

Use of integrative and complementary health practices in high risk prenatal care: Integrative review

RESUMO | Objetivo: Identificar na literatura artigos sobre a utilização das práticas integrativas e complementares em saúde no pré-natal de alto risco. Método: Trata-se de uma Revisão Integrativa da Literatura abrangendo o período de janeiro de 2017 a dezembro de 2021 tendo como critérios de inclusão: artigos completos em português e critérios de exclusão artigos que abordem o uso das Práticas Integrativas e complementares no pré-natal de risco habitual. Resultados: Foram encontrados quarenta artigos científicos. Porém, após a seleção dos artigos foi aceitos para o estudo somente três no qual dois deles foram publicados em 2021 e o outro em 2019. Conclusão: Por meio desta revisão foi possível reconhecer que as práticas integrativas e complementares em saúde é uma prática segura e eficaz para ser utilizada no pré-natal de alto risco no qual trás benefícios na prevenção e promoção a saúde, como forma de terapia principal e terapia complementar.

Descritores: Terapias complementares; Gravidez de alto risco; Cuidado pré-natal.

ABSTRACT | Objective: To identify in the literature articles on the use of integrative and complementary practices in high-risk prenatal care. Method: This is an Integrative Literature Review covering the period from January 2017 to December 2021 with the following inclusion criteria: complete articles in Portuguese and exclusion criteria articles that address the use of Integrative and complementary practices in prenatal care at usual risk. Results: Forty scientific articles were found. However, after the selection of articles, only three of them were published in 2021 and the other in 2019 for the study. Conclusion: Through this review it was possible to recognize that integrative and complementary practices in health is a safe and effective practice to be used in high-risk prenatal care in which it brings benefits in prevention and health promotion, as a form of main therapy and complementary therapy.

Keywords: Complementary therapies; High-risk pregnancy; Prenatal care.

RESUMEN | Objetivo: Identificar en la literatura artículos sobre el uso de prácticas integradoras y complementarias en la atención prenatal de alto riesgo. Método: Se trata de una Revisión Integradora de la Literatura que abarca el período comprendido entre enero de 2017 y diciembre de 2021 con los siguientes criterios de inclusión: artículos completos en portugués y artículos con criterios de exclusión que abordan el uso de prácticas integradoras y complementarias en la atención prenatal de riesgo habitual. Resultados: Se encontraron cuarenta artículos científicos. Sin embargo, tras la selección de artículos, solo tres de ellos fueron publicados en 2021 y el otro en 2019 para el estudio. Conclusión: A través de esta revisión fue posible reconocer que las prácticas integradoras y complementarias en salud son una práctica segura y efectiva para ser utilizada en la atención prenatal de alto riesgo en la que aporta beneficios en prevención y promoción de la salud, como forma de terapia principal y terapia complementaria.

Palabras claves: Terapias complementarias; Embarazo de alto riesgo; Atención prenatal.

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INTRODUCTION

Integrative and complementary health practices (IChP) are ancient practices that have their origin in Tradi-

tional Chinese Medicine (TCM), have been used for millennia to understand the health-disease process, treat and prevent the disease with natural resources, with emphasis on humanized care, which aims at qualified and non-judgmental listening, creating bonds and the relationship between human beings and the environment and society.¹

Due to the need to implement alternative care in the Unified Health System (SUS), ICHP were regulated in the SUS, through ordinances nº 971 on May 3rd, 2006, and No. 1,600, of July 17th, 2006, which approves the National Policy on Integrative and Complementary Practices (PNPIC - Política Nacional de Práticas Integrativas e Complementares). This has guidelines aimed at the prevention, promotion and recovery of patients' health, with comprehensive, humanized and continuous care.²

Within the scope of the SUS, twenty-nine types of practices are available, including: auriculotherapy, music therapy, chromotherapy, naturopathy, aromatherapy, use of medicinal plants/phytotherapy, yoga, meditation, among others.³

Pregnancy is a transition period that causes biopsychosocial changes for the woman, among these changes, the physiological changes that the pregnant woman's body will undergo during pregnancy stand out, generating physical, mental and emotional discomfort, thus affecting the woman's well-being.^{4,5}

From the study carried out, the main discomforts during the pregnancy period are: heartburn, cramps, low back pain, constipation, edema, nausea and vomiting, dyspnea, frequency and leukorrhea.^{6,4}

