



## **Integrative therapies and the relief of chronic pain: a review of effectiveness and multidisciplinary approaches**

*Integrative therapies and chronic pain relief: a review on effectiveness and multidisciplinary approaches*

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### **SUMMARY**

Chronic pain is a persistent condition that significantly compromises the quality of life of millions of people, requiring therapeutic approaches beyond the traditional biomedical model. This article presents a narrative review of the effectiveness of integrative therapies in chronic pain care, based on scientific literature, reports from SUS users, and the book "Chronic Pain Has a Cure" (Rodrigues, 2024). Practices such as acupuncture, meditation, auriculotherapy, and Reiki are analyzed, highlighting their effects on well-being, autonomy, and the humanization of care. Evidence shows that acupuncture reduces musculoskeletal pain and improves functional indices, while meditation contributes to emotional regulation. Reiki, despite its initial clinical studies, demonstrated immediate analgesic effects and a feeling of comfort. Auriculotherapy has proven to be an effective, low-cost practice that is well-received in public services. The conclusion is that these practices represent safe and promising strategies, fostering the therapeutic bond and comprehensive care. It is recommended that these therapies be expanded into public health policies.

**Keywords:** Chronic pain. Integrative therapies. Complementary medicine. Reiki. Acupuncture.

### **ABSTRACT**

Chronic pain is a persistent condition that significantly compromises the quality of life of millions of people, requiring therapeutic approaches beyond the traditional biomedical model. This article presents a narrative review on the effectiveness of integrative therapies in chronic pain management, based on scientific literature, SUS user reports, and the book \*Chronic Pain Can Be Cured\* (Rodrigues, 2024). Practices such as acupuncture, meditation, auriculotherapy, and Reiki are analyzed, highlighting their effects on well-being, autonomy, and humanized care. Evidence shows that acupuncture reduces musculoskeletal pain and improves functional indices, while meditation contributes to emotional regulation. Reiki, although supported by initial clinical studies, has shown immediate analgesic effects and a sense of comfort and care. Auriculotherapy is highlighted as an effective, low-cost practice with good acceptance in public health services. These practices are considered safe and promising strategies that strengthen therapeutic bonds and promote comprehensive care. The expansion of these therapies in public health policies is recommended.

**Keywords:** Chronic pain. Integrative therapies. Complementary medicine. Reiki. Acupuncture.

### **1. INTRODUCTION**

Chronic pain is a persistent suffering condition that affects millions of people in Brazil and worldwide, and is currently considered a public health problem. Unlike acute pain, which has a temporary nature and protective function, chronic pain lasts for more than three months and significantly compromises the patient's quality of life, interfering

in their functional, emotional and relational capacity (BRASIL, 2018). In the biomedical model Traditionally, pain is often treated as an isolated symptom, which can lead to excessive medicalization and prolonged use of opioids and analgesics, without considering the subjective dimensions of human suffering.

Managing chronic pain requires an approach that goes beyond treatments conventional, recognizing the complexity of human suffering and the need for integrated care. Integrative and complementary practices emerge as important allies in this context, offering alternatives that consider not only the physical aspect of pain, but also the emotional and social dimensions that accompany it. Silva et al. (2024) highlight that these practices contribute significantly to improving quality of life of patients, promoting more humane, welcoming and individual-centered care.

In this context, the need arises for broader therapeutic approaches, which contemplate not only symptom relief, but also a comprehensive understanding of the experience of pain. Integrative and complementary therapies, supported by the Policy National Center for Integrative and Complementary Practices (PNPIC), offer alternative paths and complementary to health care, using resources such as acupuncture, meditation, auriculotherapy, phytotherapy, reiki and other methods based on traditional knowledge and contemporary evidence.

This article aims to present and analyze the main integrative therapies used in chronic pain care, discussing their effects on well-being, autonomy and quality of life of patients. We also seek to reflect on the importance of the approach interdisciplinary and humanization in the care of persistent pain.

## 2 THEORETICAL FRAMEWORK

### 2.1 CHRONIC PAIN IN THE HEALTH CONTEXT

Pain is a complex sensory and emotional experience, usually associated with injury actual or potential tissue damage. The International Association for the Study of Pain (IASP) defines pain as “an unpleasant sensory and emotional experience associated with, or similar to, that associated with actual or potential tissue damage” (IASP, 2020). This definition recognizes the subjective dimension of pain and breaks with the purely physiological view, considering the factors psychological and social factors that influence it.

