Complementary therapies facing stress in the puerperal period: integrative literature review

RESUMO | Objetivo: Identificar evidências científicas na literatura sobre o uso de terapias complementares no enfrentamento do estresse no período puerperal. Método: A coleta de dados foi realizada de janeiro a março de 2021. Trata-se de uma revisão integrativa da literatura, utilizou-se estratégia PICO para elaboração da pergunta de pesquisa: Quais são as evidências científicas encontradas na literatura sobre o uso de terapias complementares como benefício para enfretamento de estresse no período puerperal? Utilizou-se as bases de dados: SciELO; LILACS; MEDLINE; CINAHL e EMBASE. Os descritores utilizados segundo DESC/MESH foram: Período Pós-Parto, Terapias Complementares, Estresse Emocional e Estresse Psicológico. Resultados: Encontrados 49 artigos, dos quais 6 selecionados, dentre as práticas utilizadas 6 terapias complementares distintas foram identificadas: biofeedback ou bioenergética; acupressão; reflexologia; musicoterapia e yoga. Conclusão: Os resultados dos estudos confirmaram a existência de evidências de que terapias complementares são benéficas para o enfrentamento do estresse no período puerperal. **Descritores:** Período Pós-Parto; Terapias Complementares; Estresse Emocional; Estresse Psicológico.

ABSTRACT To identify scientific evidence in the literature on the use of complementary therapies in coping with stress in the puerperal period. Method: Data collection was carried out from January to March 2021. This is an integrative literature review, using the PICO strategy to prepare the research question: What is the scientific evidence found in the literature on the use of therapies supplements as a benefit for coping with stress in the puerperal period? The following databases were used: SciELO; LILACS; MEDLINE; CINAHL and EMBASE. The descriptors used according to DESC/MESH were: Postpartum Period, Complementary Therapies, Emotional Stress and Psychological Stress. Results: 49 articles were found, 6 of which were selected, among the practices used, 6 distinct complementary therapies were identified: biofeedback or bioenergetics; acupressure; reflexology; music therapy and yoga. Conclusion: The results of the studies confirmed the existence of evidence that complementary therapies are beneficial for coping with stress in the puerperal period

Keywords: Postpartum period; Complementary Therapies; Emotional Stress; Psychological stress.

RESUMEN | Objetivo: Identificar evidencia científica en la literatura sobre el uso de terapias complementarias en el afrontamiento del estrés en el puerperio. Método: La recolección de datos se realizó de enero a marzo de 2021. Se trata de una revisión integradora de la literatura, utilizando la estrategia PICO para preparar la pregunta de investigación: ¿Cuál es la evidencia científica encontrada en la literatura sobre el uso de terapias complementarias como beneficio para el afrontamiento? con estrés en el puerperio? Se utilizaron las siguientes bases de datos: SciELO; LILACS; MEDLINE; CINAHL y EMBASE. Los descriptores utilizados según DESC / MESH fueron: Posparto, Terapias complementarias, Estrés emocional y Estrés psicológico. Resultados: se encontraron 49 artículos, de los cuales se seleccionaron 6, entre las prácticas utilizadas, se identificaron 6 terapias complementarias distintas: biofeedback o bioenergética; acupresión reflexología; musicoterapia y yoga. Conclusión: Los resultados de los estudios confirmaron la existencia de evidencia de que las terapias complementarias son beneficiosas para afrontar el estrés en el puerperio. **Palabras claves:** Período posparto; Terapias complementarias; Estrés emocional; Estrés psicológico.

Izabel Dayana de Lemos Santos

Nurse. Doctoral Student in Nursing. State University of Londrina, Paraná, Brazil. ORCID: 0000-0003-3559-5350

Tatiane Tokushima

Nurse Coordinator of the obstetrics sector of the Hospital São Francisco Instituto Vida. Master's at State University of Londrina, Paraná, Brazil.

