

and vomiting related to chemotherapy in chemotherapy-naïve breast cancer patients.

Methods: 71 subjects were randomised either to receive antiemetics plus PMRT (n=38) or serve as the control group (n=31) receiving only antiemetics. The intervention included the use of PMRT 1 hour before chemotherapy administration and daily thereafter for another 5 sessions. The PMRT was delivered by a trained nurse therapist. Data about the frequency, duration and intensity of nausea and vomiting was recorded daily (every evening) for 7 days using the Morrow Assessment of Nausea & Emesis scale.

Results: The use of PMRT considerably decreased the frequency and duration of both nausea and vomiting, but not the intensity. Most reduction was observed between days 1 to 4 post-chemotherapy. For example, the duration of nausea in the experimental group was 59.5 minutes the 1st day, 136.6 min the 2nd day and subsiding at day 7 (0.74 min), whereas in the control group it was 82.1 min the 1st day, 276.5 min the 2nd day, and subsiding at day 7 (2.3 min) ($P<0.05$).

Conclusion: PMRT is a useful adjuvant therapy to antiemetics for chemotherapy-induced nausea and vomiting, and its use should be incorporated in the treatment plan of patients receiving chemotherapy.

Interactive Symposium

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Evaluation of complementary care in breast cancer- a scientific challenge

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In Sweden, with a population of about 8.8 million people and an incidence of about 5 700 women with breast cancer a year, complementary medicine is often desired by the patients but also rejected by traditional medicine because of lack of evidence. The first major study in Scandinavia on evaluating anthroposophic care in breast cancer has been going on in the County of Stockholm since 1995. The project group has been multidisciplinary with expertise from oncology, anthroposophic medicine, psychology and nursing. A matching procedure has been developed, where each breast cancer patient who has been admitted to the anthroposophic clinic has been matched with a "twin" with the same disease. The matching criteria have been based on stage of the disease, age, pre-admittance treatment and prognosis. 60 + 60 patients with a mean age of 49 years have been included in the study and followed for one year with a test-battery, where quality of life measurements have been central. Five-year follow-ups are ongoing. The results show that the survivors among the anthroposophic group, scoring lower quality of life from the beginning, are steadily improving their quality of life up to one year after admission to the study. This pattern is not being found in the matching group, where QoL is unchanged or deteriorating. Data are also available based on qualitative interviews.

The challenge of the study has been the matching part and the development and use of the different assessment instruments. Randomisation has not been possible because of the present health care system and that the fundings from the Swedish Cancer Society and other sources did not cover the stay of the patients in the anthroposophic clinic. In spite of our careful matching procedures, the women who had chosen complementary care, had a different professional profile where about 23% were in cultural professions. Also we cannot exclude their own motivation and expectations for this type of care as an important factor. In the future it would be of importance to find fundings which make it possible to use randomisation for a more strict comparison between different care procedures.

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Studies on breast cancer patients in complementary care

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In focusing on patient's own experiences of complementary care, the aim of this study was to find out what meaning breast cancer patients conferred to a stay in an anthroposophic clinic.

The data is part of a larger, matched multi-method study on the life situation among breast cancer patients from different care perspective in Sweden. From original 60 women with breast cancer in different stages, who had chosen complementary care in an anthroposophic clinic, 48 women participated in the follow up study. Two semi-structured interviews were performed with each woman at three and six months, starting from their stay at the anthroposophic clinic. Interviews were analysed using a qualitative content analysis. Preliminary findings shows that a majority of the patients (42 of 48) were satisfied and gave appreciating opinions of the

care at the follow-up. During the six months period, numbers of the women had experienced creative changes in their life's and perspectives on life. The experience of positive development did not decrease from three to six months rather it was slightly strengthened. Their creative and artistic interests were also increased and many women had made lasting changes in their diet by including more vegetables. A few women were ambivalent about the parts of the substance of the anthroposophic care. In conclusion most patients had experienced the complementary anthroposophic care as beneficial and inspiring for their own further development, even evaluated after three and six months.

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Complementary nursing in Germany with the emphasis on oncological patients - an investigation

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Germany, as other German speaking countries, has a tradition in complementary care. Complementary methods are part of every day life, and have a broad spectrum. A literature review pointed out, that many techniques, normal to German people and to German nurses do not show up in the English literature. Many of the techniques used are focussing on pain management, breathing, relaxation and wound care. There is a huge amount of courses offered, there are many projects with complementary nursing interventions in hospitals, community nursing and psychiatric care units, there are videotapes showing techniques and interviews with patients and there are many publications that describe experiences with complementary care interventions. Both nurses and patients describe positive effects on wellbeing and health, in connection to certain complementary techniques or programs.

In Germany there is hardly any research done in this field of nursing interventions. Therefore the "Institut fuer Pflegewissenschaft" (Institute of Science in Nursing) of the private University Witten/Herdecke has started a research program, focussing on complementary nursing interventions in Germany, in order to investigate the state of the art, the position complementary nursing interventions have in the field of nursing care, nursing decision making in complementary techniques or interventions, and the effects and effectiveness of some complementary interventions. In the paper the results of a literature review will be presented, with emphasis on what is known to complementary interventions in the care of oncological patients. Furthermore the results of a small study in decision making plus the first indications from a descriptive study on the position complementary interventions have in Germany.

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Complementary care in oncology nursing in Britain - What next?

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This paper reviews briefly the use of complementary therapies in the oncology setting through its introduction in the late 1970's and charting the progress in Britain to the present time. The present situation in the NHS is considered. Patients welcome the provision of complementary thera-