannot cure.

There are many different types of Chinese Medicine such as herbal methods, acupuncture, moxibustion, etc. In 2019 in China, a group of researchers looked at moxibustion as a therapy for Breast Cancer-Related lymphedema. This randomized controlled trial separated patients into two groups, treatment group with moxibustion and a control group which required,

“pneumatic circulation was performed with compression garments worn every day” (Yang et al. 2019). They measured the efficacy of the therapy by measuring arm circumference amongst other swelling testing. After four weeks of either therapy, there was swelling decrease in both groups, but the difference was greater in the moxibustion group than the control group (Yang et al. 2019). Moxibustion has potential effect on breast cancer-related lymphedema in which it, “reduces the affected-side arm circumference, relieves subjective symptoms of affected-side arm swelling, and reduces fatigue ...” (Yang et al. 2019).

Massage Therapy

Whether it be for relaxing purposes or chronic pain, massage therapy is generally thought of as a special treatment for “me-time” without measurable healing benefits. Yet, massage therapy is a legitimate technique to manage and diminish pain for many cancer patients.

A massage therapy study for cancer-related fatigue was completed at Emory University in Atlanta, Georgia. Cancer related fatigue (CRF) is one of the most common/debilitating symptom cancer survivors experience. the National Comprehensive Cancer Network definition of CRF is “a distressing, persistent, subjective sense of physical, emotional, and/or cognitive exhaustion related to cancer or its treatment that is not proportional to recent activity” (Kinkead 2017). In this study, the purpose was to evaluate the efficacy of weekly Swedish massage therapy (SMT) versus an active control condition (light touch [LT]) and waitlist control (WLC) on persistent CRF in breast cancer survivors (Kinkead 2017). The participants were 66 females who survived stage 0-3 breast cancer between ages of 32-72 years, in their treatment they received surgery plus chemotherapy and/or radiation with CRF symptoms. The SMT showed clinically significant relief of CRF. Six weeks of treatment causes a significant reduction in fatigue, a debilitating sequela for cancer survivors (Kinkead 2017).

Classical massage may be able to decrease the side effects of chemotherapy induced peripheral neuropathy and QOL in breast cancer patients receiving paclitaxel (Izgu et al. 2019). Paclitaxel is a chemotherapy drug some breast cancer patients use during their treatment. Similar to most trials that look at effects of massage, there was a control group, which experienced usual care, and an experimental group, who received classical massage. The CMG was giving a classical massage before each paclitaxel infusion while the control group was just given usual care (Izgu et al. 2019). Then after specific amounts of time, the presence of peripheral neuropathic pain and QOL were assessed. Results shows that peripheral neuropathic pain was lower in CMG and QOL was also greater. Overall, “This study suggested that classical massage successfully prevented chemotherapy-induced peripheral neuropathic pain, improved the QOL, and showed beneficial effects on the NCS findings” (Izgu et al. 2019).

Conclusions

As we can see, there are many options for breast cancer patients to aid them through an incredibly taxing stage of their life. Looking at it from a perspective as a whole, CAM therapies have significant benefits and can open dialogue between practitioner and patient. While all these studies have shown promise, there is still an urgent need to analyze within these studies how healing and health psychology can impact breast cancer patients.

Discussion

This leads us to the question: How do we make a connection between quality of life (QOL) and CAM therapies? The ambiguity of QOL could raise potential issues because the concept of quality of life is very personal, similar to how everyone has a different definition of health. How everyone sees QOL, health, their best “selves”, etc. is so embedded in our psyche that it'd almost be impossible to make a standard for it. While most studies struggle to form

connections between QOL and complementary therapies because of this, the obscurity works in CAM therapies' favor. CAM therapies provide the ability of freedom of expression for breast cancer patients when everything else in their life is so tightly controlled. Perhaps for one patient the most important improvement to their QOL is a reduction in their cancer treatment symptoms which could be managed through Chinese medicines. Or maybe another patient wants to see a reduction in stress with the practice of yoga or even learn how to manage their stress better throughout their journey. Based on the changes and the desires of the patient, they have the autonomy to try different CAM therapies and figure out what's best for them. This is a personal element that almost every patient going through any type of medical treatment is begging for, the ability to control and effect change themselves.

