






Repercussions experienced by health professionals working with Integrative and Complementary Practices during the pandemic*

Repercussões vivenciadas por profissionais de saúde atendidos com Práticas Integrativas e Complementares durante a pandemia

How to cite this article:

Santos VHM, Maia MCW, Rézio LA, Bittencourt MN, Leite VF. Repercussions experienced by health professionals working with Integrative and Complementary Practices during the pandemic. Rev Rene. 2022;23:e80668. DOI: <https://doi.org/10.15253/2175-6783.20222380668>

 Victor Hugo Martins Santos¹
 Margani Cadore Weis Maia¹
 Larissa de Almeida Rézio¹
 Marina Noll Bittencourt¹
 Vanessa Ferraz Leite¹

*Extracted from the Course Conclusion Paper “As repercussões das práticas integrativas e complementares para a saúde/saúde mental de profissionais da saúde no contexto da pandemia de COVID-19”, Universidade Federal de Mato Grosso, 2021.

¹Universidade Federal de Mato Grosso. Cuiabá, MT, Brazil.

Corresponding author:

Victor Hugo Martins Santos
Universidade Federal de Mato Grosso. Campus Universitário de Cuiabá. Av. Fernando Correa da Costa, 2.367 – Boa Esperança. CEP: 78060-900. Cuiabá, MT, Brazil.
E-mail: vhms.martins@gmail.com

Conflict of interest: the authors have declared that there is no conflict of interest.

EDITOR IN CHIEF: Ana Fatima Carvalho Fernandes
ASSOCIATE EDITOR: Luciano Marques dos Santos

ABSTRACT

Objective: to analyze the repercussions experienced by health professionals who were assisted with the use of integrative and complementary practices during the pandemic of COVID-19. **Methods:** qualitative study whose data were collected through interviews, which were transcribed and submitted to thematic content analysis. **Results:** 12 female health professionals participated and pointed out the importance of the inclusion of integrative and complementary practices in strengthening the well-being of health professionals in the Unified Health System and the relevance of offering these services in the pandemic scenario, as it helped them face stress, insomnia, mental fatigue, and anxiety. Two categories emerged: Sensation of valorization, welcoming, recognition and care, and Repercussions on the emotional and physical health of the workers. **Conclusion:** the data showed the positive repercussions of Integrative and Complementary Practices developed by health professionals, demonstrating the potentiality of these practices in promoting mental health. **Contributions to practice:** the implementation of actions with the use of Integrative and Complementary Practices by managers constitutes a form of care by health professionals in the Unified Health System, as these result in quality of life, promotion, and restoration of physical and mental health of the individuals assisted. **Descriptors:** Complementary Therapies; COVID-19; Health Personnel; Mental Health.

RESUMO

Objetivo: analisar as repercussões vivenciadas por profissionais de saúde que foram atendidos com a utilização de práticas integrativas e complementares durante a pandemia da COVID-19. **Métodos:** estudo qualitativo cujos dados foram coletados por meio de entrevistas, as quais foram transcritas e submetidas a análise de conteúdo temática. **Resultados:** participaram 12 profissionais de saúde do sexo feminino que apontaram a importância da inclusão das práticas integrativas e complementares no fortalecimento do bem-estar dos profissionais de saúde no Sistema Único de Saúde e a relevância da oferta destes atendimentos no cenário pandêmico, pois as ajudou no enfrentamento do estresse, insônia, cansaço mental e ansiedade. Emergiram duas categorias: Sensação de valorização, acolhimento, reconhecimento e cuidado e Repercussões na saúde emocional e física das trabalhadoras. **Conclusão:** os dados demonstraram as repercussões positivas das Práticas Integrativas e Complementares desenvolvidas pelos profissionais de saúde, demonstrando a potencialidade dessas práticas na promoção da saúde mental. **Contribuições para a prática:** a implementação de ações com o uso das Práticas Integrativas e Complementares pelos gestores se constitui em forma de cuidado pelo profissional de saúde no Sistema Único de Saúde, pois estas resultam em qualidade de vida, promoção e restabelecimento da saúde física e mental dos indivíduos atendidos. **Descritores:** Terapias Complementares; COVID-19; Pessoal de Saúde; Saúde Mental.

