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Implementation of Aromatherapy by Occupational Therapists Can Reduce Pain, Tension, Stress for Patients With Intractable Pain In a Hospital Setting

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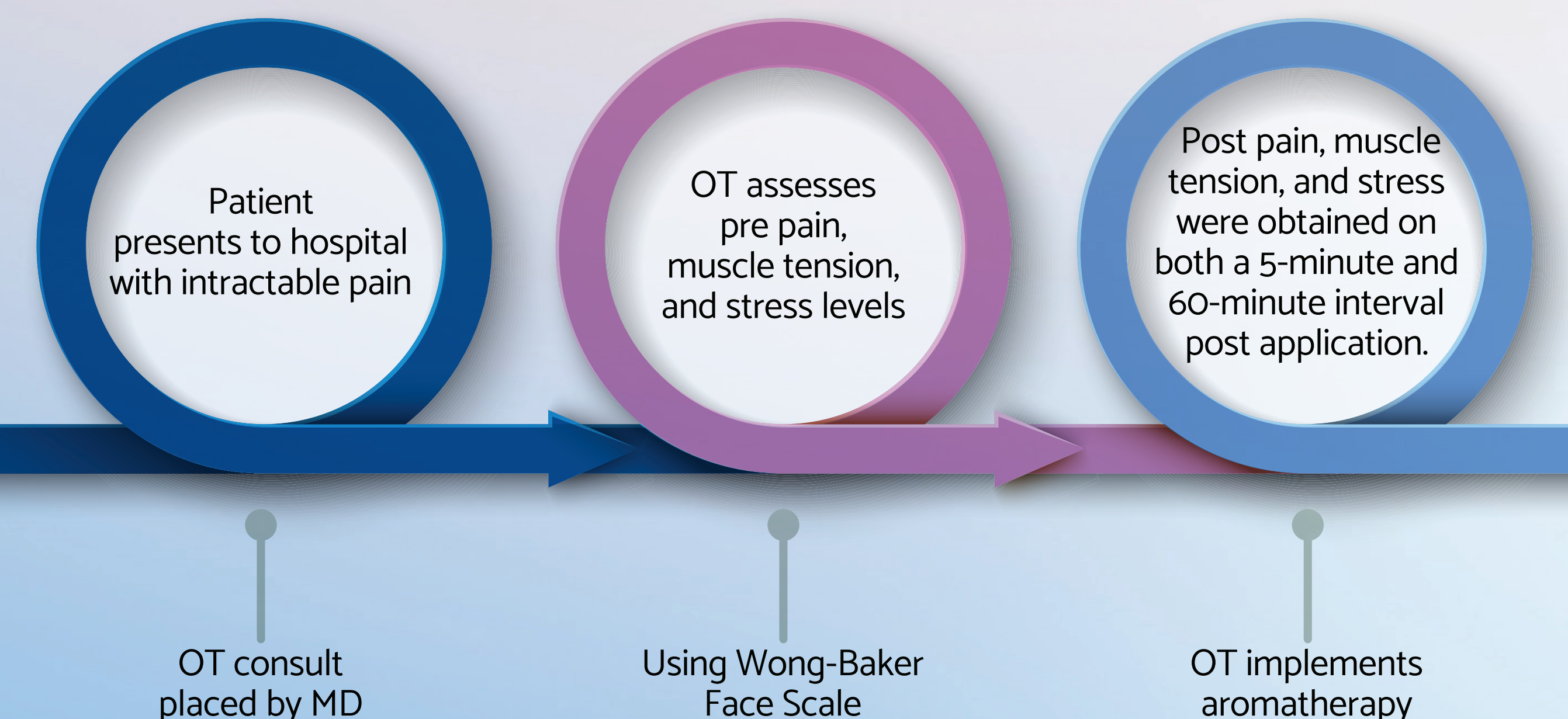
Purpose

- To show the value of aromatherapy provided by an Occupational Therapist (OT) in the acute clinical setting for the reduction of pain, muscle tension, and stress for patients with intractable pain.

Background

- Pain is costly, not only to the health care system, but to the individual and to society at large.
- The use of opioids for pain management has led the US Center for Disease Control and Prevention to term the wave of misuse as an epidemic.
- Aromatherapy is a useful adjunct in the management of pain as part of an initiative to reduce the use of opioids in a clinical setting. Aromatherapy is based on converting the nervous system from a pain and stress response (sympathetic) to a relaxation response (parasympathetic).

Methods



Case example

30-year-old female admitted status post MVA with multiple orthopedic injuries presenting with high levels of pain, anxiety, life stressors, and diminished life role as a mother with poor activity tolerance. Educated on pain cycle and open to receiving aromatherapy. Excellent results with decrease in numeric rating over all three categories. Pt comments: “This is amazing” “I had to have Ativan yesterday to calm me down; I wouldn’t have needed it if I had this.” Pt’s subjective ratings pictured below.