Franciane Maria da Silva Curan

Nurse. Doctoral Student in Nursing. State University of Londrina, Paraná, Brazil. ORCID: 0000-0002-9786-5451

Mariana Haddad Rodrigues

Nurse. Post-Doctoral Student in Nursing. State University of Londrina, Paraná, Brazil. ORCID: 0000-0002-8339-9760

Fabiana Fontana Medeiros

Nurse. Doctoral Student in Nursing. State University of Londrina, Paraná, Brazil. ORCID: 0000-0002-7876-572X

Alexandrina Aparecida Maciel Cardelli

Nurse. PhD, Associate in the Nursing Department. Area of Women's Health and Gender. Health Sciences Center, State University of Londrina, Paraná, Brazil ORCID:0000-0002-0222-8821

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ORCID: 0000-0002-8139-339X

INTRODUCTION

uring pregnancy, many changes occur in the woman's body in order to receive and nourish the developing fetus. Changes that happen in a slow and progressive way, whose outcome is childbirth, soon after childbirth, the puerperal period begins, which is a phase of the female reproductive cycle full of changes, unlike pregnancy, are transformations that come abruptly, the body needs to mobilize itself to return to the pre-pregnancy body, however, in addition to structural and hormonal changes, women face emotional and social transitions. (1-3)

In addition to the changes that occur due to the puerperium, women need to manage adaptations to the new family structure and the challenges in maintaining the general well-being of the newborn, which are related to basic physiological needs, as well as those related to the development process and affection of the new family member. There are several circumstances surrounding the adaptive process of the puerperal period, which can lead to repeated stressful situations. (4,5)

Stress is a natural process in the body that occurs at different times in life, despite being linked to a situation of danger or threat, it is also present in intense adaptive processes, such as in the puerperal period. Stress is directly linked to cortisol discharges in the body which, in a chronic situation, can have outcomes such as high blood pressure, diabetes, in addition to psychological disorders such as anxiety and depression. 5-8

There are several ways to face stressful situations, prevent damage to both physical and emotional health, and one of the ways that has been gaining ground in the daily lives of the general population is the practices of Complementary Therapies (CT). CTs contemplate the human being in an integral and holistic way, aiming at a positive result both in the physiological and psychological aspects. The techni-



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ques that incorporate CTs are ancient, however they were incorporated into the Unified Health System (SUS) a short time ago. (9,10)

In 2006, CT was incorporated into the SUS, through the National Policy on Integrative and Complementary Practices (PNPIC - Política Nacional de Práticas Integrativas e Complementares), which presented guidelines for traditional Chinese medicine/acupuncture, homeopathy, medicinal plants and phytotherapy, anthroposophical medicine and social thermalism/crenotherapy. In 2018, with the objective of reaching the goals set by the World Health Organization (WHO) in relation to CT, more technical CT public policies were incorporated: apitherapy; aromatherapy; bioenergetics; family constellation; color therapy; geotherapy; hypnotherapy; laying on of hands; ozone therapy and flower therapy. (11-13)

It is assumed that there is a knowledge gap in relation to the use of CT in the puerperal period and in agreement with the literature that one of the outcomes may be chronic stress that directly interferes in their life dynamics, it is believed that complementary therapies can be a beneficial alternative at this stage of a woman's reproductive cycle. Given the above, there was a motivation to carry out an integrative review to compile studies that investigate CT practices that help to cope with stress in the puerperal period, so this research aims to identify scientific evidence in the literature on the use of complementary therapies in coping with stress in the puerperal period.

METHOD

This is an integrative literature review, a method that gathers, synthesizes and analyzes the results of a thorough research on a specific topic, which contributes to in-depth knowledge about the question raised, organized into six phases: the first phase is related to the identification of the theme and selection of the hypothesis as well as the elaboration of the research question; the second phase establishes inclusion and exclusion criteria for the researched studies; third phase, is the time to search the literature; fourth phase, stage in which data will be extracted and analyzed from the studies of the studies included in the review; fifth phase, concerns the interpretation and synthesis of results; sixth and final phase review presentation. (14)

As a method to elaborate the research question, the PICO strategy was used, acronym for patient, intervention, comparison, outcomes. The use of this strategy contributes to the identification of descriptors that facilitate the search for important studies in the databases for the composition of the integrative review. Thus, the research question elaborated was: What are the scientific evidences found in the literature about the use of complementary therapies as a benefit for coping with stress in the puerperal period? The first item in the strategy (P) refers to postpartum women; the second (I) to complementary therapies; the third item of the strategy was not used in this integrative review to compose the research question; the fourth and last items (O) are related to the benefits for coping with stress. (15)

The search for studies was carried out from January to March 2021, in the following databases and/or electronic libraries: Scientific Electronic Library Online (SciELO); Latin American and Caribbean Literature on Health Sciences (LILACS); Medical Literature Analysis and Retrieval System Online (MEDLINE/PubMed); Cumulative Index to Nursing and Allied Health Literature (CINAHL) and Excerpta Medica database (EMBASE/Emtree).

