



The Use of Complementary and Alternative Medicine among Patients with Cervical Cancer Patients at H. Adam Malik Hospital Medan

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ABSTRACT

Background: Cervical cancer is the second most common cancer in Indonesia. As a culturally rich country, Indonesia has various traditional medicines that are passed through generations to maintain health conditions as local wisdom in the society. A combination of conventional complementary and alternative medicine (CAM) is often used by cancer patients. This study aims to describe the use of complementary and alternative medicine among cervical cancer patients in H. Adam Malik Hospital Medan.

Method: This is a descriptive observational study with a cross-sectional design. Subjects were patients diagnosed with cervical cancer at Gyneco-Oncology Clinic, H. Adam Malik Hospital, Medan. Fifty patients were interviewed with questions about the type, frequency, source of information, satisfaction rate, and openness to doctors regarding the use of CAM. Data were collected from July - September 2023.

Results: The types of CAM used were nutritional therapy (39.3%), mind-body interventions (27.1%), herbs (23.4%), massage (9.3%), and acupuncture (0.9%). Most of the subjects used a combination of 2 types of CAM (74%). Most of the respondents (82%) were satisfied with CAM, and 48% of respondents did not inform doctors regarding the CAM used.

Conclusion: All cervical cancer outpatients at H. Adam Malik Hospital used CAM together with conventional cancer therapy. The doctors should actively ask about the CAM that is used by the patients since not all patients disclose the information to their healthcare provider.

Keywords: CAM, Cervical Cancer, Complementary and Alternative Medicine

ABSTRAK

Latar Belakang: Kanker serviks merupakan kanker terbanyak kedua di Indonesia. Sebagai negara yang kaya budaya, Indonesia memiliki berbagai obat tradisional yang diturunkan secara turun-temurun untuk menjaga kondisi kesehatan sebagai kearifan lokal di masyarakat. Kombinasi pengobatan komplementer dan alternatif konvensional (PKA) sering digunakan oleh pasien kanker. Penelitian ini bertujuan untuk mendeskripsikan penggunaan pengobatan komplementer dan alternatif pada pasien kanker serviks di Rumah Sakit H. Adam Malik Medan.

Metode: Ini adalah studi observasional deskriptif dengan desain cross-sectional. Subjek adalah pasien yang didiagnosis dengan kanker serviks di Klinik Gineko-Onkologi, Rumah Sakit Umum H. Adam Malik, Medan. Lima puluh pasien diwawancarai dengan pertanyaan tentang jenis, frekuensi, sumber informasi,



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tingkat kepuasan, dan keterbukaan kepada dokter mengenai penggunaan PKA. Data dikumpulkan dari Juli - September 2023.

Hasil: Jenis PKA yang digunakan adalah terapi nutrisi (39,3%), intervensi pikiran-tubuh (27,1%), herbal (23,4%), pijat (9,3%), dan akupunktur (0,9%). Sebagian besar subjek menggunakan kombinasi 2 jenis PKA (74%). Sebagian besar responden (82%) puas dengan PKA, dan 48% responden tidak memberi tahu dokter mengenai PKA yang digunakan.

Kesimpulan: Semua pasien rawat jalan kanker serviks di Rumah Sakit H. Adam Malik menggunakan PKA bersama dengan terapi kanker konvensional. Para dokter harus secara aktif bertanya tentang PKA yang digunakan oleh pasien karena tidak semua pasien mengungkapkan informasi kepada penyedia layanan kesehatan mereka.

Kata kunci: CAM, Kanker serviks, Pengobatan komplementer dan alternatif

1. Introduction

In 2020, there were 604,000 new cases of cervical cancer, making it the fourth most frequent cancer among women. Of the 342,000 deaths attributed to cervical cancer, almost 90% are in lower-middle-income nations [1]. After breast cancer, cervical cancer is presently Indonesia's second most frequent cancer type. It ranks third among the causes of cancer death, with the most recent instances occurring in 2021 and accounting for 17.2 percent of all cancer cases or 36,633 persons [2]. For the province of North Sumatra, an early detection IVA test has been carried out with the results of 47 women who were detected IVA Positive (0.3%) and 36 suspected cancer (0.2%), as well as 75 people with tumors (0.5%) [3].