Pain is a subjective, multifactorial and complex experience, which involves not only sensory aspects, but also emotional, cognitive and social components. When

becomes persistent for more than three months, it is classified as chronic pain, being considered currently a health condition in itself, and not just a symptom. This condition impacts profoundly impacting individuals' quality of life, influencing sleep, mood, relationships social aspects and general functionality. In this sense, Melzack (2001, p. 137) states that “pain chronic is not just a symptom of another condition, but a condition in itself, with neurophysiological, emotional and behavioral changes that need to be understood and treated in an integrated manner.” This understanding broadens the view of pain, requiring that the care goes beyond prescribing analgesics and considers interdisciplinary approaches and integrative, focused on the subject as a whole.

The traditional biomedical model, although effective in many acute contexts, has shown limited by the complexity of chronic pain. Treatment is often based on prolonged use of analgesics and anti-inflammatories, including opioids, which can lead to dependence, tolerance and adverse effects (BRASIL, 2020). Furthermore, this model often sometimes ignores the patient's subjectivity and the psychosocial aspects that interfere with perception and management of pain. Therefore, it is necessary to adopt a broader approach, focused on comprehensive care and interdisciplinarity, as recommended by the National Policy of Integrative and Complementary Practices (PNPIC), implemented in the Unified Health System (SUS) since 2006.

## 2.2 COMPLEMENTARY INTEGRATIVE PRACTICES AND PAIN RELIEF

Integrative and Complementary Health Practices (PICS) consist of resources therapeutics based on traditional knowledge and different medical rationalities, that aim to prevent diseases and promote comprehensive health. Among the main practices recognized by the SUS are acupuncture, meditation, reiki, phytotherapy, auriculotherapy, yoga, tai chi chuan, and homeopathy. These practices are not a substitute for treatment conventional, but complement it, acting on the physical, emotional, mental and spiritual aspects of the human being (BARBOSA et., 2019).

Several scientific evidences have demonstrated the effectiveness of PICS in the management of chronic pain. Acupuncture, for example, has been widely studied and shows effects superior to placebo in reducing musculoskeletal pain, headaches and arthritis (VICKERS et al., 2018). Mindfulness, a meditation technique focused on full attention, has shown benefits in emotional regulation, stress reduction and improved pain perception (KABAT-ZINN, 2003). Reiki, despite still presenting a body of clinical evidence

more incipient, has been valued by patients and professionals for its relaxing effect and feeling of welcome that it provides (NETO, 2024).

Integrative practices favor a closer therapeutic relationship between professional and patient, promoting active listening, empathy and co-responsibility in the process of care. Qualitative studies indicate that patients who use PICS feel more welcomed, understood and participative in relation to their own treatment, which contributes for adherence and positive results. Thus, PICS not only relieve physical symptoms, but strengthen the user's protagonism, autonomy and general well-being, reinforcing the need for its expansion in the context of public health policies.

Integrative and Complementary Health Practices (PICS) have been gaining ground in context of chronic pain care, mainly due to its subject-centered approach and comprehensive care. Unlike conventional therapies, PICS seeks to valuing listening, bonding, and the user's protagonism in the therapeutic process. Tesser (2017, p. 205), when analyzing the insertion of PICS in the SUS, highlights that:

Care with PICS is not limited to the applied technique. It involves qualified listening, welcoming, bonding, and empowering the user. These elements favor the redefinition of pain, strengthening autonomy, and expanding the capacity to cope with suffering, contributing to pain relief not only in its physical dimension, but also in its emotional and existential dimensions (TESSER, 2017, p. 205).

This perspective broadens the concept of treatment, incorporating subjective and relational skills that are fundamental to coping with chronic pain. By integrating knowledge traditional and evidence-based practices, PICS offer therapeutic resources that complement biomedical care and promote a better quality of life for users.

## 2. MATERIAL AND METHOD

This is a narrative review with a qualitative approach, based on the book "Dores chronic diseases have a cure: the power of therapies" (RODRIGUES, 2024), in studies published in databases such as SciELO, PubMed and BVS, and in official documents from the Ministry of Health. Reports from professionals and users of the Unified Health System (SUS) were also considered. present in the analyzed work. The data analysis was based on the completeness of the care and the principles of integrative medicine.

## 3. RESULTS AND DISCUSSION

Integrative therapies have proven effective in relieving chronic pain of various types. natures, such as low back pain, fibromyalgia, arthritis and neuropathic pain. Acupuncture, for example, demonstrated a significant reduction in pain in users who were monitored in UBSs with integrative services. Studies such as that by Vickers et al. (2018) show that acupuncture is superior to placebo for musculoskeletal pain and chronic headaches.

