

Palliative and Supportive Care Research Development

# What is the impact of reflexology on palliative and cancer patients with constipation?

Date 25/03/19

### **Review Methods**

Search Strategy: A systematic search was conducted across a wide-ranging set of databases: Ovid AMED, Ovid Medline, including In-Process & Other Non-Indexed Citations, Ovid Embase, Ovid Emcare, and Wiley Cochrane Library.

The preliminary search strategy was developed on Ovid Medline using both text words and Medical subject headings from January 2009 to February 2019, restricted to English language and humans. The search strategy was modified to capture indexing systems of the other databases. (Search strategies available upon request).

To identify additional papers, the following website was searched:

<u>The complementary and alternative medicines in cancer consortium</u>

Also we searched <u>International Clinical Trials Registry Platform (ICTRP)</u> for any completed trials. In addition, electronic tables of content for the last two years were scanned in the following journals:

BMC Complementary and Alternative Medicine; Journal of Traditional and Complementary Medicine

Reference lists of systematic reviews were checked for any relevant studies.

The searches generated 213 citations after removing duplicates and irrelevant records. Figure 1 represents the flow of information through the different phases of the review.

**Inclusion**: Studies reporting the impact of reflexology on a population aged 18 and over with a cancer diagnosis receiving palliative care. Reflexology, defined as Reflexotherapy, zone therapy, foot massage and massage therapy.

**Exclusion:** Studies set in non-Organization for Economic Cooperation and Development (OECD) countries; case series studies consisting of less than 25 patients; non-english language studies

# Study selection/Quality Assessment/Data Extrac-

tion: Study selection was based upon review of the abstract by two independent reviewers. The full text was then assessed independently using a pre-designed eligibility form according to inclusion criteria.

Any discrepancies between the two reviewers were resolved by consensus or by recourse to a third reviewer.

## **Context**

In the last twenty years, there has been an increase in interest and use of complementary and alternative medicine (CAM). In 2000, the House of Lords Select Committee identified research priorities for CAM, including research into the effectiveness of these therapies and their specific effects and safety. Reflexology is one of the most popular complementary therapies. It has been defined as a "Chinese and Indian system of diagnosis and treatment dating from 3000 BC ..." based on the belief that the whole body is represented on the foot (mostly on the soles of the feet), and that the internal organs can be stimulated by pressing particular areas of the foot (less commonly the hands). The role of reflexology in hospice care is common but the evidence for use is frequently anecdotal.

Constipation is a common symptom in palliative care patients and and can have significant impact on symptoms and quality of life. It has been suggested that reflexology can be beneficial in the treatment of constipation. Therefore, the rationale for this review is to explore existing evidence on the impact of reflexology on symptoms of constipation on patients quality of life and wellbeing.

# **Key Findings**

We identified 25 papers to review in full-text. However, upon review of the full texts, none of these papers met the objective of this rapid review and all were excluded.

This highlights a need for primary research to investigate the effectiveness of reflexology or massage for the treatment of constipation amongst palliative care and cancer patients.

# A. Reliability of evidence

Not applicable

# **B.** Consistency of evidence

Not applicable

# C. Relevance of evidence

Not applicable















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# **Evidence Implications:**

# Clinical:

# Policy:

# **Glossary:**

CAM—complementary and alternative medicine

# Flow Diagram:

Identification

Records identified through database searching (n = 252)

Additional records identified through other sources (n = 20)

Records identified in total (n = 272)

Records screened after duplicates and irrelevant records removed

(n = 213)

Records excluded (n = 74)

Full-text

excluded, with

reasons

(n = 25)

Title and abstract records screened (n = 139)

Full-text articles assessed for eligibility (n = 25)

Studies included in the rapid review (n = 0)















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# **Excluded Studies:**

Studies were excluded due to various reasons including the following:

- Trial registry data but no published outputs.
- Papers on complementary therapies not specifically reflexology.
- Population not cancer/palliative care.
- Constipation not an outcome under study.

For the complete list of studies excluded at full text reviewing stage please contact PaCERSWCRC@cardiff.ac.uk

# Other references:

- 1. House of Lords Select Committee on Science and Technology. Complementary and alternative medicine. London: The Stationery Office; 2000.
- 2. Thomas KS, Nicholl JP, Coleman P. Use and expenditure on complementary medicine in England a population based survey. Complement Ther Med 2001; 9: 2–11. .
- 3. Gravett P. Making sense of English in alternative medicine. Edinburgh: Chambers, 1993.

# Additional materials available upon request:

- Critical appraisal / data extraction forms
- Search strategies
- List of excluded studies

This report should be cited as follows: Palliative Care Evidence Review Service. A rapid review: What is the impact of reflexology on palliative and cancer patients with constipation? Cardiff: Palliative Care Evidence Review Service (PaCERS); 2019 March.

**Permission Requests:** All inquiries regarding permission to reproduce any content of this review should be directed to Pacerswcrc@cardiff.ac.uk

**Disclaimer:** Palliative Care Evidence Review Service (PaCERS) is an information service for those involved in planning and providing palliative care in Wales. Rapid reviews are based on a limited literature search and are not comprehensive, systematic reviews. This review is current as of the date of the literature search specified in the Review Methods section. PaCERS makes no representation that the literature search captured every publication that was or could be applicable to the subject matter of the report. The aim is to provide an overview of the best available evidence on a specified topic using our documented methodological framework within the agreed timeframe.











