

END OF GRANT REPORT

FRESHWINDS - RGT/1/010334397

Summary of Key Findings

1	TITLE
	A Randomised Trial of Healing Therapy in a Gastroenterology Outpatient Setting
2	INTRODUCTION
	Irritable bowel syndrome (IBS) and inflammatory bowel disease (IBD) are both associated with significant detriment to quality of life and surgical and medical management is established but often fails to fully alleviate symptoms. This study was a collaboration between Freshwinds (charity), University of Birmingham and Heart of England NHS Foundation Trust. The study aimed to determine benefits of healing therapy (a type of complementary therapy) as an adjunct to conventional management for patients with IBS and IBD.
3	KEY FINDINGS
	The study incorporated a randomised controlled design which included a total of 200 participants diagnosed with IBS and IBD on adults 18 yrs or over, attending a hospital gastroenterology clinic. Healing therapies was delivered to participants in weekly 30 minute sessions over a 5 week period and were compared against a waiting list control which received only conventional medical treatment. The waiting list controls received therapy after a 12 week period. Outcomes were recorded using validated questionnaires at baseline and again at week 6, 12 and 24 to evaluate disease specific quality of life, symptoms and patient specified primary symptoms. Primary outcomes included; MYMOP, IBS-QOL and IBDQ, whilst secondary symptom measures used to record the severity of the disease were, Birmingham IBS symptom questionnaire, and modified versions of SCCAI and Harvey-Bradshaw index. Qualitative data was also obtained via in depth semi-structured interviews of participants to compliment the quantitative data. Full results of the study will be available on publication of the research papers.
4	CONCLUSIONS
	There is an increasing worldwide population trend to seek the use of complementary therapies (CT) particularly for chronic conditions. When faced with this, clinicians who are unfamiliar with CTs usually find difficulty being able to offer advice to patients who may have decided to explore CT. This study can make a considerable contribution to the evidence base on complementary therapies. Based on the results policy makers, clinicians and commissioners will be able to make more informed decisions on the role and use of healing therapy in IBS and IBD as an adjunct to conventional treatment, or as part of a multidisciplinary approach to care.
5	WHERE TO FIND MORE INFORMATION
	Further details can be obtained by contacting, Steven Moralee Steven.moralee@freshwinds.org.uk