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INTEGRATIVE REVIEW OF THE LITERATURE

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ALTERNATIVE THERAPIES FOR MENOPAUSAL SYMPTOM CARE: OUTLINING POSSIBILITIES AND CHALLENGES

Terapias alternativas para os cuidados dos sintomas da menopausa: delineando possibilidades e desafios

Terapias alternativas para el cuidado de los síntomas de la menopausia: delineando las posibilidades y los desafíos

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ABSTRACT

Objective: The study's goal has been to analyze the main alternative therapies that might reduce the menopause symptoms, as well as to present the challenges faced by nursing professionals dealing with it. **Methods:** It is an integrative literature review, having a descriptive and exploratory approach. There were used the following databases: the Scientific Electronic Library Online (SciELO) and the *Literatura Latino-americana e do Caribe em Ciências da Saúde* (LILACS) [Latin-American and Caribbean Literature in Health Sciences]. There were found 145 studies, of which 11 met the inclusion criteria according to the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyzes) stages. **Results:** The main alternative therapies identified were as follows: physical exercise, acupuncture, hydrotherapy, medicinal plants, yoga and guided imagery. Each of the indicated modalities of therapy has positive benefits in reducing the menopause symptoms. Nurses play a significant role towards adherence and fulfilment of alternative therapies, but there is still excessive unawareness about how to carry out such practices. **Conclusion:** It is important to include teaching and qualification in alternative therapies within university education and programs of permanent education in collective health.

Descriptors: Complementary therapies, Nursing care, Menopause, Nursing, Climacteric period.

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RESUMO

Objetivo: Analisar as principais terapias alternativas que podem diminuir os sintomas da menopausa e apresentar os desafios enfrentados pela enfermagem diante desta prática. **Métodos:** Revisão Integrativa da literatura, com abordagem exploratória descritiva. Foram utilizados os bancos de dados *Scientific Eletronic Library Online* e *Literatura Latino-Americana em Ciências da Saúde*. Obtiveram-se 145 estudos dos quais 11 atenderam aos critérios de inclusão, conforme as etapas do PRISMA. **Resultados:** As principais terapias alternativas identificadas foram: prática de exercício físico, acupuntura, hidroterapia, plantas medicinais, yoga e imaginação guiada. Cada uma das modalidades de terapias apontadas possui benefícios positivos em relação à redução dos sintomas da menopausa. Os enfermeiros têm contribuição direta para a adesão e realização das terapias alternativas, porém ainda existe grande desconhecimento sobre como realizar tais práticas. **Conclusão:** Torna-se importante a inclusão do ensino e qualificação em terapias alternativas dentro do ensino universitário e dos programas de educação permanente em saúde coletiva.

Descritores: Terapias Complementares, Cuidados de Enfermagem, Menopausa, Enfermagem, Climatério.

RESUMEN

Objetivo: Analizar las principales terapias alternativas que pueden disminuir los síntomas de la menopausia y presentar los desafíos enfrentados por la enfermería ante esta práctica. **Métodos:** Revisión Integrativa de la literatura, con abordaje exploratorio descriptivo. Se utilizaron los bancos de datos *Scientific Eletronic Library Online* y *Literatura Latinoamericana en Ciencias de la Salud*. Se obtuvieron 145 estudios, de los cuales 11 atendieron a los criterios de inclusión, conforme a las etapas del PRISMA. **Resultados:** Las principales terapias alternativas identificadas fueron: práctica de ejercicio físico, acupuntura, hidroterapia, plantas medicinales, yoga e imaginación guiada. Cada una de las modalidades de terapias apuntadas tiene beneficios positivos en relación a la reducción de los síntomas de la menopausia. Los enfermeros tienen una contribución directa a la adhesión y realización de las terapias alternativas, pero todavía existe gran desconocimiento sobre cómo realizar tales prácticas. **Conclusión:** Es importante la inclusión de la enseñanza y la calificación en terapias alternativas dentro de la enseñanza universitaria y de los programas de educación permanente en salud colectiva. **Descriptor:** Terapias Complementarias, Cuidado de enfermera, Menopausia, Enfermería, Climatérico.

