

**Investigation of Standard Care Versus Sham Reiki Placebo Versus Actual Reiki Therapy to Enhance Comfort and Well-Being in a Chemotherapy Infusion Center**

**Reference**

**Purpose of Study**
To test the effectiveness of an alternative complementary therapy in a randomized clinical trial, and support the Oncology Nursing Society’s research priorities and agenda, in an attempt to improve the quality of life of patients with cancer.

**Objective/goals/hypotheses**
To determine whether provision of Reiki therapy during outpatient chemotherapy is associated with increased comfort and well-being.

**Methods**
Chemotherapy patients receiving treatment at a single infusion center who agreed to participate in the study were consented. Patients completed two different well-being assessment tools, both before and after infusion therapy, which were then collected and statistically examined based on patient scalar numerical responses. Sixty-three participants per group were randomly assigned to one of three treatments protocols: 1) standard care, 2) sham Reiki, or 3) actual Reiki therapy; sham Reiki and Reiki were administered during chemotherapy infusion. Patients and infusion center nurses were blinded as to whether sham or actual Reiki therapy was being administered; the sham Reiki therapist was chosen specifically for her disbelief in Reiki efficacy and was asked to perform personal mental distractors while performing sham Reiki.

**Results**
Both the actual Reiki and the sham Reiki raised the comfort and well-being levels of the participants; the standard care group had the same results in pre- and post-infusion assessments. There was no statistically significant difference between the sham Reiki and the actual Reiki. It is postulated in the paper that this may be due to the physical presence of a therapist, sham or actual

**Strengths**
A randomized, blinded study with a good sample size and a sham Reiki arm as part of the study.

**Weaknesses**
The treatments were a one time 20-min session for each of the participants in the sham and actual Reiki groups, assessment of multiple treatments was not undertaken.

**Additional comments**
The investigators postulate that the intervention that improved patient comfort was the presence of designated nurse at the bedside. It is unclear if there is a natural ‘healing energy’ that is associated with those in the healing profession.