Cervical cancer is primarily caused (>95 percent) by the human papillomavirus. Additional risk factors include having HIV, smoking, using oral contraceptives for longer than five years, and sharing a home with someone who has cervical cancer [4]. Screening should be done to detect precancerous lesions (asymptomatic and painless) that can turn into cervical cancer within a few years [5]. Treatment for advanced cervical cancer is extremely difficult. Treatment for precancerous lesions that have progressed to cancer aims to prolong survival by slowing the spread of the disease and its symptoms [6].

Indonesia is a nation where various cultures coexist. This distinction creates a distinct and peculiar group. The traditional health culture is one aspect of Indonesian culture. Traditional medical systems are created by this civilization [7]. Traditional medicine is an empirical treatment system for Complementary Traditional Health Services, according to the Ministry of Health of the Republic of Indonesia. It could be incorporated and complimentary to contemporary medicine [8].

The combination of conventional and complementary medicine is often applied to cancer patients [9]. Surgery is the main course of treatment for people with early stages (stage IIA or lower), while chemotherapy is used for individuals with advanced stages (stage IIB or higher) [10]. Chemotherapy has reduced morbidity and mortality rates, but these agents can also damage healthy cells, namely rapidly proliferating cells (basal cells) [11]. Based on the study of Buckner et al. in [12], the use of complementary and alternative medicine (CAM) has increased in cancer patients. CAM includes practitioners not part of conventional medicine, such as acupuncture, massage, spirituality, plant utilization, etc. Patients believe the benefits of CAM support health, prevent, and reduce symptoms or improve immune function. In addition, religious and cultural factors that believe CAM is more "natural" make patients feel CAM is in line with their beliefs.

Based on research by Azhar et al. [13], as many as 33.3% of cancer patients use CAM, and cancer patients prefer CAM, reject at least one conventional treatment, and have a higher risk of death [14]. This study aims to describe the use of complementary and alternative medicine among cervical cancer patients in H. Adam Malik Hospital Medan.

2. Method

This research is a descriptive study with a cross-sectional study method using primary data obtained by interviews at Obstetrics & Gynecology and Oncology Polyclinics H. Adam Malik Hospital Medan in July – September 2023. The interviews were done using a questionnaire that was adapted from Wahyuni in [15] using Bahasa Indonesia. Cervical cancer patients became the population in this study. Fifty patients with a diagnosis of cervical cancer were interviewed in this study. Cervical cancer patients who run complementary and alternative medicine were the inclusion criteria in this study.

2.1. Statistical Analysis

The data were analyzed with SPSS 28 in univariate analysis. Ethical clearance has been approved by the Ethical Committee of Faculty Medicine, Universitas Sumatra Utara.

3. Result

Based on Table 5.1, it was found that most cervical cancer patients (40%) were individuals in the age group of 50-59 years, followed by the age group 40-49 years (36%), 60-69 years (14%), and 30-39 years being the last age group (10%). In the latest education, high school was the majority of education (66%), followed by elementary school (20%), and the lowest was junior high school (14%). In the occupational group, non-working patients were the largest distribution (64%), and as many as 36% do as parking attendants and self-employed. Marital status: more cervical cancer patients are married (74%), separated/widowed (24%), and not married is the lowest (2%). The monthly income group of IDR 1,000,000-2,000,000 was the income of cervical cancer patients with the most subjects (32%), followed by the income of IDR 1,000,000 (28%), >IDR 2,000,000-3,000,000 (18%), <IDR 1,000,000 (14%), >IDR 3,000,000 (6%), and 2% with no income. For the first-time diagnosis, most subjects were first diagnosed more than 1-6 months (72%), followed by >6 months-1 year (16%), >1 year (10%), and finally <1 month (2%).