INTRODUCTION

Menopause is a biological process that occurs as part of a woman's aging. This stage of life corresponds to the date of the last menstruation as a result of definitive ovarian failure. The clinical diagnosis is made only after twelve consecutive months of amenorrhea, which is not explained by another either pathological or physiological cause.¹

The age that it usually occurs is from 45 to 55 years old, which can be classified into perimenopause when referring to the phase before menopause. At this stage, endocrinological, biological and clinical changes begin to approach menopause and the first year after menopause. In iatrogenic menopause, menstruation ceases as a result of surgical removal of the ovaries (with or without hysterectomy), or after iatrogenic ablation of ovary functions (chemotherapy or radiation). Pre-menopause

includes the entire reproductive phase before menopause. Postmenopause is the period after the last menstruation; and early menopause occurs at an age of less than two standard deviations below the average age of menopause for the population.¹

During menopause, women experience physical and psychological changes resulting from hypoestrogenism and cellular aging. Among the most frequent complaints that lead women to resort to the health services network are vasomotor symptoms, sleep disorders, weight gain, and vaginal bleeding. Targeting to alleviate the symptoms, hormone replacement therapies are recommended by physicians.^{1,2}

Nonetheless, even though all the benefits of synthetic hormone replacement therapy are currently known, many women who are undergoing menopause cease treatment after the first year of use, as adverse effects such as irregular bleeding, nausea, headache, retention are common. water, weight gain, in addition to the common fear of breast cancer.³

There are alternative treatments, which can be complementary elements to hormonal therapy, such as: acupuncture, pilates, physical exercises, hydrotherapy, food reorientation, nutritional supplementation, in addition to phytotherapy and art and music therapy workshops, which help to reduce the relative side effects to menopause, such as hot flashes, vaginal dryness, urinary incontinence, decreased libido, fatigue, weight gain and changes in sleep, memory, and mood.⁴

Given the aforesaid, alternative therapies have been the subject of discussion in recent years within the scientific area, with gaps in their recommendation, ways of implementation and the incorporation of such practices by nursing professionals while providing care to women undergoing menopause. The justification for the development of this study is given by the relevance of this theme, which pursues to systematically highlight the main alternative therapies already described in the literature, which have a positive potential to help women face this complex phase of life, thus improving quality of life. Therefore, it is important to develop studies that can present the real benefits of alternative therapies. Hence, the scientific community and society itself will become aware of the great potential of such practices when dealing with the menopause symptoms.

Bearing the aforementioned on mind, the study meant to analyze the main alternative therapies that might reduce the menopause symptoms, as well as to present the challenges faced by nursing professionals dealing with it.

METHODS

It is an integrative literature review, having a descriptive and exploratory approach. Data collection was guided by the six systematic steps of the integrative literature review,

namely: problem identification; elaboration of the guiding question; establishment of inclusion and exclusion criteria; scientific data collection; selection and categorization of articles; evaluation, interpretation, and synthesis of results.⁵

The guiding question of this review was: What are the alternative therapies that have the potential to decrease side effects related to menopause, and what are the challenges faced by nurses during this process?

An electronic search for publications was carried out in the online databases: the Scientific Electronic Library Online (SciELO) and the *Literatura Latino-americana e do Caribe em Ciências da Saúde* (LILACS) [Latin-American and Caribbean Literature in Health Sciences], using the descriptors: Complementary Therapies, Nursing Care, Nursing, Climacteric Period, and Menopause, also using the Boolean operator and to assist the crossing of descriptors.

For the selection of publications found, the following inclusion criteria were used: original articles available in electronic databases, published and indexed in the referred databases, between January 2007 and March 2018, in Portuguese and/or English and that addressed nursing care and its relationship with alternative therapies for reducing menopausal symptoms.

The exclusion criteria were as follows: duplicate articles; theses, dissertations, editorials and review articles; absence of information related to nursing care and alternative therapies in the menopause phase that could answer the guiding question; lack of clarity of the abstracts addressing the content stages.

Data collection took place between March and April 2018. This selection was guided by the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) Diagram,⁶ which helped to describe the selection phase, as seen in **Figure 1**.

