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Exchange of improving nursing practice in acupuncture therapy in Beijing / China: an experience report

ABSTRACT | Objective: To describe and reflect about an international experience of improving acupuncture therapy practice within the scope of Integrative and Complementary Practices (PICS) in nursing. Method: Descriptive, reflective, qualitative study. in the form of an experience report on conducting an improvement course in acupuncture in Beijing/China. Results: The activities totaled 120 hours, including theoretical activities interspersed with practical activities in the school and in hospitals in Beijing that have exclusive wards for acupuncture practices. Conclusion: The experience was configured as an opportunity to live with the country's culture where acupuncture was born, adding in a relevant way to theoretical knowledge of the technique, because it showed a wide scenario of practices and allowed several possibilities of treatment not addressed in Brazil. Such opportunity served to enhance knowledge and improve nursing care within the PICS.

Keywords: Acupuncture Therapy, Learning, Complementary Therapies.

RESUMEN | Objetivo: Describir y reflexionar acerca de una vivencia internacional de mejora de la práctica de terapia de la acupuntura, en ámbito de la Prácticas Integrativas y Complementarias (PICS) en enfermería. Método: estudio descriptivo, reflexivo, del tipo cualitativo, bajo forma de informe de experiencia sobre la realización de un curso de perfeccionamiento en acupuntura en Beijing/China. Resultados: La experiencia ha proporcionado vivenciar diversas situaciones no encontradas en Brasil. Las actividades totalizaron 120 horas, incluyendo actividades teóricas intercaladas con actividades prácticas en la escuela y en hospitales de Beijing, que poseen alas exclusivas para las prácticas de acupuntura. Conclusión: la experiencia se ha configurado como una oportunidad en convivir con cultura del país de origen de la acupuntura, lo que ha agregado de manera relevante el conocimiento teórico a la técnica, pues, ha mostrado un escenario amplio de prácticas y ha permitido otras posibilidades de tratamiento no abordadas en Brasil. Tal oportunidad ha servido para potencializar el conocimiento y mejorar la atención de enfermería en el ámbito de las PICS.

Descriptores: Terapia por Acupuntura. Aprendizaje. Terapias Complementarias.

RESUMO Objetivo: Descrever e refletir sobre uma vivência internacional de aperfeiçoamento da prática de terapia da acupuntura, no âmbito das Práticas Integrativas e Complementares (PICS) na enfermagem. Método: Estudo descritivo, reflexivo, do tipo qualitativo, sob forma de relato de experiência sobre a realização de um curso de aperfeiçoamento em acupuntura em Beijing/ China. Resultados: A experiência proporcionou vivenciar diversas situações não encontradas no Brasil. As atividades totalizaram 120 horas, incluindo atividades teóricas intercaladas com atividades práticas na escola e em hospitais de Beijing que possuem alas exclusivas para as práticas de acupuntura. Conclusão: A experiência se configurou como uma oportunidade em conviver com cultura do país berço da acupuntura, agregando de forma relevante ao conhecimento teórico à técnica, pois mostrou um cenário amplo de práticas e possibilitou diversas possibilidades de tratamento não abordados no Brasil. Tal oportunidade, serviu para potencializar o conhecimento e aprimorar o cuidado de enfermagem no âmbito das PICS.

Palavras-chaves: Terapia por Acupuntura, Aprendizagem, Terapias Complementares.

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INTRODUCTION

n current nursing, there is the importance of more critical and reflective training in relation to the needs of the population. With this, new practices are being included in the curricula and in the daily lives of nurses, seeking a more comprehensive, complete and personalized assistance. The role of the professional nurse is extremely relevant in the scope of seeking the prevention of morbidities of the patients who are served by him, implementing various practices, including integrative and complementary ones, with an emphasis on acupuncture1.

Among these practices are Integrative and Complementary Practices (PICS), therapeutic resources that stimulate natural mechanisms for prevention and health promotion by developing a therapeutic bond between the patient and the professional. Over the years, there have been several names for PICS, the first being by the World Health Organization (WHO) which has called them Traditional and Complementary or Alternative Medicine (MT/MCA). The name "Integrative and Complementary Practices" appeared in Brazil around 2006 when the National Policy on Integrative and Complementary Practices (PNPIC) was approved, and is

adopted by the Ministry of Health (MS) because they are known as non-conventional therapies².

PICS have several concepts based on the use of energy channels as an important communicator of organs and viscera with the outside and vice versa. Each organ or viscera has, in itself, several signs or symptoms demonstrating its imbalance, allowing a diagnosis of the patient according to the TCM at a certain moment in the life of the human being3. These practices are old and have been rediscovered today by the peoples of the West, with a growing interest of the population and health professionals, which reduces the use of allopathies4.