In addition to the physiological changes, the pregnant woman can develop pathologies and obstetric complications that interfere with the well-being of the woman and the fe-

tus. It is important to emphasize that pregnant women with pre-existing morbidities are more likely to develop clinical problems and complications. The main pathologies that affect pregnant women are: obesity in 46.4%



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of the cases and 1/5 of the cases are associated with Gestational Diabetes Mellitus (GDM) and Pregnancy Specific Hypertensive Syndrome (PSHS), malnutrition, gastroesophageal reflux disease and genetic syndromes affecting 35.1% of pregnant women.^{7,8}

Another important point was found by a study carried out by POMPILIO,

PIETRO (2020) in which it was observed that 83.33% of pregnant women use medication and 16.66% declared that they do not. Among the most used drugs, 26.66% used tylenol, dipyrone and/or buscopan; 3.33%. Given this circumstance, the pregnancy period is related to an increase in the disordered use of drugs, prescribed by specialized professionals or not.⁹

Thus, the increasing use of drugs during pregnancy harms the woman and the fetus, especially in the first trimester of pregnancy, as it is a time of anatomical and physiological formation. That is why it is important to use ICHP in prenatal care as an alternative means for the relief and treatment of physiological changes and pathological symptoms in the gestational period.¹⁰

In addition, ICHP are recommended practices in prenatal care, as it contributes to the holistic care of pregnant women, favoring the mother-baby binomial, the autonomy of the pregnant woman, in helping to process information during pregnancy and also in caring for the physiological symptoms of pregnancy and helping in the treatment of chronic or gestational pathologies.¹

Given the relevance of continuous monitoring and the need for demedicalization during pregnancy; It is important that health professionals know how to apply the ICHP recognized and supported by current legislation. In addition, it is essential to be aware of the benefits and contraindications of this practice for each stage of pregnancy, in order not to cause harm to the pregnant woman and the fetus.^{11,12}

From the perspective of identifying and analyzing the articles that address the use of ICHP in high-risk prenatal care, to promote comfort and independence for pregnant women, the question is: What is the adherence of Integrative and Complementary Practices in high-risk prenatal care?

The choice for an integrative review is justified by the search for studies that evaluate the use of ICHP in a qualitative and quantitative perspective, addressing the use and benefits of this practice in high-risk pregnant women.

The literature has reviews that evaluate the use of certain ICHP, its risks and benefits, but not many current studies were found that bring together the main contraindications of ICHP in the gestational period, especially in high-risk prenatal care.

Thus, in order to guide the study, we ask: What is the scientific evidence on the use of integrative and complementary health practices in high-risk prenatal care in Brazil, from 2017 to 2021?

Given the importance of the topic addressed and in order to answer the question at hand, this study aims to analyze the evidence available in the databases on the use of integrative and complementary health practices in high-risk prenatal care.

METHOD

This work is an Integrative Literature Review (ILR). It is understood as a type of research that seeks to synthesize information from studies present in databases.

At first, the topic that would be addressed and the guiding question for the study was decided. Subsequently, the inclusion and exclusion criteria, search for articles, selection, synthesis, analysis and interpretation of the information found for theoretical support on the study in question were outlined.

In order to systematize the data search, the PICO strategy was used for the elaboration of the guiding question of the research (SANTOS; PIMENTA; NOBRE, 2007). Thus: as "P" can be described as population/patient or health problem, in this study, pregnant women will be admitted; the "I" being

studied intervention or variable of interest, here, it will be the ICHP; the "C" would be the comparison or other intended intervention, which does not apply to this study; and, "O" that indicates the outcome or expected result, which, in this study, will be the use of ICHP. Thus, the following guiding question of the research will be considered: What is the scientific evidence on the use of integrative and complementary health practices in high-risk prenatal care in Brazil, from 2017 to 2021?

The criteria used to develop the data search were articles available electronically, in full, Brazilian articles and that addressed scientific evidence on Integrative and Complementary practices in prenatal care. On the other hand, the exclusion criteria were: Articles that addressed the use of ICHP in usual risk prenatal care, abstracts, incomplete and paid articles.

The search for scientific articles was carried out in 2021 in the following databases: Scientific Electronic Library Online (SciELO), Nursing Database (BDENF), Latin American and Caribbean Literature on Health Sciences (LILACS),

Google Scholar and Virtual Health Library (VHL). This search was carried out with the help of the Health descriptors: Prenatal care (Cuidado Pré-natal), high-risk pregnancy (gravidez de alto risco) and Complementary therapies (Terapias Complementares), using the combinations: ("cuidado pré-natal") and ("Terapias Complementares") and ("gravidez de alto risco"), ("cuidado pré-natal") and ("Terapias Complementares") in addition to ("Terapias Complementares") and ("gravidez de alto risco").

