Use of Complementary and Alternative Medicine in children with cancer treated at a Swiss University Hospital

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Objective

Aim was to investigate retrospectively the use of Complementary and Alternative Medicine (CAM) in the treatment of pediatric oncology patients for the first time in Switzerland. The proportion of general CAM-use and of the specific methods applied were examined. Of interest were also the communication between medical staff and patients regarding CAM, the reasons for choosing (respectively not choosing) CAM, as well as its perceived effectiveness.

Methods

All patients treated between 2002 and 2011 at the pediatric oncology unit of the University Hospital of Bern, were retrospectively surveyed about their CAM use during and after the conventional cancer treatment.

Results

Of the 257 patients contacted, 143 (55.6%) returned the questionnaire, and data of 131 (50.9%) patients could be analyzed. 61 of the children were girls (46.6%), the mean age at diagnosis was 6.7 years (range 0 – 17 years), and 16 (12.2%) had deceased. 66 (50.4%) of the usable questionnaires indicated families to have used CAM methods in conjunction with the cancer treatment. 28 children (21.4% of the total sample) had applied one or two different methods, and 38 (29%) had applied more than two methods. The most commonly used CAM methods were classical homeopathy (56.1% of the children using CAM), dietary supplements (30.3%) and over-the-counter homeopathy (28.8%). In conjunction with cancer treatment, 33 (25.2%) of all responding patients were informed by the medical staff about CAM, and 69 (52.7%) would have desired such information. Among the 66 CAM users, 51 (77.3% of the children applying CAM) expected an improvement of the general condition, 45 desired to strengthen the immune system (68.2%) and 40 intended to abate the adverse effects of conventional treatment (60.6%). 86.5% of the CAM-users perceived only positive, 3% both positive and negative, and 9% no effects of the CAM treatment. The most frequent reasons for not choosing CAM in 65 children were ignorance of this option (27.7%), avoiding further emotional stress for the child (26.2%) and belief of the ineffectiveness of CAM (24.6%),

Conclusion

CAM is used in about one half of pediatric oncology patients. Patients were only selectively informed by the medical staff about CAM as an additional treatment option. A majority of the CAM users reported positive effects of the respective treatment. More information on the possibilities of CAM as add-on in the treatment of pediatric oncology patients is needed for both, oncologic medical staff, and concerned families.