Within the scope of PICS, one of the best known is acupuncture therapy, it was developed in China thousands of years ago, without an exact definition of its beginning, causing great impact on the health of the population and international interest in the technique⁵. The westernization of acupuncture brought the needle insertion as a harmonization of energy and the strengthening of organs and viscera6. Internationally approached, "acupuncture can be defined as physiological therapy coordinated by the brain, which responds to the stimulation of peripheral sensory nerves by inserting needles manually or electrically"5 and even though the needle insertion technique stimulates and increases the activity of the immune system cells, controlling inflammatory processes more effectively⁵.

It is known that the country that is the birthplace of acupuncture is China, therefore, the schools that provide specialization courses on this practice stimulate the improvement of the technique through opportunities for exchanges, allowing direct contact with the country of origin, with the locals and professionals who have practiced the technique for many years.

With this, the exchange of education aims at human development, expanding cultural horizons and scientific and technological possibilities with the international experience. This exchange strengthens the potential for new learning for the student, providing professional growth in the area of knowledge and experiences, expanding his critical look at the health of the population, allowing contact with other places of teaching, people or different habits, favoring the expansion of diverse skills7.

The present experience of exchange began to be thought after contacting and knowing verbally the experiences of other graduate students who had already gone through this world of opportunities, realizing how much international mobility can enable for personal, social and professional life. Following these concepts, the study was designed to serve as a stimulus for graduate students in the area to seek knowledge directly from the source, without the existing biases due to the translations and understandings of the various authors studied on the subject.

Therefore, this study aims to describe and reflect on an international experience of improving the practice of acupuncture therapy, within the scope of Integrative and Complementary Practices (PICS) in nursing.

METHODOLOGY

This is a qualitative, descriptive, reflective, qualitative study about the performance of an exchange program as an acupuncturist nurse in Brazil at the World Federation of Acupuncture and Moxibustion Societis (WFAS) in Beijing, China after completing the Specialization in Acupuncture in Brazil, in 2014.

Beijing or Beijing, the capital of China, is the third most populous city in the world. Located in northern China, it is governed under a direct administration with sixteen districts. It is considered a reference city in culture, politics, science and economics. Its universities are considered the best in the country and is a center of scientific and technological innovation.

The theoretical part of the course was held at WFAS and lasted for 15 days, with

daily classes of 8 hours and a class of 12 students. The professor was the same throughout the period, a Chinese acupuncturist with over 20 years of experience demonstrated by his skill and total mastery of the technique. He approached subjects according to the pathologies of the program, each day being presented a specific disease and the most appropriate treatment with the acupuncture technique. After the theoretical explanation, the practical part was performed with the participation of a volunteer student for the demonstration of the technique by the teacher and later the practice was performed by all students present in the class.

This experience had a workload of 120 hours with native teachers with extensive experience in the area. Considering that the native language is Mandarin, the classes had simultaneous translation by a Portuguese teacher, who was an acupuncturist in China for over 10 years. Theoretical classes had an emphasis on chronic non-communicable diseases (CNCD) and traumatic diseases. Afterwards, internships were carried out at local hospitals, applying the techniques and teachings received, always with the supervision of supervising teachers, this time with Chinese acupuncturists who spoke Spanish.

RESULTS

In view of the professional and intellectual relevance that carrying out integrative health practices through exchange can provide, in addition to the opportunity for personal and cultural growth, some difficulties and challenges faced by Brazilian students abroad were noticed, such as: the language, affecting communication and hindering learning, because even with translators present in all classes, none were Brazilian, which could compromise understanding. There were around 15 students in the course, all of whom were Brazilian, as WFAS conducts courses with closed classes separated by countries.

The experience at the birthplace of the PICS has provided immense profes-

sional and personal growth. After 15 days of theoretical classes, we had five days of internship in two hospitals in the capital, in order to get to know the reality of health services. Theoretical classes focused on orthopedic pathologies and their treatment, being addressed: herniated discs, muscle pains, arthritis, spinal diseases in general, among others. Many techniques have received a western adaptation to be used here, it can be seen in visits to internship locations.

Technical visits were also made to the health services at the Hospitals: Beijing Tongren Hospital - an institution specializing in ophthalmology and otolaryngology. Records say it was opened in 1886 by an American Methodist church; and Beijing Hospital - general public hospital, specialized in geriatrics, teaching and research. Built in 1905 by Germans; plays an important role in providing medical and health services to employees, as well as patients from Beijing and other cities in China. These visits were essential to get to know the health reality in the region, making it possible, in addition to following and perfecting the acupuncture technique, to draw a comparative parallel between the different realities of China and Brazil.

After 120 hours of theoretical-practical study, there was the Differentiated Certification of Advanced Studies of Acupuncture (Advanced Studies of Acupuncture) issued by WFAS with international recognition related to the World Health Organization (WHO) and delivered by the president of WFAS Professor Deng Liangye.

The exchange provided an immeasurable knowledge exchange, and some of the techniques used in China, were not possible to be implemented here in Brazil, or because the material was not available in the country, without authorization from the National Health Surveillance Agency (ANVISA) for the use, or because it is a very old technique and somewhat impacting for westerners. If many are already skeptical of the effects of the usual techniques, we cannot predict what the reaction would be with the more ancient techniques.