After selecting the DECS, formulating the combination that suited the theme and intended objective, the filters were also used in the search for data: articles published between the years 2017 to 2021, complete and in

Portuguese. In addition, in all databases used to search for scientific articles, the Boolean operator AND was used.

The selected articles were analyzed in which they underwent a refinement from the reading of titles, abstracts and full reading of the articles to then use the principles of Whittemore and Knafl: Display of results, comparison, conclusion and display.

This principle contains six steps, among them, the present study used the fourth step that exposes the use of variables that contemplate the objective of the study in question so that the works for analysis are selected, making clear the steps followed so far. Also, the fifth step referring to the analysis and interpretation of the data was used, in which it suggests mentioning the gaps found and possible actions to be taken.

Following these steps, 40 articles were found, being SciELO = 10 articles, BDENF=0 articles, Google academic= 26 articles, VHL= 2 articles, LILACS= 2 articles. After reading the titles and deleting duplicate articles, thirty-four articles were excluded, the reading of abstracts was also carried out, where two articles were excluded, in which four articles remained to be read in full. After this step, three articles remained, which were selected for the synthesis of the study.

RESULTS

Among the analyzed studies, it was observed that most of the articles were published in 2021 (two articles) and one article in 2019. No articles were found that address the theme in the years 2017, 2018 and 2020. Regarding the type of document, the three studies are works published as articles. With regard to the professional category that published the most on the subject, the nursing professional appears in the three articles.

For better understanding, the arti-

Table 1 - Distribution of information from articles found in the data search, Belém, Pará, Brazil

	ARTICLE I	ARTICLE II	ARTICLE III
TITLE	Use of integrative and complementary health practices in prenatal care: integrative review (Utilização das práticas integrativas e complementares em saúde no pré-natal: revisão integrativa)	Contribution of integrative and complementary practices in prenatal care (Contribuição das práticas integrativas e complementares no acompanhamento pré-natal)	Use of integrative and complementary health practices by professionals in pregnant women with low back pain: an integrative review. (Uso das Práticas Integrativas e Complementares em saúde pelos profissionais em gestantes com dores lombares: Uma revisão integrativa.)
YEAR	2021	2019	2021
AUTHORS	Roblejo, Elida Sabrina dos Santos ; Torres, Joel Roblejo2; Abade, Erik Asley Ferreira	Sampaio, Ana Tânia Lopes Nelson, Isabel Cristina Amaral de Sousa Rosso Custódio, Débora Karla Sampaio Alves Brito, Gustavo André Pereira de	Fernandes, Karina da Silva ; Ribeiro, Patrícia Mônica ; Nascimento, Murilo César do ; Terra, Fábio de Souza
NUMBER OF AUTHORS AND TRAINING AREA	Three authors - Nursing	One author - Nursing	Three authors - Nursing
TYPE OF STUDY AND SOURCE	Integrative literature review.	Original article	Integrative literature review.
LANGUAGE	Portuguese	Portuguese	Portuguese
DESCRIPTORS	Complementary therapies; (Terapias complementares); Gravidez (Pregnancy); Cuidado pré-natal (Prenatal care).	Integrative and Complementary Health Practices (Práticas de Saúde Integrativas e Complementares), Prenatal Care (Assistência Pré-Natal), Community Health Nursing (Enfermagem em Saúde Comunitária).	Low back pain (Dor Lombar); Back pain (Dor nas costas); pregnant women (gestantes); ; Obstetrics (Obstetria).
DATABASES	Google Scholar	Google Scholar	Google Scholar
OBJECTIVES	To identify in the literature the use of integrative and complementary health practices in prenatal care.	Understand the contributions of including Integrative and Complementary Practices in prenatal care.	To analyze the national and international literature on the use of integrative and complementary health practices by professionals in pregnant women with low back pain
METHODS	Integrative review	Control group with a qualitative approach.	Integrative Literature Review.
RESULTS	The studies were classified into two groups: practices used by pregnant women and practices recommended by professionals. The practice most used by pregnant women was herbal medicine and the most recommended by professionals were homeopathy and traditional Chinese medicine. The professional category that most appeared doing work on the subject was nursing.	The contributions of integrative and complementary practices in prenatal care were perceived. The therapies used were as follows: Reiki, meditation and massage therapy are therapies that provide well-being, relieve everyday stress and tensions, provide relaxation and changes in your physical and mental well-being.	The use of Integrative and Complementary Practices in Health by professionals can provide new opportunities, greater knowledge, better assistance to pregnant women, satisfaction and well-being during pregnancy. Such benefits may represent an advance in health promotion, with the potential to improve care.