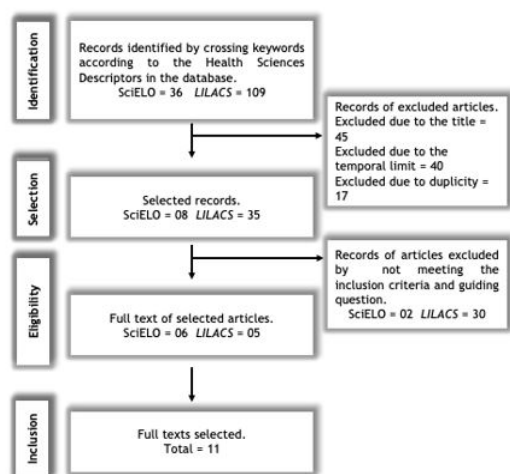


Figure 1: Flowchart representing the phases of identification, selection, eligibility and inclusion of articles in the integrative literature review through the PRISMA. Brasília city, Federal District, Brazil, 2018.

Source: It is originated from this research.

The selection followed the four stages of PRISMA, in the first one, the articles were identified according to standardized descriptors as addressed by the Health Sciences Descriptors, so, in this stage 36 were found in SciELO and 109 in LILACS. Afterwards, there was the selection phase, where articles were excluded by time limit, title, and due to duplicity, then leaving 8 in SciELO and 35 in LILACS. In the eligibility stage, the texts were read in full, being excluded because they did not meet the guiding question and clarity of the content, totaling 6 in SciELO and 4 in LILACS. Therefore, a total of 11 studies corresponding to the two online databases were included.

The data selection and its analysis resulted in the following empirical categories: Alternative therapies indicated for reducing menopausal symptoms and Challenges faced by nursing professionals in regard to alternative therapies for menopausal symptoms.

RESULTS AND DISCUSSION

In this integrative literature review, where data selection through the PRISMA diagram was used as an analytical basis (**Figure 1**), it was possible to initially identify a total of 145 studies in the selected databases (SciELO and LILACS). After applying the inclusion and exclusion criteria established for this study, the sample resulted in 11 articles for analysis. The results of the articles evaluated are presented below to provide the reader with a better understanding of the analysis model proposed by this review, in order to achieve the objectives of this study.

The analyzed data point to a higher frequency of studies indexed in the SciELO database (54.5%), followed by LILACS (45.4%), among the selected studies. It can be seen that (100%) of the articles were published in national journals, in Portuguese, of which (36.3%) have an English version.

This leads us to infer that Brazil stands out as one of the countries that produces more research in this area, when considering the relationship between the variables, namely, alternative therapies and menopause. Which expands the applicability of such therapies within Brazilian collective health.

According to the analyzed articles, about (80%) of the authors state that alternative therapies, when performed correctly, have shown positive results in reducing the symptoms of menopause, contributing to a healthy life, as shown in **Table 1**.⁷⁻¹⁴

The table below presents the summary data of the studies included on alternative therapies for the treatment of menopausal symptoms, with regard to the following: authors, year of publication, journal, objectives, methods, results, and the main conclusions. The analysis shows a prevalence of publications in 2011 of (27.2%), followed by the years 2012, 2014 and 2016 with (18%), and 2009 with

(9%) of publications.

Considering the area in which the studies were published, according to the journals, about (81.8%) of the publications are linked to nursing, which shows a prime interest of this professional category in investigating this theme, followed by (27.2 %) of studies published by the area of physical education. Both professional groups show an interest in alternative therapies associated with the menopause period.

Concerning the objectives, about (45.4%) seek to discuss and clarify the symptoms caused during the menopause/ climacteric period, with treatment strategies, and (36.3%) exclusively punctuate specific alternative therapies, which present evidence that may decrease menopausal symptoms.

With regard to the professional approach to the applicability of alternative therapies, about (17.2%) of the strategies are carried out by professionals linked to the multiprofessional team, specifically: physiotherapists, nutritionists, physical educators and speech therapists. Nurses correspond to (10%) of the professionals referred to in the development of alternative therapies.

Observing the methodological approach of research: (63.6%) are quantitative and cross-sectional studies, (27.2%) qualitative studies; (9%) quantitative and qualitative studies, and (9%) case studies. The search for the quantitative methodological approach can be associated with the probabilistic need to demonstrate the benefits of alternative therapies for the reduction of menopausal symptoms, according to the indicated therapy.

Table 1 - Summary of the included studies addressing alternative therapies for menopausal symptom treatment. Brasília city, Federal District, Brazil, 2018.

