

NURSING INTERVENTIONS: ALTERNATIVES IN CONSOLIDATION

Emilia Campos de Carvalho¹

In the first decades of the 20th century, the concern to develop Nursing as a science was intensified, generating a movement to incorporate research methods used by pioneers from other knowledge areas. This search, still currently observed, has enabled great advances for good quality care, however, there are still doubts about which procedure is more efficient for care to patients in several situations, respecting the autonomy, legal protection and technical competence of professionals to perform the nursing practice.

Clinical procedures aim at recognizing and predicting the evolution of complications in the health condition, besides treating or preventing them. Regarding the therapy, there are several strategies and techniques applicable by nurses in their practice. The most used is the one that gathers the technical procedures.

There is great interest in the use of these techniques, some entitled complementary (applied as supplements to conventional therapy) or alternative (replacing the traditional method). In Brazil there are already public services⁽¹⁾ that delivery care to patients applying, among others, music therapy, therapeutic touch, behavioral change, relaxation, acupuncture and use of herbs. Literature also outlines this relevance; around 200 thousand items are indexed with the term alternative or complementary therapies in only one of the electronic health databases. Most part of these items is related to nursing and nursing care.

Alternative therapies are recognized by the *Federal Nursing Council* COFEN⁽²⁾ as practices deriving, mostly, from eastern cultures, practiced or performed by trained practitioners, and transferred from generation to generation, not being linked to any professional category. Practices such as acupuncture, iridology, chiropraxy, massotherapy, among others, are highlighted. The mentioned institution also recognizes alternative therapies as a specialty or qualification of Nursing professionals, provided the title is obtained after finishing a program recognized by a teaching or congenerous institute, with a minimum course load of 360 hours⁽³⁾.

Nevertheless, in Brazil, there are still restrictive considerations to the use, by nurses, of some of these therapies, such as acupuncture, in the view of other professional associations. Changing this understanding can benefit the implementation of strategies, by qualified nurses, and extend its use, through a better knowledge by the category of the benefits that they can bring to people who use them⁽⁴⁾, as well as through the integration of this content in the professional training, which is still restrict⁽⁵⁾.

The evidences originated from intervention studies of these therapies have shown that the degree of knowledge varies over each one of them, as well as that there are controversial opinions regarding the efficacy of their therapeutic use. However, in a general way, all of them combine benefits to patients by their use, even though they should be assessed regarding their validity, relevance and applicability in certain situations, before being adopted in the practice.

The Latin American Journal of Nursing encourages the submission of reports of methodologically consistent intervention studies using complementary practices.

¹Member of the Editorial Board of the Latin American Journal of Nursing, Full Professor of the University of São Paulo at Ribeirão Preto College of Nursing, WHO Collaborating Centre for Nursing Research Development, Brazil, e-mail: edcava@usp.br.

REFERENCES

1. Ministério da Saúde (BR). Portaria 971 de 03 maio 2006. Estabelece a Política Nacional das Práticas Integrativas e Complementares no Sistema Único de Saúde (SUS). Diário Oficial da União, Brasília, 4 maio 2006. Seção 1, p. 20. Brasília: Imprensa Oficial; 2006.
2. Conselho Federal de Enfermagem. Resolução COFEn nº 04/95 de 18 julho 1995. Dispõe sobre atividades em Terapias alternativas. Bol. Inf. COREn. 1995; 18(4):8.
3. Conselho Federal de Enfermagem. Resolução COFEn nº 197 de 19 março. 1997. Estabelece e reconhece as Terapias Alternativas como especialidade e/ou qualificação do profissional de Enfermagem. In: Conselho Regional de Enfermagem. Documentos básicos de enfermagem. São Paulo: COFEn; 1997.
4. Kurebayashi LFS, Oguisso T, Freitas GF. Acupuntura na enfermagem brasileira: dimensão ético-legal. Acta Paul. Enferm. 2009; 22(2):210-2.
5. Trovo MM, Silva MJP, Leão ER. Terapias alternativas / complementares no ensino público e privado: análise do conhecimento dos acadêmicos de Enfermagem. Rev. Latino-am Enfermagem. 2003; 11(4):483-9.