Source: Prepared by the authors, 2021.

cles were arranged in a table (Table 01) covering title, year, source, language, descriptors, database, objectives, methods and results.

DISCUSSION

It was verified through the review that despite the implementation of the PNPIC in 2006 in the SUS, the number of articles that address the use of the ICHP in the SUS is minimal. It is noted

that, in addition to this scarcity of studies on the subject, most of the studies that were found are articles that sought to research studies that already exist in the literature, making it not invested in field studies that seek to evaluate the

adherence of these practices today. In the literature, there is a low number of articles, where only 02 articles were selected that talk about ICHP in the gestational period, reinforcing the analysis of this study.¹³

Another point analyzed was the benefits of using ICHP in prenatal care, where it was found that all analyzed articles talk about this point. Among the main benefits of introducing this practice in prenatal care is the promotion of holistic care, qualified reception, greater patient autonomy, and promoting self-care. In addition, preventing and treating diseases provides a health perspective that aims at well-being and quality of life with the promotion of healthy habits, and allows greater interaction between the professional and the patient.

Such findings are also present in another study, in which the main benefits of ICHP is its performance in the promotion, maintenance and recovery of health along with the prevention of diseases through a model of humanized care and focused on the integrity of the individual, in addition to favoring the reduction of costs in the Unified Health System with conventional medicines due to the use of natural practices.^{3,14}

Another important finding in the analysis was the main professionals who use ICHP, the most cited professional was the nurse, then the medical professional and physical therapist. These professionals are supported to carry out this practice through resolutions 581 of 2018, of the Federal Nursing Council (COFEN); 1000, of 06/04/1980 and 1455, of 08/11/1995, of the Federal Council of Medicine (CFM - Conselho Federal de Medicina) and resolution 380 of 11/03/2010 of the Federal Council of Physiotherapy and Occupational Therapy (COFFITO - Conselho Federal de Fisioterapia e Terapia Ocupacional), respectively.

Although the nurse is the most ci-

ted professional, a study found that nursing professionals are in second place in the use of these practices.¹⁴

Another finding says that the professionals who apply ICHP in the SUS, whether in health units, specialized centers or in hospitals are: physicians, nursing professionals, physiotherapists and biomedical professionals.¹⁵

The ICHP that are in the three articles that were analyzed are: yoga, phytotherapy and acupuncture. Other ICHP mentioned in the articles that are used in high-risk prenatal care were massage therapy, homeopathy, auriculotherapy, bioenergetics, massage, relaxation and body perception, pelvic balance, music therapy and aromatherapy, reiki, meditation, foot bath, reflexology, among others.

In reference to this, a study found that only 16.7% of the PIC offer in the SUS is in the medium complexity (specialized clinics and polyclinics); and 3.4% in hospital and high-complexity care. The authors also emphasize that the most frequently offered ICHP are medicinal plants and phytotherapy (30% of the municipalities that offer ICP), acupuncture (16%) and auriculotherapy (11%), distinctly in the regions of Brazil. In addition, the most frequent ICHP are body practices (53%) and acupuncture (20%), while herbal medicine is (6%).¹⁶

Thus, the analysis in the literature showed the need for scientific studies on ICHP in high-risk prenatal care, as this practice provides a new model of care that aims at physical and mental well-being, it provides autonomy and self-care and reduces the number of medications used to relieve the physiological symptoms resulting from pregnancy. Miranda (2018), emphasizes the importance of non-pharmacological strategies in relieving the manifestations of discomfort, resulting from physiological changes and pathological symptoms of the gestational period.

CONCLUSION

Through this review, it was possible to identify that the integrative and complementary health practice is a safe and effective practice to be used in high-risk prenatal care in which it brings benefits in prevention and health promotion, as a form of main therapy and complementary therapy. However, the professional who applies the ICHP must be trained, knowing the correct way of the technique, its benefits and contraindications, especially when the patient is pregnant.