Introduction

Integrative and Complementary Health Practices (PICS) encompass systems and resources that act on different aspects of health, as they seek to stimulate the natural mechanisms of health prevention and recovery from diseases, whether physical or mental, through effective and safe technologies⁽¹⁻²⁾. These practices, which are designated as traditional medicine and/or alternative and complementary medicine⁽¹⁾, present a broad view of the health-disease process, in which the therapeutic bond and the perspective of the individual at the center of the process are valued, prioritizing quality of life and integration of the human being with the environment in which he/she lives, aiming at global health promotion and stimulating self-care⁽³⁾. Since 2006, with the approval in Brazil of the National Policy of Integrative and Complementary Practices in the Unified Health System, the use of PICS has gained recognition as a strategy for valuing, offering alternative and complementary knowledge and care in public health services⁽¹⁻²⁾.

Among the PICS, auriculotherapy, described as a non-invasive therapy, performs stimuli in the auricular pavilion, acting in health maintenance, treatment, or disease prevention⁽⁴⁾. Also noteworthy are: reiki, defined as a natural technique of imposition of hands, in which there is a transfer of universal vital energy (Ki) to the individual (receiver), promotes physical, mental, emotional, and spiritual balance through energy harmonization, with the purpose of prevention, recovery, and well-being⁽⁴⁾; and aromatherapy, defined as the therapeutic use of essential extracts in intense concentration, derived from plants, being an accessible and non-invasive therapy, used for the improvement of psychological health and promotion of well-being⁽⁴⁻⁵⁾. Moreover, data showed a 324% increase in the supply of these PICS from 2017 to 2019, of which, auriculotherapy was the complementary therapy with the highest growth in attendance, followed by others, such as reiki and aromatherapy⁽⁶⁾.

In the pandemic scenario, especially at times

of high demand for mental health services, this need stood out, since health workers, directly and indirectly involved in facing the pandemic, were exposed daily to situations that triggered worries, physical and mental overload, uncertainties, tensions, stress, anguishes, exhaustion, or burnout, anxiety, depression, loss of sleep quality, fear of contagion or transmission of the coronavirus (COVID-19) to family members, making them more susceptible to the development of psychological suffering/mental disorder⁽⁷⁻⁹⁾, which demanded attention and care to this population with the need to promote mental health and well-being, aiming to improve the quality of life of these individuals⁽⁸⁾.

Studies point out that healthcare workers, when assisted with the use of PICS, report improvement in their physical and mental health⁽¹⁰⁻¹¹⁾. However, despite the positive evidence of these practices in promoting the mental health of health professionals, there is a scarcity of programs of attention to this group of workers, and of other interventions for the prevention of work-related diseases and for the promotion of health⁽¹¹⁾.

Considering the panorama of COVID-19, coupled with the strenuous workload that health professionals already carried before the pandemic, and considering the satisfactory results of the PICS, especially in symptoms of anxiety, depression, insomnia, stress, fear, among others, resulting in quality of life in a comprehensive way to the individual, the question is: How did the experience of being assisted by integrative and complementary practices during the COVID-19 pandemic impact the lives of health professionals?

To this end, the objective of this study was to analyze the repercussions experienced by health professionals who were assisted with the use of integrative and complementary practices during the pandemic of COVID-19.

Methods

This is a qualitative study, developed with 12 professionals who worked in the Unified Health Sys-

tem, in a Midwestern capital, during the COVID-19 pandemic and who were treated with PICS, five of them working in two Family Health Units and seven in a University Hospital.

Health professionals were understood as those who worked in health services or health care and surveillance establishments, ranging from nurses and physicians to receptionists, security guards, and cooks, among others⁽¹²⁾.

The assistance to the professionals was provided by two nurses/teachers, who were trained in PICS and developed actions in an extension project in these health units. Auriculotherapy, reiki, and aromatherapy were chosen due to their potential to promote global human care, as well as the expertise of the nurses who performed the applications.