Improving biological effects, psychological and social factors - the three pillars of health psychology - are evident in these therapies. It is imperative to note that none of these therapies are cure-alls, but they have the opportunity to give patients the tools to come to terms with their diagnosis or journey. The psychology and mental health of breast cancer patients is exceedingly important, as the physical and emotional changes patients undergo can be debilitating. Practicing yoga can have psychological improvements including anti-depressive effects. In the Rao study, a 42% decrease in depressive symptoms post-op may just be the relief needed for breast cancer patients (Rao 2019). Patients may be severely depressed through the process of cancer treatment, as it upends their entire life as they once knew it. Yoga can provide relief for these patients, so much so that they can manage their depression without need for medication. Since these patients are already on so many medications and regimens, yoga is a safe and integrative approach to self-care without the sometimes-dangerous side effects seen with taking drugs.

There is also a positive relationship between biological effects and CAM therapies. One such example is the link between meditation, MSBR, and decreased IL-6 and salivary cortisol. Since this cytokine and hormone are both pro-inflammatory, chronic elevated IL-6 and Cortisol, which can happen due to stress, can be extremely painful. It's a fair assumption to say that breast cancer patients are relatively stressed so this very well may be an issue for them. According to Lengacher et al. study, something as small as doing meditation can help decrease levels of IL-6 and cortisol, at least temporarily (Lengacher et al. 2019). This is a much-needed relief for breast cancer patients, because even a couple hours or days with reduced pain a better option than constant chronic pain. Meditation is a small, relatively easy therapy for patients of all levels of health to practice and can introduce a practice into their treatment routine they actually may enjoy. Another CAM therapy that has had physical effects on the body is massage therapy. The Swedish massage study is a perfect example of reducing cancer associated symptoms through a natural technique. CRF can be crippling to breast cancer survivors, and so far, there hasn't been any traditional treatments to help control it. Swedish massage therapy caused significant relief of the symptoms associated with CRF (Kinkead 2017). Again, there is evidence that not only do CAM therapies have a psychological effect but can relieve the physically manifest symptoms associate with breast cancer.

Lastly, social factors can be difficult to assess with CAM therapies because they vary so much per patient but can be instrumental in helping to build a community for the patient. Similar to how society says, "it takes a village" when raising children, the same applies to breast cancer patients. The diagnosis and treatment of breast cancer is life-changing, so building a support system for the patient is paramount to their wellbeing. CAM therapies give patients exposure to empathetic people, that if they participate in the therapy enough, can become a part of their

community. This gives a patient a larger sense of identity. Even though it may not be an intended effect, if a breast cancer patient is going to yoga to help manage depression, they may also find other yogis who are breast cancer survivors or teachers who grow fond of them. Practicing yoga could become a safe space for the patient to feel able to express themselves physically and emotionally, all while being surrounded by people could very well provide emotional support to this patient. This forms a sort of “team” that can help provide support to hold the weight of the patient’s journey. Though these happenings may seem small, any form of relief or moment of sincerity for these patients can make a whole world of difference not only in the moment, but to their health as well.

Breast cancer patients deal with trauma inducing experiences during their treatments, and the reality of living with breast cancer can be very difficult. It is our duty as practitioners, nurses, and all health care providers to make this journey as painless as possible for them. If that means taking the time to go over CAM therapies with the patient to let them know all their options, giving them resources and the opportunity to make these therapies a part of their treatment plan, then that’s a service that needs to be provided. No one is truly going through this cancer treatment journey besides the patient, and it is essential to be able to treat all of the patient: the mind, body and soul. CAM therapies offer a unique opportunity to treat the whole patient, not just the illness. Integrating these therapies into breast cancer treatment plans is crucial in providing relief of cancer treatment symptoms and aid in the process of healing for breast cancer patients.

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