

A Feasibility Study of Reiki for Outpatients of an Integrative Oncology Symptom Management Clinic

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Objective: The primary purpose of this pilot study was to examine the feasibility and acceptability of Reiki among patients with cancer and moderate-to-severe symptom clusters.

Methods: Adult patients with a neoplasm diagnosis and a score of > 4 on fatigue and two other symptoms were eligible to participate. The intervention was six 45-minute Reiki sessions within 6-8 weeks. Participants completed the PROMIS-29 quality of life scale at baseline. The Edmonton Symptom Assessment System (ESAS) was completed at pre- and post-Reiki session. Participant satisfaction and PROMIS-29 measures were completed 8 weeks after the first Reiki session. As a pilot feasibility study, participant recruitment, retention, data completeness, attendance, acceptability, and fidelity were the main focus. Descriptive statistics were generated for baseline and follow up ESAS and PROMIS data, but no hypothesis testing was done.

Results: Twenty-three patients were screened and of those, ten were eligible, enrolled in the study, and completed baseline measures. To date, six participants completed the intervention and follow-up measures, with data collection ongoing. All participants were female and non-Hispanic, 70% were White and 20% were African American/Black. Participants attended an average of 5.5 of 6 Reiki sessions. Overall pre-Reiki score for ESAS symptoms was 28.9 (13.5) and post-Reiki score was 18.3 (12.5).

Conclusions: It was feasible to conduct the study overall, the Reiki was acceptable, and fidelity to the intervention was satisfactory. Preliminary assessment of outcome measures indicated improvements in total ESAS score, and in pain, drowsiness, fatigue, nausea, appetite, shortness of breath, depression, anxiety, and overall wellbeing.