All professionals received care, from August to October 2020 through an extension project linked to the study, with auriculotherapy and aromatherapy, and those who presented more significant complaints were treated with the use of reiki. Each participant received, on average, five sessions, with the minimum being three, and the maximum, nine sessions. Among the 12 participants, nine received auriculotherapy and aromatherapy using lavender essential oil (*Lavandula angustifolia*) and reiki, and three received only aromatherapy and auriculotherapy.

Regarding the auriculotherapy actions, the Chinese, French, and Brazilian School maps were followed. The points, shen men, liver and sympathetic or neurovegetative system were stimulated in all⁽¹²⁾ participants, followed by the kidney point in 11 participants. Based on anxiety, hypothalamus, and liver yang one in 10, the heart emotion point was used in nine practitioners, and the vice point was applied in eight. The gallbladder, adrenal, zero point, and adrenal points were stimulated in seven, and, in half⁽⁶⁾ of the participants, the Heart point stimulated. In addition to these, other points were stimulated, namely stomach, pineal gland, bladder, muscle relaxation, mouth, small intestine, and spleen/pancreas⁽⁵⁾, neurasthenia, tranquilizer, lower back, and anxiety-preoccupation⁽⁴⁾,

nicotine, joint point, thoracic spine, lung, and large intestine⁽³⁾ respectively in total points used. The application of reiki followed the precepts of the Mikao Usui school, and aromatherapy was performed through the application of lavender essential oil (*lavandula angustifolia*).

All professionals who received at least three consultations with the PICS through the linked extension project were invited to participate. The inclusion criterion of three appointments was defined by the researchers considering the orientation of studies that identify positive repercussions of the PICS, such as improvement in quality of life, physical and mental well-being based on three sessions for the practices used⁽¹³⁻¹⁴⁾. Participants who were absent due to illness, vacation or leave of absence during the interviews were excluded. To minimize conflict biases, the interviews were carried out by the student, a member of the research, since the other researchers were responsible for providing care using the PICS to the participating professionals.

Data collection was carried out from November 2020 to January 2021, by means of a semi-structured interview, with questions regarding knowledge about PICS, the identification of effects of the practices on life, and evaluation of the care received through auriculotherapy, reiki, and aromatherapy.

The interviews were conducted by telephone call at a predefined time and date and scheduled with the interviewee upon prior acceptance of participation and signature of the Free and Informed Consent Form. The interviews lasted an average of twelve minutes, 18 minutes being the maximum, and four minutes the minimum. There was no search for data saturation, since the interviews were carried out with all the study participants.

Besides the transcribed interviews, another source of data were the attendance and follow-up forms used during the consultations with PICS, named "Ficha", followed by the cardinal number referring to the consultation. The data extracted from these were related to the characterization of the professionals,

number of appointments, type of therapy received, auriculotherapy points, reactions after the appointments, main complaint and symptoms reported, as well as their follow-up. Seeking to maintain the confidentiality and anonymity of the participants, the speeches were coded by the letter "P", randomly added to the cardinal number. The authors chose to assume during the text, the female gender, because there was in its totality the participation of women as subjects in the research.

For data analysis, the thematic content analysis⁽¹⁵⁾ was established in three stages: a) Pre-analysis; b) exploration of the material and c) interpretation of results, in which two categories were identified: a) feeling of appreciation, welcoming, recognition and care and b) repercussions on the emotional and physical health of female workers. The data were manually transcribed and categorized by the researcher.

The research was approved by the Research Ethics Committee of the Julio Muller University Hospital, under Opinion No. 4,370,932/2020, respecting Resolution No. 466/12, and Ordinance 510/2016.

Results

Among the 12 professionals attended, the roles were: one nursing assistant, one pharmacist, one receptionist, two nurses, three Community Health Agents, and four nursing technicians, all in the age range of 30 to 39 years. Based on the speeches of the participants, two categories emerged: Feeling of valorization, welcoming, recognition and care; and Repercussions on the emotional and physical health of the workers.

