## **Complementary Medicine in Oncology: The struggle for power**

An investigation of the division of labour and professional autonomy and their part in the utilisation of complementary medicine within conventional cancer treatments.

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## ABSTRACT

The purpose of this study was twofold, firstly, to investigate the reasons behind a perceived rise in the use of complementary medicine in the oncology centres of England and Wales and secondly, to ascertain whether this occurred as a result of clinical motivation or role expansion and boundary disputes between healthcare professionals.

A longitudinal postal survey questionnaire was sent out in 1998 to all radiotherapy/oncology centres (n=56) and repeated in 2004 to enable comparisons to be made between the two points. In between, an in-depth series of interviews was undertaken in seven oncology centres with complementary medicine provision, to obtain further information on service delivery and then compared against role development in two oncology centres without complementary medicine provision.

Approximately 73% of all oncology centres in England and Wales (n = 65) utilise various complementary therapies alongside their conventional treatment provision for cancer. Over 80% of respondents felt that there had been an increase in usage over the previous five years, mainly due to greater patient demand and increased awareness by healthcare professionals of therapies. Complementary medicine was used to relieve stress and improve the general well-being of the patient, with aromatherapy, relaxation, massage and

reflexology being most commonly offered. Lay complementary practitioners administered the greatest range of therapies, being used by over 70% of centres to deliver their service. Amongst conventional health professional groups, nurses were the most common providers and also supplied the widest range of therapies. Very few medical practitioners appear to be directly involved. Service provision often began with small groups of individuals and is regularly supported through charitable donations. The overall picture is one of vibrancy and long-term fulfilment.

Excluding therapeutic radiographers, a struggle for power was not seen as central to many respondents, yet service provision and the division of labour has altered over time, particularly in relation to conventional practitioners, where nurses appear to have gained some element of professional autonomy and control in, and over, the utilisation of complementary medicine within the oncology centres of England and Wales.

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