Author, year and journal	Objective	Methods	Results	Main Conclusions
Chagas EB, et al. 2015. Rev.Bras.Med.Esporte.	To analyze the impact of a physical exercise program adapted to the reality of Family Health Units, regarding the body composition, cardiovascular risk factors and the Framingham risk score of obese postmenopausal women.	Study with both qualitative and quantitative approaches.	It was observed that aerobic physical exercises, such as walking, have a positive effect on systolic blood pressure, in addition to metabolic parameters and the Framingham risk score.	The physical exercises proposed in the study were sufficient to cause an improvement in systolic blood pressure values in postmenopausal women with metabolic syndrome.
Valença NC, Germano MR, 2010. Rev. Rene.	To apprehend the women's viewpoint about menopause, climacteric period and the self-care performed in a reproductive health center.	Qualitative study.	There were considered factors for improving symptoms related to hormonal and biological imbalances, as follows: regular physical exercise, healthy eating, availability of leisure time, as well as expending time with family and friends. The nurse must guide educational information to promote the improvement of the quality of life of these women.	The study contributes to the professional practice of nurses towards the health of women undergoing menopause from a perspective of encouraging self-care that involves the effectiveness of educational practices and other health promotion measures.

Thiago SS, Tesser DC. 2011. Rev. Saúde Pública.	To analyze the perception of professionals from a Family Health Strategy concerning integrative and complementary practices.	Qualitative study.	Some professionals do not know much about complementary therapies, despite expressing interest in their inclusion in daily nursing activities in primary care. The therapies with the greatest contribution are as follows: anthroposophical medicine, Ayurveda medicine, traditional Chinese medicine, homeopathy, acupuncture, herbal medicine, and medicinal plants.	Adherence to integrative and complementary practices by professionals from a Family Health Strategy was mainly associated with the nurses' practice.
Badke MR, et al. 2017. Revista de Pesquisa: Cuidado é Fundamental Online.	To investigate the knowledge of nursing undergraduate students concerning the use of medicinal plants as a complementary therapy in health care.	Qualitative study.	It was observed the lack of security that undergraduate students have in regard to acting as a future professional by providing recommendations regarding the use of medicinal plants, especially with regard to the associated use for menopause care. The analysis shows the need to advance nursing education, with a focus on alternative therapies.	Intending to promote health, the curriculum needs to be revised in order to support this theme.
Gallon CW, Wender MO, 2012. Rev.Bras.Gin.ecol.Obstet.	To associate quality of life with the nutritional status of women undergoing the climacteric period.	Descriptive and cross-sectional study with a qualitative approach.	Through nutritional assessment, it was possible to observe that women undergoing the climacteric period eat inadequately, especially in relation to protein and calcium, essential nutrients for women undergoing menopause. The improvements in the physical and mental health of women in the climacteric period are associated with a balanced and adequate diet for their biotype.	It is essential to have a nutritional intervention, correct or improve the consumption of food. The anthropometric profile may result in a benefit to the health of women during the climacteric period.
Tairova OS, Lorenzi DS. 2011. Rev. Bras. Geriatr. Gerontol.	To assess the influence of physical activity on quality of life and symptoms reported by a group of postmenopausal women.	Case-control study.	Complaints related to the urogenital sphere were less severe in physically active women, as it was recognized that physical activity improves body self-image and self-esteem, in addition to anxiety symptoms.	Regular physical activity from light to moderate intensity, as well as the family income, may positively influence the quality of life and the reduction of menopause symptoms.
Haddad ML, Medeiros M, Marcon SS. 2012. Rev.esc.enferm.USP.	To observe the effect of acupuncture on the sleep quality of obese workers in a university hospital.	Descriptive-exploratory study with a quantitative approach.	Acupuncture was important, as this technique is responsible for improving sleep quality. About 67% of women undergoing menopause had control of insomnia with the use of acupuncture.	The data indicate that this technique can be used as an effective strategy in promoting the quality of life of women undergoing menopause.
Pitanga CS, et al. 2014. Rev.Bras.Med.Esporte.	To verify the association between walking and moderate-intensity physical activity with the area of intra-abdominal fat in postmenopausal women.	Cross-sectional study with a quantitative approach.	It was observed that walking offered protection against excess intra-abdominal fat, with 68.8% effectiveness, and moderate physical activity with 60% effectiveness.	Walking and moderate-intensity physical activity can be important for preventing excess intra-abdominal fat regardless of hormone replacement therapy.
Probo AP, et al. 2016. Rev.Bras.Ativ.Fis.Saúde.	To evaluate the level of symptoms in physically active and insufficiently active menopausal women.	Descriptive study with a quantitative approach.	The symptoms involving depression were higher in the groups of women who do not exercise when compared to those who do it.	Regular physical activity decreases the intensity of climacteric symptoms in middle-aged women.