Feeling of appreciation, welcome, recognition, and care

It was observed that with the offer of these practices to health workers, feelings of welcoming, appreciation and recognition were triggered through the care and therapeutic listening provided by the nurses

who performed the care with the use of the PICS. The care with the use of integrative practices was also an opportunity for care and attention for those who were directly exposed to COVID-19: *It was an appreciation of the professional, you see that you had a special care, that an alternative treatment was made available so that you could have a better quality of life and professional performance (P1). I felt important at the time, because they were offering this opportunity to us at that moment that we really needed it, because all the professionals needed attention (P7). It is the moment when we are welcomed, when you know that there is another being close to you, welcoming you, I liked it very much and I think it is very important, I am touched, because I was one of those affected by COVID-19 (P2). At that moment when I was welcomed by the integrative practices it was very important for me, it was the moment when I was most sensitive, most fragile, for me it was very important, it was very good, very significant, and if there is another one, I will participate again. I thought I would never have access to this type of treatment, I had it there, it was very rewarding, it meant a lot and helped me a lot (P2).*

The reports point out that, by having access to therapies, the professionals felt honored by their leaders, and started to be seen as subjects that need mental health care, which had repercussions in work motivation and in the quality of care provided: *A lot of times, the health care is very much put aside, they demand a lot of production, demand a lot, but many times they forget, and then from the moment they have this look, people already feel a little more motivated, they already feel a little more within the whole process, and then this even improves the quality of assistance (P9). These therapies are important because it is another way to be welcomed, to have attention, it improves a lot the psychological, emotional, and physical aspects (P2).*

Repercussions on the emotional and physical health of female workers

We identified reports referring to the feeling of relaxation, reduction of anxiety symptoms, and the possibility of reflecting better on the adversities experienced, which favored keeping calm and a better relationship with the problems of everyday life: *I managed to control my anxiety, which was a lot, so I could be calmer (P10). It*

solved my main complaint, which was related to anxiety (P1). It contributed a lot, I relaxed more and got out of that period of anxiety, I know that when we are in this period of anxiety we do not have time to think, to reflect, and I could reflect better on the situation I was going through, I was calmer, I got along better with my situations and made me relax, it was very good, helped me a lot, helped me a lot. It was a very bad time; I was in need. For me it was very good (P2). I was very anxious, I felt that as I was stimulating the points as I was oriented ...I was gradually improving (P2).

The participants also reported significant improvements in the quality of nighttime sleep, which led to a medication readjustment in one of the cases: *My sleep improved considerably, one of my main complaints was the insomnia issue, today I manage not to use controlled medication to sleep (P5). It was beneficial, I had insomnia, I had a lot of insomnia and from the time I started doing auriculotherapy, along with reiki, it improved (P10). It helped me in my tranquility, in my sleep, that I was sleeping very little (P3). My sleep improved, I stopped waking up at dawn, because I always used to wake up at three, four o'clock in the morning. So, the insomnia improved, my quality of life improved a lot (P1).*

The professionals also pointed out that, after the consultations with the PICS, they noticed a decrease in symptoms related to stress, the feeling of mental fatigue, and irritability and agitation, with promotion of mental health and better quality of life: *My stress and mental fatigue improved a lot, I was very accelerated, very agitated [...] during this period I am calm (P10). I was nervous, I even felt anger. But after the third day after the first assistance, the qualified listening of the professional and the auriculotherapy, three times later I already felt that I was much calmer (P6). The professionals work under a lot of pressure, the therapies help relieve a lot of stress, the day-to-day routine, to have better productivity and a better quality of life, not to get stressed (P1).*

Besides, other emotional repercussions perceived by the interviewees were also mentioned after the offer of the PICS, with positive effects on their personal and work life: *I became willing, less worried, I was going through a very difficult family situation and it helped me to go through these moments, I felt more excited, willing to solve the problems, I had a significant improvement in my condition that I was during the treatment, I liked it a lot (P11). I was in front, in the front line of CO-*

VID, because I work in the intensive care unit of COVID. So, I was... very frightened. This project for employees I joined, that's why, because I was afraid of not being able to handle what was ahead, this project helped me a lot to get through these steps, because it was very difficult (P6). It is instantaneous, you finish receiving the reiki and you feel that you are lighter, you feel that it seems that a thousand kilos have been removed from you, the reiki, the auricle, makes you more centered, lighter, smoother, you are being like this, you can make quicker and more correct decisions (P8).