Table 1. Characteristics of Respondents

Characteristic	Frequency	%
Age (year)		
30-39	5	10
40-49	18	36
50-59	20	40
60-69	7	14
Latest Education		
Elementary School	10	20
Junior High School	7	14
Senior High School	33	66
Occupation		
Not Working	32	64
Working	18	36
Marital Status		
Not Married	1	2
Married	37	74
Separated/Widowed	12	24
Monthly Income		
No Income	1	2
<IDR 1,000,000	7	14
IDR 1,000,000	14	28
IDR 1,000,000 – 2,000,000	16	32
IDR 2,000,000 – 3,000,000	9	18
>IDR 3,000,000	3	6
First-Time Diagnosed		
<1 month	1	2
1-6 months	36	72
6 months-1 year	8	16
>1 year	5	10
Total	50	100

Table 2 shows that the most common first treatment recommendation was radiotherapy (66%), followed by surgery and no intervention (16%), and the lowest was chemotherapy (2%)

Table 2. First Treatment Recommendation by Doctor

First Treatment Recommendation	Frequency	Percentage (%)
Radiotherapy	33	66
Operative	8	16
Chemotherapy	1	2
No Any Recommendation	8	16
Total	50	100

According to Table 3, the most common type of CAM used by subjects (can be more than 1) is nutritional therapy (39.3%) such as consumption of pear juice, dragon fruit, beetroot, boiled egg, and milk. Mind and body interventions (27.1%) by praying together at a place of worship. Pharmacological and biological therapy (23.4%), such as consumption of pirated roots, soursop leaves, and herbal products with trademarks, followed by manual healing methods: massage, electric massage chair (9.3%), and the lowest CAM service system in the form of acupuncture (0.9%).

Table 3. Distribution of CAM Used

Types of CAM	Frequency	Percentage (%)
Mind and Body Intervention	29	27.1
CAM Service System	1	0.9
Manual Healing Methods	10	9.3
Pharmacological and Biological Therapy	25	23.4
Nutritional Therapy	42	39.3
Total	107	100

Table 4 shows that more than half of the subjects used a combination of 2 types of CAM (74%), followed by a combination of 3 CAM (20%), and 6% who only used 1 type of CAM in the form of pharmacological and biological treatment (herbal products) itself as well as nutritional therapy itself.

Table 4. Combination of CAM Used

CAM Combination	Frequency	Percentage (%)
Only 1 type	3	6
2 Types	37	74
3 Types	10	20
Total	50	100

According to Table 5, subjects who used CAM daily had the highest frequency (78%), followed by sometimes (12%), weekly (8%), and the lowest only once (2%).

Table 5. Frequency of Time Subjects Used CAM

Frequency of Time	Frequency	Percentage (%)
Daily	3	6
Weekly	37	74
Sometimes	10	20
Only Once	1	2
Total	50	100

Table 6 illustrates that 100% are still adherent to conventional treatment. A patient who has been declared cured confirmed that she will always come for control.

Table 6. Subjects' Adherence to Conventional Treatment

Adherence	Frequency	Percentage (%)
Yes	50	100
No	0	0
Total	50	100

Table 7 shows the reasons subjects using CAM to boost the immune system (38%), followed by reducing symptoms caused by cancer (22%), providing a feeling of comfort, feeling calmer, and avoiding stress and curing cancer equally (14%), and reducing the side effects from conventional treatment (12%).

Table 7. Subjects’ Reasons for Using CAM

Reasons	Frequency	Percentage (%)
Cure Cancer	7	14
Boost Immune System	19	38
Reducing Side Effects from Conventional Treatment	6	12
Provide comfort, calmer feeling, and avoid stress	7	14
Reducing symptoms caused by cancer	11	22
Total	50	100

Based on Table 8 found that almost half of the subjects expected CAM to increase the body's ability to fight cancer (46%), followed by CAM to relieve cancer symptoms (18%), 16% of subjects expected CAM to improve physical health, 14% of subjects expected it to directly treat/cure cancer, and finally expected CAM to relieve the symptoms of conventional treatment received (6%).

Table 8. Subjects’ Reasons for Using CAM

Expected benefit	Frequency	Percentage (%)
Directly cure cancer	7	14
Increase the body’s ability to fight cancer	23	46
Relieve the symptoms of conventional treatment received	3	6
Relieve cancer symptoms	7	14
Improve physical health	8	16
Total	50	100

According to Table 9, satisfaction was the highest level of satisfaction (82%). Very satisfied was in the middle (14%), and the lowest was disappointed (4%).