The controlled descriptors were selected in line with the vocabulary of the Health Sciences Descriptors (DECS) and Medical Subject Headings (MeSH), in Portuguese, English, Spanish and French, as follows: Postpartum Period (Período Pós-Parto, Período posparto, Période post-partum); Complementary

Therapies (Terapias Complementares, Terapias complementarias, Thérapies complémentaires); Emotional Stress



It is assumed that there is a knowledge gap in relation to the use of CT in the puerperal period and in agreement with the literature that one of the outcomes may be chronic stress that directly interferes in their life dynamics, it is believed that complementary therapies can be a beneficial alternative at this stage of a woman's reproductive cycle

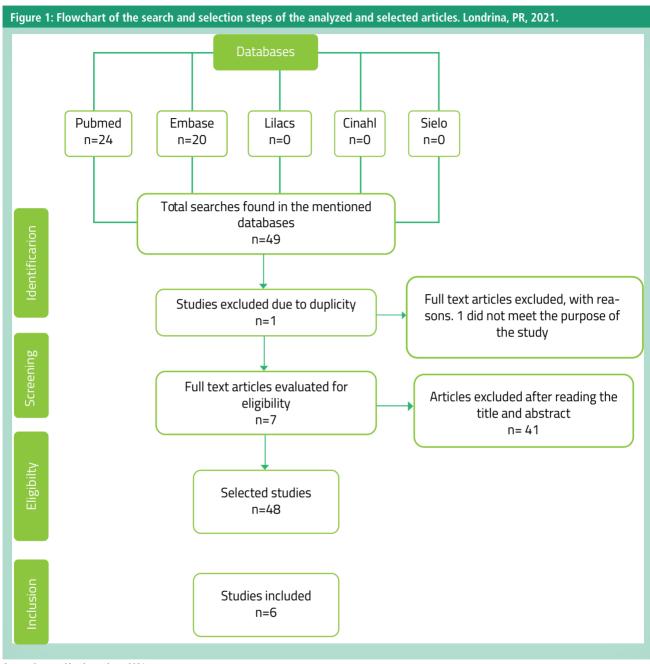


(Estresse Emocional, Estrés emocional, Stress émotionnel); Psychological stress

(Estresse Psicológico, Estrés psicológi-Stress psychologique). The terms were combined in different ways, to ensure an expanded search of the theme, between the combinations the Boolean operator AND was used, whose result of the crossing was used in all databases as follows: ((Período Pós-Parto) AND (Terapias Complementares) AND (Estresse Emocional)); ((Postpartum Period) AND (Complementary Therapies) AND (Stress, Psychological)); ((Periodo Posparto) AND (Terapias Complementarias) AND (Estrés Psicológico)); ((Période post-partum) AND (Thérapies complémentaires) AND (Stress psychologique)); ((Período Pós-Parto) AND (Terapias Complementares) AND (Estresse Psicológico)); ((Postpartum AND (Complementary Therapies) AND (Emotional Stress)); ((Periodo Posparto) AND (Terapias Complementarias) AND (Estrés emocional)); ((Période post-partum) AND (Thérapies complémentaires) AND (Stress émotionnel)), this search pattern was followed in all databases.

The inclusion criteria defined for the analysis of the studies were: population group of women in the puerperal period; published between the years 2000 to 2020; available in full; that presented the use of complementary therapies in coping with puerperal stress. Traditional literature reviews, secondary studies, reply letters, editorials, theses, dissertations, opinion articles, duplicate articles and articles that did not answer the research question were excluded. There was no language limitation due to the limited scientific production on the subject.

A total of 49 articles were identified, of which one was excluded due to duplicity, resulting in 48 unique articles. The titles and abstracts were subsequently read according to the criteria established for inclusion and exclusion of studies. After completing this step, 41 articles were excluded, 7 articles met the eligibility criteria, however after reading the research in its entirety,



Source: Prepared by the authors, 2021.

2 articles were excluded, one for using a practice not recognized in Brazil as complementary therapy and the other because it did not specifically answer the guiding question of the integrative review, which resulted in a total sample of 6 articles (Figure 1).

For data collection, a structured

instrument developed by the main researcher was used, consisting of items related to the identification of the article, these being the title, authors, year of publication and country in which the research was conducted, as well as the type of study and Level of Evidence (LE), objective, method and materials, main outcome.