It was observed that they pointed improvement in pain complaints and in osteoarticular discomforts, which allowed the reestablishment of life activities and more quality of life: *It had quality of life, because it did not have these pains, I felt relief, just that I did not feel these discomforts of pain, it was already a great benefit (P7). I had a little unbearable pain in my legs, when I got there, I was with a very strong pain in the spine, with water retention and so, the pain in my leg, went away, of my spine I think in the second session it improved (P2). The issue of my temporomandibular dysfunction (TMD) also improved, which is a muscular contraction of the jaw... so it improved my standard of living (P1). It was incredible, I tell people that my foot does not even look like it, I could not even step right when I got up when I woke up, after I did the auricle project, it improved 100%, it was great (P4).*

Discussion

The qualitative approach facilitated the understanding of the complexity of suffering triggered by the pandemic for the group studied; moreover, the results demonstrate the positive impact of care with the use of integrative and complementary practices in the lives of health professionals, highlighting them as a therapeutic strategy of relevant importance for this population. The use of PICS, as a therapeutic method in the care of female workers who work against COVID-19, is an advantageous strategy, due to its fast, safe, and non-invasive applicability, constituting a viable health promotion strategy in the current context⁽¹⁶⁾. Results of similar studies show the positive impact on the well-being, improvement of stress symptoms, and mental health of healthcare professionals assisted with the use of complementary therapies^(6,17).

Through the speech of the subjects, it can be observed how, either individually or globally, the care contributed to the promotion of health of professionals. It is noteworthy that this professional category has been open to the practices, especially in the workplace due to their mental health demands, often arising from the interference of the work environment and occupational risks⁽¹⁶⁾, a fact observed in the speeches that point to the satisfaction of the participants. In view of this issue, the consultations with PICS can result in the prevention of diseases, favor a healthier workplace, and improve the quality of life of workers by improving pain complaints and anxiety, for example⁽¹⁸⁾. The reasons for this search and adherence to these practices may be related to dissatisfaction with conventional medicine interventions and lack of bonding between the patient and the health professional⁽³⁾. In view of the above, studies point out the difference in the approach and conduction of care with these therapies, because the patient is placed as the center of care, which promotes a feeling of personal appreciation, welcoming, and greater bond between professional and patient^(1,3,19).

In agreement, it is noteworthy that through the PICS it was possible to provide the professionals with comprehensive care and assistance, considering a wider range of factors in the process of illness and restoration of health, focusing on emotional harmony, and understanding the causes of their illness⁽¹⁹⁾. Another study shows that the PICS inserted in a Health Center, for the integral care of employees, enabled the redefinition of the self-care processes of the team, besides promoting more quality in the work process⁽²⁰⁾, which reinforces the importance of caring for those who care.

The reports of the participants emphasize the consequences that the pandemic of COVID-19 caused in their work routine, which resulted in physical and emotional stress. This fact is also associated with the fact that they are all women, representing the predominance of the female gender in the world of health work and, therefore, it is also necessary to consider

that the complaints related to extra working hours extend to domestic chores and daily life. Women are responsible for caring for the home and children, even when they work outside⁽²¹⁾, and this may be related to various psychological suffering, such as sleep disorders, stress, depressive disorders and pain and somatic complaints among this population, information that agrees with the complaints cited by the participants in this study⁽²²⁻²³⁾.

Regarding the PICS care, which, as the reports showed, resulted in positive effects on anxiety symptoms, sleep disorders, and stress, similar studies^(16,24-25) emphasize that some auriculotherapy sessions were able to reduce anxiety, depression, and stress symptoms among nursing professionals, helping them face the processes of psycho-emotional suffering that were notably exacerbated during the pandemic of the new coronavirus.

Regarding the actions of aromatherapy, they contribute the emotional response and mental health of nursing professionals, which includes regulation of self-esteem, reduction of anxiety levels, reduction of sleep disorders and stress reduction, helping to maintain quality of life⁽²⁶⁾. About reiki, participants of an experimental study obtained improvement in the mental domain and quality of life after the sessions⁽²³⁾, demonstrating that this practice acts positively on stress symptoms and on the increase of self-confidence, being beneficial for healthcare workers.