DISCUSSION

Traditional Chinese medicine (TCM) is based on the integration and interaction between human beings and nature, maintaining health and preventing disease, aiming to harmonize the general health status of people⁵. PICS seek to improve service to the population, meeting advances in quality of life, greater contact and closeness with the patient and the local culture8.

The word acupuncture, was introduced in the West, at the beginning of the 20th century, by the Jesuits when they returned from China and comes from the Latin in which "acus" means needle and "puncture", to sting9. The National Health Council (CNS) reinforces that, in Brazil, acupuncture is regulated and supervised by several health councils through specific resolutions, guaranteeing safety and effectiveness to the technique9.

Ancient and consecrated literature in the area, conceptualizes acupuncture points as being energy channels, which are projected on the skin representing a relationship between the interior and the exterior, that is, the organs and the viscera6 and when the needles penetrate the muscles, they produce an often non-painful sensation, meaning that the Qi (flow of vital energy) has been achieved⁵.

In Brazil, Ordinance No. 971, of May 3, 2006, was created, which approves the National Policy of Integrative and Complementary Practices (PNPIC) in the Unified Health System (SUS), defining acupuncture as a technology of health intervention that addresses the health-disease process in humans and can be used alone or in an integrated way with other therapeutic resources that aim to promote and recover health and prevent diseases¹¹.

Acupuncture was one of the first to be offered by PNPIC in 2006. In March 2018, COFEN demonstrates support for the implementation of PICS in Brazil, considering an advance to SUS and the nursing profession. The nurse has been increasingly important in the use of PICS, since new approaches in the area have become necessary in order to more solidly apply the principles of SUS by professional¹².

The professional nurse, has been gaining more space in the various areas of acupuncture in the country, as a complement to the treatment, promoting an effective result in the most varied pathologies and in the various scenarios of current health. Complementary therapies seek to promote well-being and reduce symptoms which led the patient to seek treatment. The nurse is seen as one of the main actors in the field of PICS as the second largest in number of professionals in the field, behind only medicine, and as an important disseminator of knowledge of practices for the general population and health professionals¹².

The insertion of the professional nurse in acupuncture has been occurring gradually and increasing in Brazil, with a relevant increase in his activities mainly after recognition by the Federal Nursing Council (COFEN) in 1997, through Resolution COFEN No. 197/1997, in which acupuncture becomes a specialty and/or qualification of nursing, being a historic advance for the profession^{13,14}.

The application of complementary therapy techniques is on the rise all over the world, with an improvement in their acceptance and knowledge by patients and professionals in different areas. Nursing, has been conquering a consolidated position in the realization and appropriation of techniques, with this, the search for qualification is constant in the empowerment of nurses in relation to more natural forms of treatments¹³. The stimulus use of PICS by the category, makes a more holistic view of the patient become imminent, breaking old paradigms, as well as a better understanding, a better welcoming and especially a more complete care, which is the focus of nursing1.

Currently, we are inserted in a scientific context composed of countless researchers from the most diverse places in the world, where the scientific content is immediately available to the academic environment. We live in globalized societies and the power exercised by globalization can be felt in different fields, mainly in the educational field. One of the greatest riches today is knowledge, which can be acquired in different ways, promoting broad technological advances, boosting the internationalization movement of studies7.

It should be noted that the travel initiative requires acceptance, resignations, unforeseen circumstances, the absence of loved ones, in addition to adapting cultural differences, such as food, habits and values. Thus, the capacity for improvement in enabling the acquisition of new technical-scientific knowledge, significant and enriching experiences for the personal, academic and professional aspects, which culminated in the construction of this report was immense.

The exchange was a unique experience, mainly due to the welcome, admiration, quality of teaching, cultures, stories and magnificent places to expand knowledge.

We can understand the exchange or internationalization of higher education as "the process in which an international and intercultural dimension is integrated with teaching, research and the services of an institution"9(p. 7). Therefore, management becomes essential to obtain an answer on the effectiveness in relation to the objectives proposed by the institution and/or by the student.

FINAL CONSIDERATIONS

Nursing has a fundamental role in the application of complementary techniques, considering PICS as a new care model to be implemented in the work environment, associated with conventional care and other necessary techniques, to promote the empowerment of patients' health prevention and consequently a decrease in SUS costs.

Nursing is increasingly involved in the search for new methods of performing patient care in a broader and more effective way, with this, the search for quality professional growth becomes increasingly relevant in nursing in the search for a better professional qualification.

The exchange was an opportunity to add values, improve the curriculum, expand knowledge and dedication to studies in the area. Provided personal and professional growth, cultural experience, values, bonds and significant experiences in the context of health education, as well as of the researcher and teacher in the health field.

this sense, critical-reflective thinking was stimulated and developed from different situations, in order to seek solutions in the face of problems and difficulties with the available resources.

In view of the above, it is possible to infer that international mobility can represent an important instrument for improving the quality of acupuncture professionals in Brazil, since it stimulates the professional and personal maturation of professionals who work in the technique aiming at valuing practices and safety to the patient.

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