Effectiveness of implementing the reiki method to reduce the weaning failure. A clinical trial.

[Article in Spanish]

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Abstract

INTRODUCTION: Admission to intensive care unit (ICU) is a difficult and stressful time for the patient, with the application of different techniques, such as intubation and ventilation support withdrawal or "weaning", which may fail due to anxiety.

OBJECTIVES: To determine whether Reiki is useful in reducing weaning failure, as well as reducing the number of days of mechanical ventilation (MV), length of stay in ICU, amount of sedatives, amines, and antipsychotics.

METHOD: Randomized clinical trial.

SCOPE: ICU of a Level III University Hospital.

POPULATION: ICU patients connected to Mechanical Ventilation for more than 48 hours, with a signed informed consent. Patients in a terminal condition or potential organ donors were excluded.

SAMPLE: 256 patients divided into two groups: intervention group (GI) and placebo (GP). The intervention involves the application of Reiki, and a simulated technique within the placebo group. An analysis was made of the absolute and relative frequencies, with a significance level of P<.05, 95% CI

RESULTS: The percentage of failures at weaning was 9% in GI and 9.5% in GP (P=.42). The mean number of days on MV was 8.85 days for GI and 9.66 for the GP (P=.53). The mean dose of sedatives: GI 1078mg and 1491mg GP. The dose of Haloperidol was lower in the GI (5.30mg vs 16.81mg GP) (P=.03, 95% CI; -21.9 to -1.13).

CONCLUSIONS: Reiki reduces the agitation of patients. A decrease was objectively observed in the number of days of Mechanical Ventilation, length of stay, lower doses of sedatives, and a slight decrease in the weaning failure in the GI. No statistically significant difference was found in the main variable.

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KEYWORDS: Critical care; Cuidados intensivos; Destete ventilatorio; Energy therapy; Enfermería; Nursing; Reiki; Terapias energéticas; Therapeutic touch; Toque terapéutico; Weaning

PMID: 26803374 [PubMed - as supplied by publisher]