Corroborating these results, the use of PICS, as a strategy of promotion, prevention, and treatment, leads to integral care of the individual and can reduce the overuse of medication and the constant medicalization of life⁽³⁾, a fact that also occurred in this study, when one of the participants mentioned a readjustment in the use of hypnotic medications, showing the positive impact of these therapies.

Other emotional repercussions were perceived by the participants, such as: the decrease of fear for the new coronavirus contagion; concerns; and how to deal with interpersonal relationships both in the work and family environment. Results like this one

confirm that the PICS promote immediate and long-term benefits, by decreasing concerns, emotions in relationships, in the family environment and at work of the participants^(21,27).

Besides the repercussions on mental health, the results pointed out that the sessions promoted benefits regarding the physical symptoms. And, in this sense, the literature points out that complementary therapies act in a restorative manner in the individuals assisted, by providing a perception of reduction of pain complaints with fewer side effects, and by also being beneficial for the emotional^(3,19). And they show to be effective in musculoskeletal discomforts, contributing to the relief of low back pain, generated due to the overload of work by the nursing team⁽²⁸⁾.

The efforts of nursing professionals regarding the mobilization to participate in interventions with PICS and recommend them to other workers are remarkable, which reinforces the need to continue exploring projects/interventions with this population, since they result in integration of patient care, whether the patient is a health professional or from another area⁽²¹⁾. Moreover, the PICS represent a powerful contribution to the quality of life and among workers, by promoting self-knowledge that helps social relationships and self-care, improving the care for others and advancing towards integrality^(6,19).

Given the above, integrative, and complementary health practices stand out as therapeutic resources that promote quality of life for professionals, being considered important strategies for the mitigation of psychological suffering and for the physical care of health workers in the current context of the pandemic^(6,29).

Study limitations

Among the limitations of this study, we mention the fact that the interviews were conducted by telephone, which may have impacted the bond and the availability of the participants to answer the questions with the consequent abbreviation of the inter-

views. Moreover, we highlight the fact that the places for the application of the PICS were improvised in the middle of the professionals' work field, which may have impacted the intensity of relaxation and positive sensations for the participants.

Contributions to practice

It is believed that the data from this study can contribute for managers to consider the implementation of actions with the PICS as a form of care for health professionals in the Unified Health System, since these actions result in quality of life, promotion, and restoration of physical and mental health of the individuals assisted.

Conclusion

It is perceived that the consultations with the use of integrative and complementary health practices provided a feeling of valorization, welcoming, recognition, and care, besides promoting repercussions on the emotional and physical health of the workers assisted.

We highlight the participants' comments about the importance of including these practices to strengthen the well-being of health professionals in the Unified Health System and emphasize the relevance of offering these services using integrative and complementary health practices in the pandemic scenario, which helped them cope with stress, insomnia, mental fatigue, and anxiety.

Authors' contribution

Conception and design, data collection, analysis, data interpretation and article writing: Santos VHM.

Conception and design, data analysis, data interpretation and article writing: Maia MCW.

Interpretation of data and relevant critical review of the intellectual content: Rézio LA.

Relevant critical review of the intellectual content: Bittencourt MN, Leite VF.

Final approval of the version to be published: Santos VHM, Maia MCW, Rézio LA, Bittencourt MN, Leite VF. Agreement to be responsible for all aspects of the manuscript related to the accuracy or completeness of any part of the work to be properly investigated and resolved: Santos VHM, Maia MCW.