To determine the LE, a hierarchical system was used, according to concepts used by nursing scholars, based on the strength of scientific evidence, categorized into seven levels: level 1 (weakest), evidence from systematic review or meta-analysis of randomized

complementary therapies

controlled clinical trials or clinical guidelines based on systematic reviews of randomized controlled clinical trials; level 2, evidence derived from at least one well-designed randomized controlled clinical trial; level 3, evidence obtained in well-designed clinical trials, without randomization; level 4, evidence from well-designed cohort and case-control studies; level 5, evidence derived from a systematic review of descriptive and qualitative studies; level 6, evidence derived from a single descriptive or qualitative study; level 7, evidence from the opinion of authori-

ties or expert report. (16,17)

RESULTS

The sample consisted of 6 scientific articles that specifically responded to the objective of the integrative review. For a better analysis of the data, a table was built, which allowed the gathering and epilogue of information, such as: identification of the article (authorship, year of publication, country in which the research was carried out, linking language and study title); and methodological characteristics (type of study,

level of scientific evidence, objective, method and main outcome), presented in Table 1 according to the year of publication.

The studies included in the sample were published in 2010 (n=1), 2011 (n=1), 2014 (n=1), 2015 (n=1) and 2017 (n=2), carried out in 4 countries: Japan (n=1), Korea (n=3), China (n=1) and Ireland (n=1), of which 4 were written and disseminated in English and 2 in Korean. As for the research design, 2 studies used a randomized clinical trial (LE 2), 2 used a case-control (LE 4), 1 applied the quasi-experimental method

Autor / Ano /País / Idioma	Título do artigo	Tipo De estudo/ NE	Objetivo	Método	Desfecho principal
Tseng, Y F; Chen, C H; Lee, CCS 2010 Chi- na Inglês	Effects of liste- ning to music on postpartum stress and anxie- ty levels	Randomi- zed clinical trial (n=77) LE 2	It investigated the effect of listening to specially selected relaxing music at home, in a self-regulated way, on the perceived stress and anxiety state in the puerperal period.	Experimental group listened to music at home for at least 30 minutes a day for two weeks and received postpartum care, associated with the application of the Perceived Stress Scale	This study did not provid evidence that pre-selecte designer music reduced level of stress and anxiety amon postpartum women.
Shin, H S; Ryu, K H; Song, Y A 2011 Coreia Coreano	Effects of Laughter Therapy on Postpartum Fatigue and Stress Responses in Postpartum Women	Non-ran- domized clinical trial (n=67) LE 3	Examine the effects of laughter therapy on fatigue and stress in postpartum women	The experimental group received specialist laugh therapy for 60 minutes, twice a week for 2 weeks, a total of 4 sessions, associated questionnaire and collection of cortisol from breast milk	Laughter therapy has a posit ve effect on reducing fatigu and stress in postpartur women
Kudo, N; Shinohara, H; Kodama, H 2014 Japão Inglês	Biofeedback Intervention on Heart Rate Variability for Psychological Stress Reduction During the Early Postpartum Period	Case control (n= 55) LE 4	To examine the effectiveness of biofeedback intervention on heart rate variability for reducing psychological stress in women in the early postpartum period	Implementation of Biofeedback on heart rate variability using a portable device and respiratory control, within a month, from the fourth day after delivery.	Postpartum women who im plemented biofeedback for Postpartum Heart Rate Variability were relatively free fror anxiety and complained less of sleep difficulties one mont after delivery.

the control group.

reduced stress.

Choi, MS; Effects of foot The fatigue level, urine corti-Lee, E J; reflexology mas-Identify the effects of foot re-Case con-Foot reflexology massage was provisol level and depression level 2015 sage on fatigue. flexology massage on fatigue. trol (n=70) ded to the experimental group once a were significantly lower in the Coreia stress and depression in posstress and de-LE 4 day for three days. experimental group than in pression in pos-Coreano tpartum women tpartum women Jung, GS; Effects of acu-In-Rvouna The experimental group depressure massa-Choi, IR; To investigate the effects of acumonstrated a significantly ge on meridians Almost Kang; HY; pressure massage on meridians The experimental group received acugreater decrease compared to on body comexperimen-Choi, EY on body composition, edema, pressure massage on the meridians for the control group in measures position, edema. tal (n=39) 2017 stress and fatigue in postpartum 90 minutes daily for 5 days. of body composition, edema, stress and fati-LE 3 Coreia women. total subjective stress, psychoque in postparlogical stress and fatigue. Inglês tum women preliminary Timlin, D; randomized con-Rando-Simpson, The experimental group received a trol trial of the mized Establishing whether a postpar-The intervention group that EEA weekly yoga session for 4 weeks and effects of yoga experimentum yoga intervention improves practiced yoga improved 2017 a 20-minute DVD to practice at home, psychologital study the psychological well-being of psychological well-being and Irlanda coupled with measures of perceived

primiparas

Source: Prepared by the authors, 2021.