Neves LM. et al. 2014. Rev. Bras. Ginecol. Obstet.	To assess the effect of eight-weeks functional training on the body composition of postmenopausal women.	Quantitative study.	It is observed that functional training is able to improve the capacities of balance, coordination, and agility, benefiting both health conditions and promoting the independence of postmenopausal women.	Functional circuit format training can be used as a strategy for changing the body composition of postmenopausal women.
Agra KO. et al. 2013. Rev. bras. ciênc. Saúde.	To observe the influence of a therapeutic exercise program in a swimming pool towards menopausal and depressive symptoms in a group of menopausal women.	Quantitative study.	After practicing therapeutic exercises in a swimming pool, the menopausal and depressive symptoms regressed from moderate to mild classification. This effect highlights the positive aspects of hydrotherapy and its benefits for this clinical status.	It was found that hydrotherapy provided functional benefits, such as: relief from hot flashes, improved mood, body image, and increased self-esteem.

Source: It was originated by the summary of selected articles according to the PRISMA Diagram.

Note: The journals' names were kept as in their original language.

By reading and analyzing the articles, it was possible to gather them by the similarity of results in two thematic categories, which provided better clarification concerning the alternative therapies indicated for reducing menopausal symptoms, as well as the challenges of this practice for nursing professionals.

Alternative therapies indicated for reducing menopausal symptoms

The analyzed articles state that about (36.6%) of alternative therapies that correspond to physical activities, such as aerobic activity and walking have positive benefits concerning the reduction of menopausal symptoms, such as: heat, insomnia, depression and low self-esteem. In general, physical exercise can be an alternative of efficient use and low cost, by women with low socioeconomic factor.^{7,11}

Among the exercises that stand out is walking, which can be performed at flexible times, such as, reserving a specific time for the walk or gym.^{7,15}

Walking, as a physical exercise, is very important in several aspects, among which it helps in the reduction of almost all symptoms of menopause, also contributing to the comfort and improvement in the lives of women.^{16,17}

It was identified that acupuncture has (18.8%) effectiveness and brings positive results in the symptoms of insomnia and hot flashes, contributing to the generation of endorphins by the nervous system, tending to improve thermoregulation, generating a feeling of well-being.¹⁸

Acupuncture is considered one of the most effective therapies in menopause, women do not have side effects, but rather additional benefits, such as increased body energy promoting an improvement in the immune system. The technique used in the acupuncture procedure is the placement of needles on the skin in strategic places. This therapy can also be indicated for other purposes.¹⁸

Another therapy referred to as positive potential

during menopause is aquatic exercise, about (9%) of the studies point to satisfactory results in body composition, strength and flexibility. It is noted that there is a decrease in depressive symptoms among women, observed in the pre and post-treatment performed in the swimming pool, through hydrotherapy.^{12,19}

Regarding the nutritional assessment, it can be said that a balanced diet containing healthy foods (especially foods containing proteins and calcium) is important to avoid problems such as obesity, cardiovascular disease and mood changes. Nevertheless, the results were worrisome, after analyzing the samples, considering that the research participants had an unbalanced diet, for more than body needs, being overweight, as calculated by the Body Mass Index and physical evaluation. This result points to a frequent potentiation of menopausal symptoms.^{11,13}

The fight against physical inactivity can be done through regular physical exercises, it fights diseases that worsen over time, such as: obesity, osteoporosis, cardiovascular diseases, anxiety, depression, and arthralgia. In the postmenopausal period, physical activity contributes to a reduction in bone resorption, which is marked at this time, which consequently reduces the risk of fractures.¹⁰

The literature shows other alternative therapies, such as the consumption of phytoestrogens extracted from soy, which promotes a reduction in the number of hot flashes and vaginal dryness. There are contraindications, which must be observed and discussed, since the plants must be used correctly, with a medical prescription, as inadvertent use can cause harm, like any other type of medication. It should also pay attention to the guidelines on the form of use, its preparation and dosage for specific treatment according to the particularities of each woman.¹⁴