References

1. Ministério da Saúde (BR). Secretaria de Atenção à Saúde. Política Nacional de Práticas Integrativas e Complementares no SUS [Internet]. 2015 [cited Feb 23, 2022]. Available from: https://bvsms.saude.gov.br/bvs/publicacoes/politica_nacional_praticas_integrativas_complementares_2ed.pdf
2. Rossetto M, Luzardo AR, Schmatz L, Barbatto PR, Lima JF, Almeida ME, et al. Multiprofessional team and integrative and complementary practices in occupational health. *Res Soc Dev.* 2020;9(9):e418997461. doi: <https://doi.org/10.33448/rsd-v9i9.7461>
3. Dalmolin IS, Heidemann ITSB. Integrative and complementary practices in primary care: unveiling health promotion. *Rev Latino-Am Enfermagem.* 2020;28:e3277. doi: <https://dx.doi.org/10.1590/1518-8345.3162.3277>
4. Ministério da Saúde (BR). Secretaria de Atenção à Saúde. Glossário temático: práticas integrativas e complementares em saúde [Internet]. 2018 [cited Apr 27, 2022]. Available from: <https://aps.saude.gov.br/biblioteca/visualizar/MTM0Ng>
5. Gasparetto KRBB, Benelli DAA, Santos P. Perceptions of workers of a private institution about aromatherapy treatment. *Rev Bras Terap Saúde.* 2020;10(2):7-10. doi: <http://dx.doi.org/10.7436/rbts-2020.10.02.02>
6. Pereira EC, Rocha MP, Fogaça LZ, Schveiter MC. Occupation health, integrative and complementary practices in primary care, and the COVID-19 pandemic. *Rev Esc Enferm USP.* 2022;56:e20210362. doi: <https://doi.org/10.1590/1980-220X-REEUSP-2021-0362>
7. Saragih ID, Tonapa SI, Saragih IS, Advani S, Batabara SO, Suarilah I, et al. Global prevalence of mental health problems among healthcare workers during the Covid-19 pandemic: a systematic review and meta-analysis. *Int J Nurs Stud.* 2021;12(1):104002. doi: <https://dx.doi.org/110.1016/j.ijnurstu.2021.104002>
8. Esperidião E, Saidel MGB, Rodrigues J. Mental health: focusing on health professionals. *Rev Bras Enferm.* 2020;73(suppl 1):e73supl01. doi: <https://doi.org/10.1590/0034-7167.202073supl01>
9. Teixeira CFS, Soares CM, Souza EA, Lisboa ES, Pinto ICM, Andrade LR, et al. The health of healthcare professionals coping with Covid-19 pandemic. *Ciênc Saúde Coletiva.* 2020;15(9):3465-74. doi: <https://doi.org/10.1590/1413-81232020259.19562020>
10. Aguiar J, Kanan A, Masiero AV. Integrative and complementary practices in basic health care: a bibliometric study of Brazilian production. *Saúde Debate.* 2018;43(123):1205-18. doi: <https://doi.org/10.1590/0103-1104201912318>
11. Barreiros RN, Dutra LB, Silva RCI, Ribeiro YC, Moura LF, Louro TQ. The Japanese scalp acupuncture as an instrument for non-specific pain treatment in health professionals. *Rev Pesqui* 2019;11(3):594-98. doi: <http://doi.org/10.9789/2175-5361.2019.V11i3.594-598>
12. Ministério da Saúde (BR). Secretaria de Vigilância em Saúde. Plano nacional de operacionalização da vacinação contra a covid-19 [Internet]. 2021 [cited Apr 5, 2022]. Available from: https://www.gov.br/saude/pt-br/composicao/secovid/pno_edicoes/3a-edicao-pno-29-01-2021.pdf/view
13. Freitas DGS, Gonçalves O, Garcia ACC, Castro ATS, Silva CMM, Couto IA, et al. Evaluation of improvement in the quality of life of individuals served at ambulatorio Anna Nery after the use of Reiki. *Br J Health Review.* 2021;4(2):4745-61. doi: <https://doi.org/10.34119/bjhrv4n2-060>
14. Medeiros SP, Oliveira AMN, Silva MRS, Freitag VL, Afonso MS, Brum AN. Integrative and additional practices: care strategy for Reiki in depression people. *Res Soc Dev.* 2020;9(2):e127922149. doi: <https://doi.org/10.33448/rsd-v9i2.2149>
15. Bardin L. Análise de conteúdo. Lisboa: Edições 70; 2016.
16. Trigueiro RL, Araújo AL, Moreira TMM, Florêncio RS. COVID-19 pandemic: report on the use of auriculo therapy to optimize emergency workers' health. *Rev Bras Enferm.* 2020;73(Suppl 2):e20200507. doi: <https://doi.org/10.1590/0034-7167-2020-0507>