	Pre	Post 5 minutes	Post 1 hour
Pain scores	7	6	5
Muscle tension	6	4	1
Stress levels	9	5	0

Design

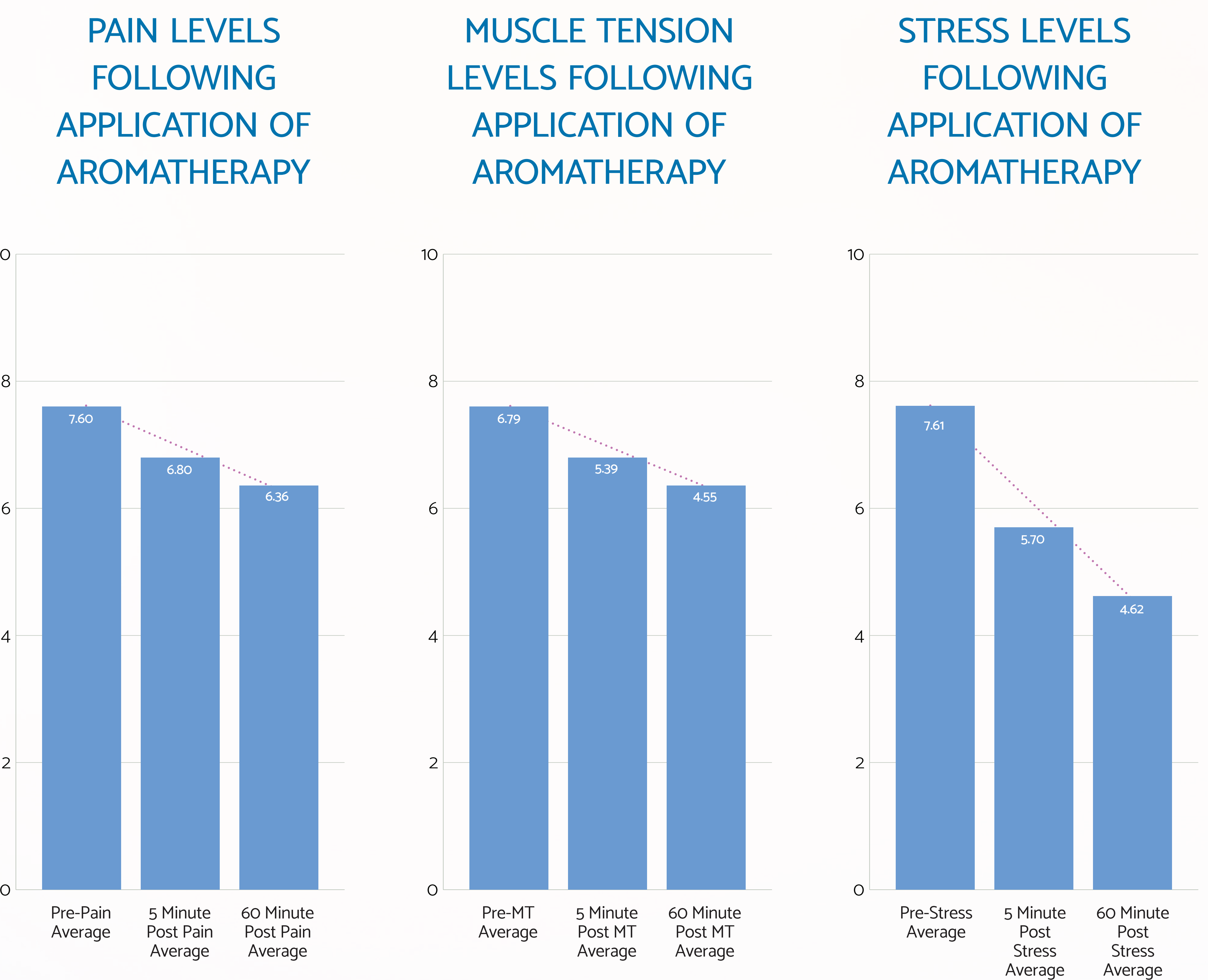
An OT collaborated with LVHN physicians, Risk Management, Infection Control and Occupational Health to clear the use of aroma in the hospital setting. The product was reviewed, and the utilization of aroma tabs developed by Elequil was chosen for clinical use.

Inclusion Criteria

Adult patient (18+) in the Emergency Department or Observation Unit presenting with intractable pain, or patients admitted with intractable pain and open to receiving aromatherapy.

Exclusion criteria included patients with cognitive deficits/dementia, allergies to fragrance, history of loss of smells, acute or new onset of cardiac fibrillation, and surgical candidates. Trial included 26 patients in a 4-month period.

Results



Case Outcomes

1. Clear and consistent reduction in rating for all three categories tested: pain, muscle tension, and stress, after introduction of aromatherapy by an OT.
2. Pain was reduced an average of 16% one-hour post implementation.
3. Muscle Tension was reduced an average of 33% one-hour post implementation.
4. Stress Levels were reduced an average of 39% one-hour post implementation.

Importance to Members

1. Aromatherapy could be considered an alternative treatment approach for pain, muscle tension, and stress levels.
2. This unique OT treatment approach can be utilized for pain education, activity tolerance for ADLs, and return to life roles.
3. OT can play a strong role in the acute care hospital setting in collaboration with other disciplines to help positively effect the current opioid crisis.

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