

编号: YY002-20220905001

标题: Inequalities are the most significant threat to public health, top doctor warns

简介: Inequalities are the most significant threat to public health in the UK, a top doctor has warned ahead of a major conference at the Royal Society of Medicine. Dr Claire Bayntun, Vice-President of the Royal Society of Medicine, has called for urgency in addressing unequal health outcomes, which were so sharply exposed by the COVID-19 pandemic. Her comments come ahead of the RSM's inaugural Tackling Inequalities conference on Wednesday 14 September 2022, in partnership with NHS England.

全文链接: <https://www.news-medical.net/news/20220905/Inequalities-are-the-most-significant-threat-to-public-health-top-doctor-warns.aspx>

编号: YY002-20220905002

标题: Sensing the lightness: a narrative analysis of an integrative medicine program for healthcare providers in the COVID-19 department

简介: Abstract Objectives The research addressing physical and emotional exhaustion among healthcare providers (HCPs) in COVID-19 departments is limited. We examined the impact of integrative medicine (IM) intervention for HCPs working in isolated COVID-19 in-patient departments, addressing concerns and well-being. Methods HCPs working in 3 isolated COVID-19 in-patient departments underwent 40-min IM treatment sessions (including acupuncture, manual movement, and/or mind-body modalities) provided by integrative oncology practitioners. The MYCAW (Measure Yourself Concerns and Well-being) questionnaire examined HCP concerns and free-text narratives following IM treatments. Data were qualitatively analyzed using ATLAS.Ti software for systematic coding. Results A total of 181 HCPs underwent 305 IM treatments. Narrative themes focused on physical symptoms (primarily pain and fatigue) and emotional concerns, including perceived communication barriers with patients, and reflections on well-being and insights following IM treatments. HCPs reported feeling a sense of "relief" which was likely related to the 3 main effects of the IM intervention: a sense of "being cared for" and treated; experiencing emotional, sometimes spiritual effects of the treatment; and the feeling of relaxation, combined with the relief of pain. Qualitative analysis identified clusters of emotional and spiritual-related keywords such as "calming," "release," "relaxation," and "disengagement" following the first IM session (119 of 181 narratives, 65.7%). Conclusions HCPs working in isolated COVID-19 departments reported improved well-being and the addressing of their concerns following IM treatment sessions provided during their work shift. Further research is needed to explore the impact of IM on HCP burnout and resilience in palliative care settings.

全文链接: https://pan.ckcest.cn/rcservice//doc?doc_id=104467

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标题: The Future of Integrative Health: What Case Managers Need to Know?

简介: Allopathic medicine, also referred to as Western medicine, may be the approach to medical practice most Americans are familiar with.

全文链接: https://pan.ckcest.cn/rcservice//doc?doc_id=104468

编号: YY002-20220905004

标题: Do Palliative Care Providers Use Complementary and Integrative Medicine? A

Nationwide Survey

简介: 2021 American Academy of Hospice and Palliative Medicine
Context: Given the high prevalence of burdensome symptoms in palliative care (PC) and increasing use of complementary and integrative medicine (CIM) therapies, research is needed to determine how often and what types of CIM therapies providers recommend to manage symptoms in PC. **Objectives:** To document recommendation rates of CIM for target symptoms and assess if, CIM use varies by provider characteristics. **Methods:** Nationwide survey's of physicians (MD and DO), physician assistants, and nurse practitioners in PC. **Results:** Participants (N = 404) were mostly female (71.3%), physicians (74.9%), and cared for adults (90.4%). Providers recommended CIM an average of 6.82 times per-month (95% CI: 6.04–7.60) and used an average of 5.13 (95% CI: 4.90–5.36) out of 10 CIM modalities. Respondents recommended mind-body medicines (e.g., meditation, biofeedback) most, followed by massage, and acupuncture and/or acupressure. The most targeted symptoms included pain; followed by anxiety, mood disturbance, and distress. Recommendation frequencies for specific modality-for-symptom combinations ranged from little use (e.g., aromatherapy for constipation) to occasional use (e.g., mind-body interventions for psychiatric symptoms). Finally, recommendation rates increased as a function of pediatric practice, noninpatient practice setting, provider age, and proportion of effort spent delivering palliative care. **Conclusion:** To the best of our knowledge, this is the first national survey to characterize PC providers' CIM recommendation behaviors and assess specific therapies and common target symptoms. Providers recommended a broad range of CIM but do so less frequently than patients report using CIM. These findings should be of interest to any provider caring for patients with serious illness.