The study made it possible to identify scientific articles in the main databases, noting that, despite the scientific literature presenting many articles and studies in the area of integrative practices in recent years, the number of articles that talk about this practice in high-risk prenatal care is considerably small, as only 03 scientific articles published in the period from 2017 to 2021 were included in the research.

In this way, the study was able to answer the guiding question intended in the study, despite the fact that the number of articles found in the aforementioned period of time was extremely small, which made it difficult to investigate the use of these practices in the other period.

Therefore, it is expected that this study can serve as a learning tool for professionals and students in the health area who seek knowledge about ICHP in high-risk prenatal care, so that through this there is an increase in the application of ICHP in high-risk prenatal care and a greater number of articles. It is also hoped that more studies are carried out on the subject, evaluating the adherence of these practices in the various services of the SUS, especially in high-risk prenatal care, given that the public served must have health care and double actions.

Referências

- 1 Roblejo ESS, Torres JR, Abade EAF. Utilização das práticas integrativas e complementares em saúde no pré-natal: revisão integrativa. *J. Nurs. Health.* 2021;11(1): e21111 19330.
- 2 Ministério da Saúde; Secretaria de Atenção à Saúde Departamento de Atenção Básica: Manual de implementação de serviços de práticas integrativas e complementares no SUS, Ministério da Saúde, 2018. 58 p.
- 3 Melo, LSF. As práticas integrativas complementares no cuidado pré-natal de risco habitual: Uma revisão integrativa [Dissertação]. Rio de Janeiro: Fundação Osvaldo Cruz; 2017.
- 4 Silva LS, Pessoa FB, Pessoa DTC. Análise das mudanças fisiológicas durante a gestação: Desvendando mitos. *Revista Faculdade Montes Belo.* 2015; 8 (1):1-16.
- 5 Costa ES. Alterações fisiológicas na percepção de mulheres durante a gestação. *Revista da Rede de Enfermagem do Nordeste.* 2010;11(2):86-93.
- 6 Oliveira MF. Metodologia científica: um manual para a realização de pesquisas em Administração [Dissertação]. Catalão: Universidade Federal de Goiás; 2011.
- 7 Cabral SAAO; Alencar MCB; Carmo LA; Barbosa SES; Barros ACCV; Barros JKB. Receios na gestação de alto risco: Uma análise da percepção das gestantes no pré-natal. *Revista de psicologia.* 2018;12(40): 151-162.
- 8 Sobral B; Nascimento MT. Gestação de alto risco: perfil clínico e nutricional de mulheres encaminhadas ao ambulatório de nutrição do IMIP-Recife/PE [monografia]. Recife: Faculdade Pernambucana de Saúde; 2019.
- 9 Pomplio CDM; Pietro L. Uso de medicamentos na gestação e as possíveis consequências ao feto. *Repositório Digital UNIP.* 2020; 38 (1): 26-33.
- 10 Miranda LM. Práticas integrativas em saúde e seu potencial para o cuidado às gestantes no Distrito Federal [Monografia]. Brasília: Universidade de Brasília; 2018.
- 11 Fernandes KS, Ribeiro PM, Nascimento MC, Terra FS. Uso das Práticas Integrativas e Complementares em Saúde pelos profissionais em gestantes com dores lombares: revisão integrativa. *BrJP.* 2021; 4 (2):161-166.
- 12 Botelho LLR; Cunha CCA; Macedo M. O método da revisão integrativa nos estudos organizacionais. *Gestão e sociedade.* 2011; 5 (11): 121-136.
- 13 Jesus AC. Os benefícios das terapias complementares para o cuidado no período gestacional—uma revisão integrativa. *Estética e Bem Estar-Tubarão.* 2018.
- 14 Pereira Corrêa CS, Frantz Krug SB. Intercâmbio de aperfeiçoamento da prática de enfermagem em terapia de acupuntura em Beijing/China: um relato de experiência. *Nursing [Internet].* 5º de agosto de 2020 [citado 24º de agosto de 2022];23(264):3922-9.
- 15 Souza, VA. As práticas integrativas e complementares na atenção à saúde da mulher. 2019. Disponível em: [Repositorio Digital UFFS: As práticas integrativas e complementares na atenção à saúde da mulher.](#)
- 16 Tesser CD; Sousa IMC; Nascimento MC. Práticas integrativas e complementares na atenção primária à saúde brasileira. *Saúde em debate.* 2018; 42:174-188.