TITLE: Does The Use Of Healing Touch Decrease Anxiety, Decrease Emergence Delirium/Emergence Agitation And Decrease The Length Of Stay Of Post Operative Pediatric Patients?
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Clinical Issue:
Surgery is often stressful for children and their families. Increases in anxiety have been related to increases in post operative agitation and length of stay. We have been doing Healing Touch at Cincinnati Children's Hospital Medical Center since 1998. The staff in the Post Anaesthesia Care Unit (PACU) reported that patients who had Healing Touch seemed to wake up easier, were calmer and they were able to be discharged earlier.

What is Healing Touch?
Healing Touch is a biofield therapy that is an energy-based approach to health and healing. It uses touch to influence the human energy system.

Goal of Healing Touch
Is to restore harmony & Balance in the energy System.

The Energy System
• Energy centers,
• Fields that surround the body
• Meridians

Healing Touch complements conventional health care

Search Strategy:
Search strategy included searching databases in USA and Europe from 1960 to present including dissertations, national Healing Touch organizations, and submitting National Association of Children’s Hospitals and Related Institutions (NACRHI) questions.

Databases Included:
CINAHL, MEDLINE, Cochrane, EBSCO, PUBMED, OVID, Centre for Reviews & Dissemination, Healing Touch International and Healing Touch Program, Dissertations

Keywords:
Healing Touch
Bioenergy
Reiki
Energy healing
Energy medicine
Energy therapies
Length of stay
Anxiety
Anxiety in hospitalized children
Relaxation
Pain
Surgery
Emergence delirium
Children

Critical Appraisal:
62 articles were reviewed.
Narrowed the search to the most recent and highest level that addressed the PICO question.

There has been a great deal of research done with energy therapies with adults and some with premature infants but there have been very few studies done with children,

Results:
• 3 Meta-analysis or Systematic Reviews
• 3 Randomized Control Trials
• 3 Descriptive Studies
• 1 High Quality Qualitative Study

• 3 CCHMC PACU staff surveys
• 1 CCHMC Retrospective Study
• 2 NACHRI Responses

Grading the Body of Evidence
To answer one Clinical Question
• High: Sufficient number of high quality studies with consistent results.
• Moderate: Multiple Studies of lesser quality or with inconsistent results, or a single well-done study
• Low: Local opinion, case reports, case studies, and general reviews
• Grade Not Assignable: Insufficient design or execution, too few studies, and inconsistent result

*a- good quality  b- lesser quality
Based on CCHMC’s Table of Evidence Levels

Synthesis of Evidence

High grade of evidence to support the safety of Healing Touch with adults and children (Jain,2010 [1a]; Lee, (2008) [1a]; So, 2008 [1a]; Whitley, 2008 [1a]).

High grade of evidence to support Healing Touch for pain and anxiety with adults (Jain, 2010 [1a]; Lee, 2008 [1a]; So, 2008 [1a]).

High grade of evidence to support the use of HT to decrease stress with premature infants (Hanley, 2008 [2a]: Im, 2009[2b]; Whitley, 2008 [2a]).

Moderate evidence that Healing Touch may decrease the length of stay (MacIntyre, 2008 [2a]).

Moderate evidence to support the use of Healing Touch with children’ s stress & anxiety (Kramer, 1990 [4b]; Kemper, 2009 [4a]; Zimmer, 2008 [Unpublished]).

There is evidence that supports the use of Healing Touch and other biofield therapies with adults but little research has been done with children. To date, there has been no published research with HT and post operative pediatric patients.

Recommendations:
Do Research to Answer Questions:
1. Does Healing Touch decrease stress in post operative pediatric patients ages 3-6?
2. Does Healing Touch decrease emergence delirium/ emergence agitation?
3. Does Healing Touch decrease the time it takes to meet discharge criteria?

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