全文链接: https://pan.ckcest.cn/rcservice//doc?doc_id=104466

编号: YY002-20220905005

标题: Characteristics of Provider-Focused Research on Complementary and Integrative Medicine in Palliative Care: A Scoping Review

简介: **Background:** The use of complementary and integrative medicine (CIM) continues to grow in palliative care. While research supports the use of many CIM therapies for symptom relief, the scope of provider-focused research on CIM remains poorly characterized. **Objectives:** We conducted a scoping review to characterize provider-focused research on CIM in palliative care in order to map existing evidence and identify knowledge gaps. **Methods:** We developed a protocol outlining the study population, concept, and context; then used a validated approach per the JBI manual and searched MEDLINE, EMBASE, CINAHL, and AMED. **Results:** We identified 34 studies that were conducted primarily in the US (n = 9) and UK (n = 6), focused mostly on nurse (n = 29) and physician (n = 22) providers, and employed questionnaires (n = 16) or qualitative (n = 15) methods. Studies investigated 58 CIM modalities, including massage (n = 13), music therapy (n = 12), and aromatherapy (n = 10), to address common symptoms including pain (n = 17), fatigue (n = 6), and nausea/vomiting (n = 6). Study outcomes included perceived benefits of CIM (n = 17) and types of CIM modalities that providers offer (n = 15). Uncommonly studied phenomena included referral patterns (n = 4), facilitators of provider recommendation of CIM (n = 3), and rates of CIM use (n = 3). **Conclusion:** Provider-focused research on CIM in palliative care can expand its scope by addressing perspectives of interdisciplinary providers, examining CIM modalities that patients report using, addressing symptoms commonly encountered in palliative

care, and researching provider-use-focused outcomes. We identify these possibilities for future studies in addition to opportunities for systematic investigations to enhance the safe and efficacious delivery of CIM in the palliative care setting.

全文链接: https://pan.ckcest.cn/rcservice//doc?doc_id=104469

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标题: An integrative therapeutic approach to elephantiasis nostras verrucosa: A case report

简介: Elephantiasis nostras is a chronic disorder that is difficult to treat. It is characterized by marked lymphedema, associated with hyperkeratosis, ulceration, deep skin folds and a cobblestone appearance of the skin. Causes include parasitic and bacterial infections, neoplasia and obesity, but numerous cases have uncertain aetiology. Treatment includes surgery and medication, which are associated with variable results. In the present study, a 72-year old female with renal insufficiency presented with leg enlargement of 3-4 years duration, which rendered her housebound. Examination showed massive lower limb enlargement, with typical cobblestone appearance. She was on furoseminde 80 mg/day. A diagnosis of elephantiasis nostras was made. Then, she was treated with increased furoseimide from 80 to 120 mg daily and homeopathic Apocynum cannabinum, CH30 potency, t.d.s. Unavailability of corresponding fit excluded the use of compressive stockings. The patient remitted over 18 months, with limb diameters dropping from 68/46 cm (right mid-calf/ ankle) and 67/43 cm (left mid-calf/ankle) to 64/43 cm (right mid-calf/ankle) and 64.5/45 cm (left mid-calf/ankle) at 6 months, 63/42 cm (right mid-calf/ankle) and 65/41 cm (left mid-calf/ankle) at 12 months, and 46/35 cm (right mid-calf/ ankle) and 48/36 cm (left mid-calf/ankle) at 18 months, with improvement of skin appearance. Elephantiasis nostras is not spontaneously remitting. In this resource-limited setting, furoseimide combined with homeopathic Apocynum cannabinum has proved valuable and may be used for similar cases.

全文链接: https://pan.ckcest.cn/rcservice//doc?doc_id=104476