17. Munhoz OL, Morais BX, Luz EMF, Magnago TSBS. Práticas Integrativas e Complementares para promoção e recuperação da saúde. *Rev Recien* [Internet]. 2020 [cited June 13, 2022];10(30):209-21. Available from: <https://www.recien.com.br/index.php/Recien/article/view/280/284>
18. Natividade PCS, Spagnol CA, Vieira A, Guerra VA, Pereira KD. Contributions of integrative and complementary practices in health to the quality of life of workers. *Br J Dev*. 2021;7(8):78873-89. doi: <https://doi.org/10.34117/bjdv7n8-213>
19. Viana JSA, Silva EB, Silva KGS, Coêlho LPI, Sousa BT, Marques VR, et al. The use of integrative and complementary practices in health and its relationship with the health of nursing professionals in Primary Health Care. *Res Soc Dev*. 2021;10(13):e121101320716. doi: <http://dx.doi.org/10.33448/rsd-v10i13.20716>
20. Rios AFM, Lira LSSP, Reis IM, Silva GA. Primary health care in front of covid-19: experience report from a health Center. *Enferm Foco* [Internet]. 2020 [cited Apr 12, 2022];11(1):246-51. Available from: <http://revista.cofen.gov.br/index.php/enfermagem/article/download/3666/836>
21. Costa JR, Piexak DR, Santo FHE, Oliveira SG, Nitschke RG, Marcon SS. Perceptions of nursing professionals from a general hospital about Reiki intervention. *Rev Enferm UFSM*. 2021;11:e67. doi: <https://doi.org/10.5902/2179769264279>
22. Sampaio LR, Oliveira LC, Pires MFD. Empathy, depression, anxiety and stress in Brazilian health professionals. *Ciênc Psicol*. 2020;14(2):e2215. doi: <https://doi.org/10.22235/cp.v14i2.2215>
23. Kurebayashi LFS, Turrini RNT, Souza TPB, Marques CF, Rodrigues RTF, Charlesworth K. Auriculotherapy to reduce anxiety and pain in nursing professionals: a randomized clinical trial. *Rev Latino-Am Enfermagem*. 2017;25:e2843. doi: <https://doi.org/10.1590/1518-8345.1761.2843>
24. Oliveira CMC, Assis BB, Mendes PG, Lemos IC, Sousa ALC, Chianca TCM. Auriculotherapy in nursing professionals during the coronavirus pandemic: a multiple case study. *Rev Eletr Enferm*. 2021;23:65678. doi: <https://dx.doi.org/10.5216/ree.v23.65678>
25. Lemos LR, Gregório CLS, Silva KCA. Efficiency of auriculotherapy in stress treatment. *Br J Health Review*. 2019;2(6):5108-23. doi: <https://dx.doi.org/10.34119/bjhrv2n6-018>
26. Montibeler J, Domingos TS, Braga EM, Gnatta JR, Kurebayashi LFS, Kurebayashi AK. Effectiveness of aromatherapy massage on the stress of the surgical center nursing team: a pilot study. *Rev Esc Enferm USP*. 2018;52:03348. doi: <https://doi.org/10.1590/S1980-220X2017038303348>
27. Bezerra DRC, Paulino ET, Santo FHE, Magalhães RS, Silva VG. Use of integrative and Complementary practices in the social isolation period of COVID-19 in Brazil. *Res Soc Dev*. 2020;9(1):1329119718. doi: <http://dx.doi.org/10.33448/rsd-v9i1.9718>
28. Medeiros GMS, Sasso GTMD, Schlindwein AD. Results of foot reflexotherapy in acute lower back pain of the nursing team: controlled randomized clinical test. *Br J Pain*. 2018;1(4):305-9. doi: <https://doi.org/10.5935/2595-0118.20180058>
29. Teke N, Özer Z, Bahçecioğlu GT. Analysis of Health Care Personnel's Attitudes Toward Complementary and Alternative Medicine and Life Satisfaction due to COVID-19 Pandemic. *Holist Nurs Pract*. 2021;35(2):98-107. doi: <https://doi.org/10.1097/HNP.0000000000000431>



This is an Open Access article distributed under the terms of the Creative Commons