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Touch therapies for pain relief in adults

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Abstract

Background

Pain is a global public health problem affecting the lives of large numbers of patients and their families. Touch therapies (Healing Touch (HT), Therapeutic Touch (TT) and Reiki) have been found to relieve pain, but some reviews have suggested there is insufficient evidence to support their use.

Objectives

To evaluate the effectiveness of touch therapies (including HT, TT, and Reiki) on relieving both acute and chronic pain; to determine any adverse effect of touch therapies.

Search methods

Various electronic databases, including *The Cochrane Library*, MEDLINE, EMBASE, CINAHL, AMED and others from their inception to June 2008 were searched. Reference lists and bibliographies of relevant articles and organizations were checked. Experts in touch therapies were contacted.

Selection criteria

Randomized Controlled Trials (RCTs) or Controlled Clinical Trials (CCTs) evaluating the effect of touch on any type of pain were included. Similarly, only studies using a sham placebo or a 'no treatment' control was included.

Data collection and analysis

Data was extracted and quality assessment was conducted by two independent review authors. The mean pain intensity for completing all treatment sessions was extracted. Pain intensity from different pain measurement scales were standardized into a single scale. Comparisons between the effects of treatment groups and that of control groups were made.

Main results

Twenty four studies involving 1153 participants met the inclusion criteria. There were five, sixteen and three studies on HT, TT and Reiki respectively. Participants exposed to touch had on average of 0.83 units (on a 0 to ten scale) lower pain intensity than unexposed participants (95% Confidence Interval: -1.16 to -0.50). Results of trials conducted by more experienced practitioners appeared to yield greater effects in pain reduction. It is also apparent that these trials yielding greater effects were from the Reiki studies. Whether more experienced

practitioners or certain types of touch therapy brought better pain reduction should be further investigated. Two of the five studies evaluating analgesic usage supported the claim that touch therapies minimized analgesic usage. The placebo effect was also explored. No statistically significant ($P = 0.29$) placebo effect was identified.

Authors' conclusions

Touch therapies may have a modest effect in pain relief. More studies on HT and Reiki in relieving pain are needed. More studies including children are also required to evaluate the effect of touch on children.

Plain language summary

Touch therapies (Healing Touch, Therapeutic Touch and Reiki) for the treatment of pain relief for adults

Touch therapies (Healing Touch, Therapeutic Touch and Reiki) have been found to be useful in pain relief for adults and children. Pain is a global public health problem affecting the lives of large numbers of patients and their families. This review aims to evaluate the effectiveness of touch therapies for relieving pain, and determine the possible adverse effects of touch therapies. Although the lack of sufficient data means that the results are inconclusive, the evidence that does exist supports the use of touch therapies in pain relief. Studies involving more experienced practitioners tend to yield greater effects in pain reduction. It is also apparent that studies with greater effects are carried out by highly experienced Reiki practitioners. Further investigation should be conducted on whether or not a more experienced practitioner or a certain type of touch therapy provides better pain reduction. The claim that touch therapies reduce analgesic usage is substantially supported. The placebo effect has been also widely explored. No statistically significant placebo effect has yet been identified except through one study on children. The effect of touch therapies on pain relief in children requires further investigation. No adverse effect has yet been identified. This review suffers from a major limitation: the small number of studies and insufficient data. As a result of inadequate data, the effects of touch therapies cannot be clearly declared. This review shows that there is still a need for higher quality studies on the effectiveness of touch therapies in pain relief, especially studies on Healing Touch and Reiki. Future studies should make a concerted effort to systematically document side effects and report the experience of the practitioners to allow for the evaluation of the relationships between treatment effect and experience of practitioners. Future experiments should also follow the CONSORT statement when reporting in scientific journals, which helps to substantiate the reliability and validity of quality assessments.