Table 9. Satisfaction Using CAM

Satisfaction	Frequency	Percentage (%)
Very Satisfied	7	14
Satisfied	41	82
Disappointed	2	4
Total	50	100

Table 10 shows there were no side effects of the CAM used (100%).

Table 10. Side Effects Using CAM

Side Effects	Frequency	Percentage (%)
Yes	0	0
No	50	100
Total	50	100

Based on Table 11, healthcare professionals are the most common source of CAM information (34%), followed by friends (30%), family (24%), internet (10%), and finally salesmen/women (2%).

Table 11. Source of CAM Information

Source of CAM Information	Frequency	Percentage (%)
Internet	5	10
Family	12	24
Salesman/woman	1	2
Friends	15	30
Healthcare Professionals	17	34
Total	50	100

Table 12 shows the source of acquiring the CAM. The market was the most common source of obtaining CAM based on the types of CAM used, consisting of the types of CAM: massage, herbs, fruit, vegetables, and other nutritional therapies. Followed by places of worship as a source of body and mind interventions, family, and friends. Then, followed by the marketplace, and the last sales as well as CAM practitioners with the type of CAM: acupuncture.

Table 12. Source of Acquiring CAM

Types of CAM	Source of Acquired							Total
	Family	Market -place	Market	Sales	Friends	Places of Worship	CAM Practitioners	
Mind and Body Intervention	10	-	-	-	-	19	-	29
CAM Service System	-	-	-	-	-	-	1	1
Manual Healing Methods	-	-	2	-	8	-	-	10
Pharmacological and Biological Therapy	2	4	16	-	3	-	-	25
Nutritional Therapy	3	-	36	1	2	-	-	42
Total	15	4	54	1	13	19	1	107

According to Table 13, more than half of the subjects still informed their doctors about their CAM use (52%), while 48% of the subjects did not inform their doctors about their CAM use.

Table 13. Combination of CAM Used

Side Effects	Frequency	Percentage (%)
Yes	0	0
No	50	100
Total	50	100

4. Discussion

According to published research, there may be a typical CAM user profile that includes younger age, greater educational attainment, and higher economic standing [16]. This was not verified in the current investigation, nevertheless, as there was no discernible difference between the nonuser group and our sample of CAM users. This shows that there may not be a typical profile of CAM users because many cancer patients, regardless of their sociodemographic traits, will stop at nothing to improve their prognosis. Most of the patients' CAM was herbal therapy. This result was in line with findings from earlier research projects carried out in Turkey and other nations. Herbal remedies were the most popular alternative forms of treatment for adult cancer patients, according to earlier Turkish studies [17].

This outcome was also in line with prior research on the subject, showing that one of the most popular alternative forms of treatment for cancer patients was herbal therapy [18]. Similar to what Shen et al. (2002) reported, friends and family members are the most common sources of information on complementary and alternative medicine [19]. Merely 2.4% of patients got information about complementary and alternative medicine from their doctors and/or nurses. Patients may withhold their usage of complementary and alternative medicine from traditional medical experts out of concern about unfavorable comments. These results also suggest that patients rely on firsthand accounts and unstructured, informal information. This information can be of very poor quality. However, the practitioner has access to reliable information sources [20]. Effective communication abilities and frank discussions regarding CAM concerns with patients are essential for both safeguarding them against unwarranted and detrimental CAM use and helping them make the best choice. According to the current study, many patients with gynecologic cancers would rather use CAM treatments in addition to existing cancer treatments. Herbal medicine is one of the CAM therapies that the majority of women with gynecologic cancer frequently utilize. It was shown that cancer patients typically learned about CAM from sources that aren't as reputable such as friends, family, and the media.

Healthcare professionals should often inquire about CAM use from their patients and go over the advantages and disadvantages of doing so. Additionally, healthcare professionals who treat cancer patients should become more knowledgeable about CAM due to the high frequency of CAM use among female cancer patients.

5. Conclusion

Most cervical cancer patients use alternative complementary medicine and a combination of two types of CAM is the most common choice. Nutritional therapy is the most common CAM choice: nutritional milk, beet juice, dragon fruit, pear, and egg white, and patients never leave conventional treatment.

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