cal

Inglês

(LE 3) and 1 used a non-randomized clinical trial (LE 3), all methods with quantitative aspects.

well-being

in primiparas in Northern Ireland (n=32)

LE 2

Among the complementary therapies used in research, 6 different procedures were identified: biofeedback or bioenergetic activity; the acupressure technique as well as reflexology; music therapy; the practice of yoga and laugh--inducing therapy. Among the main outcomes, most studies showed positive results when analyzing the technique used, only the study on the effects of listening to music did not provide significant evidence.

DISCUSSION

After analyzing the studies included in the integrative review, it is noted that research that answers the guiding question, related to CT, is concentrated in Asian countries, as it was also in these regions that traditional Chinese medicine (TCM) began. It was from the TCM that several CTs originated, they are ancient practices in Asian countries, however it was only in the late 70s that the WHO created a Traditional Medicine program, with the objective of encouraging and promoting policies and practices in this area. (18-23)

Even with the scarcity of scientific evidence to answer the integrative review question, the studies that were included had a satisfactory EN, as well as an acceptable methodological rigor, even though some researches showed a deficiency in the sample calculation, a concern with the methods for verification of results. Of the six articles included, two used the randomized clinical trial as a research design, considered to be the gold standard research method

to attest to the effect of a particular therapy. (19, 24-25)

stress and well-being.

Among the numerous CTs recognized by the WHO, six practices were found in this review aimed at coping with stress in the puerperal period, most strategies showed positive results, only one article did not bring significant statistical differences, it was the study aimed at music therapy, however, the authors emphasize the importance of a careful look by health professionals for women in coping with stress in the puerperal period. (12, 19)

Among the other CTs found in this research, all had statistically significantly positive results. One of the most interesting and unusual techniques to have assertive results was laughter therapy. Regarding the central nervous system (CNS), laughter can bring a feeling of joy, which results in the release of

complementary therapies

dopamine, a neurotransmitter responsible for the feeling of well-being, in addition to the release of dopamine, laughter induces the release of serotonin and endorphins thus lowering cortisol levels in the body. (6,20,26)

TCM is based on the conception of the human being as an indivisible being, whose balance of energies directly reflects on the physical and emotional well-being, thus aiming at a comprehensive and holistic care. Among the other CTs found, two articles refer to ancient and recognized practices, such as acupressure, a massage technique similar to acupuncture, but instead of using needles in the meridians, which are the channels that connect the surface with specific organs, pressure with the fingertips is used, as well as reflexology that with pressure in certain places on the feet, positive results are observed in other parts of the body, these are techniques that promote relaxation and well-being, sensations directly linked to the reduction of stress levels. 12. 22-23

Another practice with confirming results in coping with stress in the puerperal period was yoga, an exercise considered psychophysical that brings balance and health to the individual's physical, mental, emotional and spiritual dimensions. It is also associated with the regulation of the hypothalamic-pituitary-adrenal axis (HPA) which corresponds to the release of cortisol in the face of a stressor. (27-29)

Stress, in addition to acting on the HPA, can have significant influences on the autonomic nervous system (ANS), more specifically on the sympathetic nervous system (SNS), which is automatically triggered by stressful situations, preparing the body for fight or flight, increasing the supply of glucose and blood irrigation for the body, a process by which in chronic situations it can generate unwanted consequences for humans, a strategy that proved to be effective for the balance of the SNS was Biofeedback, consisting in the control of breathing to modify the variability of heartbeats, signaling to the SNA that the SNS does not need to be activated, consequently returning to the balance of central signals for the organism.(21, 30,31)

CONCLUSION

Although CTs come from ancient knowledge such as TCM, they are little used in the health field for stabilizing, promoting and preventing the various conditions of physiological, physical and emotional imbalance in human beings. However, the results of the primary studies included in the integrative review confirm the existence of evidence that CT is beneficial for coping with stress in the puerperal period.

There is a significant difference between the articles identified in the database and those included in the study, which highlights a difficulty in preparing an integrative review research that elucidates issues that are not frequent in the literature.

Observing the scarcity of research on the subject, it is expected that the results of this research collaborate so that more research using CT in coping with puerperal stress is carried out and that they can be tools used by health professionals in order to propose a positive experience of the puerperium for several women.

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