Nowadays, there are two options for the pharmacological treatment of climacteric symptoms, synthetic Hormone Replacement Therapy (HRT) and natural HRT with phytoestrogens. Phytoestrogens are natural substances that have similarities with endogenous estrogens, with a greater ability to interact directly with beta estrogenic receptors, conferring a better risk-benefit ratio in their therapeutic use, compared to synthetic HRT. Even when considering the advantages of synthetic HRT, many women stop treatment after the first year of use, due to irregular bleeding, nausea, weight gain, in addition to the fear of developing breast tumors.⁸

Music therapy has been used to control insomnia, as it tends to decrease the symptoms of insomnia, providing improvement and mental comfort. The technique consists of a thirty-minute session of music therapy with classical music, after the session there are noticeable improvements in vital signs, generating a feeling of calmness.²⁰

The yoga technique has an average (9%) of positive results concerning menopausal symptoms, such as depression and insomnia, demonstrating effective improvements. The practices of yoga exercises promote the

best flow of energy in the body, this allows relaxation that helps the patient to develop a greater sense of inner and outer balance.

The use of guided imagination is another technique that shows positive benefits in the symptoms of hot flashes, as it allows a release of relaxation from the body to occur, due to the practices of breathing and imagination exercises.^{21,22}

Challenges faced by nursing professionals in regard to alternative therapies for menopausal symptoms

It is important to underline that (10%) of nurses have a direct contribution to the adherence and performance of alternative therapies by the group of women undergoing menopause, this professional guides, monitors and stimulates the entire therapeutic path, focusing on good practices, which are adapt to clients' needs, with a focus on reducing menopausal symptoms.

Therapies such as yoga and music therapy can be performed by a nurse, as long as he knows and is trained to do so. One of the techniques that can be easily added is guided imagery therapy, widely used by nurses. Commonly, the nurse instructs the patient to close his eyes and breathe slowly, and with each slow exhalation the nurse instructs them to put an image into their mind that brings comfort to them. This technique promotes relaxation of the body and with each inspiration the patient imagines the positive energy. Such practice should be performed in a quiet environment.^{21,22}

The challenges encountered in the application of alternative therapies by nursing are due to the lack of knowledge on the part of nurses, given their qualification for the development of such approaches, tending to generate insecurity in the face of practice; resistance in adherence by size of women is another limiting factor, due to the preference over the use of hormones, as it is an easily accessible and less effort method that the pharmaceutical market dominates.^{9,14}

It is possible to deduce in general that alternative therapies cause loss of profit for the pharmaceutical industry, which discourages their application by large businessmen. Another conflicting point refers to the field of action of the nurse, where he faces difficulties in monitoring women in these alternative practices, as clients are often directed to another professional, such as the nutritionist or physical educator.¹⁴

Regarding the qualification process, it can be said that nursing professionals and other health professional categories, know little about alternative therapies, but this little is a stimulus to expand the field of study and applicability alternative therapies in the Brazilian setting.⁹

It is important to stress that there is a need to include alternative therapies, given the challenges identified by this study, within the permanent education programs in the large area of public health, which can address all health professionals.

Such actions have a positive potential in the health-disease process, provided that during professional training the governments and health associations support such alternative practices, in conjunction with the food industry, academia, and higher education institutions.⁹

CONCLUSIONS

Herein, the analyzes show effective results towards the reduction of menopausal symptoms through alternative therapies. The therapies described are as follows: hydrotherapies, physical exercises in general, use of medicinal plants, balanced diet, acupuncture, yoga, music therapy, and guided imagination. The main benefits are the reduction of depression, reduction in hot flashes, improvements in self-esteem, improvements in vaginal dryness, prevention of obesity, improvements in sleep disorders, more hydrated skin and hair, combating anxiety, among others.

The nurse participates during the recommendations, providing the monitoring and stimulation of such alternative practices so that they are adhered to by women who are experiencing the symptoms of menopause. The nurse's contribution during treatment is evidenced as essential for its effectiveness. With regard to health professionals, the nurse is the one who has direct contact with the client, playing the role of mediator between the process of identifying symptoms and improving them, due to adherence to alternative therapy.

It is important to emphasize the need for the inclusion of teaching and qualification in alternative therapies within university education and permanent education programs in public health. Hence, it is suggested that alternative therapies may be included as a complementary support item within women's health care programs and in other areas of life cycle care, as a favorable means towards health promotion.

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