Another widely cited resource is meditation, especially mindfulness, which works on emotional regulation and pain perception. Reports in the book indicate that patients who practiced meditation regularly experienced not only pain relief, but also improved sleep, anxiety, and self-care. This perception is confirmed by studies such as that of Kabat-Zinn (2003), which shows a reduction in stress and pain levels in groups that practiced mindfulness-based stress reduction (MBSR).

Furthermore, to highlight specific integrative models aimed at chronic pain with emotional focus, we can mention Pérez-Fernández et al., (2019) whose Mindfulness-based Pain & Illness Management (MBPM) combines mindfulness with compassion and has been effective in promoting well-being, self-compassion and reducing depressive symptoms in adults with chronic pain, including Brazilian health professionals.

Auriculotherapy, a technique that uses points on the ear to treat symptoms, was highlighted by patients and professionals as a simple, effective and low-cost practice, with impact positive in managing chronic pain. In the same sense, Reiki – the laying on of hands technique – has had reports of analgesic and relaxing effects. Although clinical studies on Reiki are incipient, the users' perception indicates an increased feeling of welcome and well-being, which contributes to adherence to treatment.

Neto (2024) reviewed five Brazilian and international studies on Reiki in clinical settings of chronic pain, and received reports of reduced pain intensity and significant improvement in emotional, spiritual and physical well-being of patients. Despite the low methodological rigor and small samples, it is concluded that Reiki can be a safe and promising practice, especially as a complement in interdisciplinary approaches.

Although Reiki presents subjective results, it has been studied and reported immediate effects of Reiki on emotional state and pain relief, as in this study with 30 elderly people underwent weekly Reiki sessions for four weeks. The results showed significant reduction in anxiety and depressive symptoms, as well as pain relief after the session (SCANDIUIZZI, 2021).

Araújo (2021) reviewed and analyzed nine Brazilian studies on chronic low back pain, concluding that techniques such as systemic acupuncture, electroacupuncture, auricular acupuncture

show a significant reduction in pain intensity and emotional improvement, even though it is necessary to carry out more research with rigorous protocols and thus reinforcing and presenting local evidence and justifying the need for clinical studies controlled.

Another excellent example of experimental evidence with follow-up and clinical effect relevant, was the clinical trial carried out with 39 patients, with the group that received acupuncture real showed an average reduction of 54% in pain and an improvement in the WOMAC functional index (Western Ontario and McMaster Universities), held for up to four months, while the placebo and conventional treatment groups did not show significant progress (ASTINI, 2023).

Complementary therapies such as acupuncture and auriculotherapy have gained prominence for their effectiveness when associated with conventional physiotherapeutic pain treatment lumbar. These, in turn, represent one of the most common musculoskeletal conditions common and represents a major challenge for healthcare professionals due to their high prevalence and impact on individual functionality. Oliveira, Rolim and Lopes (2021) highlight that these integrative practices, when used as adjuncts to physiotherapy, can enhance therapeutic results, promoting greater pain relief and improvement in quality of life of patients with low back pain.

Another disease that significantly affects the quality of life of patients is fibromyalgia. It is characterized by being a syndrome whose symptoms are pain diffuse musculoskeletal disorders, fatigue, and sleep disorders. Given the complexity of the condition, clinical and the difficulty in achieving a fully effective treatment, acupuncture has been identified as a promising integrative practice for symptom management. According to Lessa, Sachsida and Aleixo (2024) highlight, “acupuncture in the treatment of fibromyalgia presents evidence of pain reduction and improvement in the general well-being of patients, being a safe and effective complementary alternative.” This therapeutic approach seeks to provide symptomatic relief and contribute to the promotion of comprehensive health, in line with the guidelines of integrative practices in the context of public health.

The integrative approach, as demonstrated, is not restricted to the application of techniques, but involves a change in the therapeutic relationship. Professionals who apply these therapies report a greater bond with patients, a broader perception of their living conditions and greater listening. Comprehensive care is, therefore, an experience of presence, empathy and co-responsibility.





## FINAL CONSIDERATIONS

Integrative therapies represent a significant contribution to pain care chronic disease in the context of primary health care. They provide symptomatic relief, improvement in well-being and strengthening the bond between user and professional. More than techniques, they express a way of care centered on the person and their uniqueness.

The expansion of these practices requires public policies for training, financing and structured implementation in the territories. The articulation between multidisciplinary teams, users and managers can consolidate a fairer, more sensitive and effective care model.

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## ACKNOWLEDGMENTS

I thank God first, for the strength, wisdom and serenity granted at each stage of this journey. To my family, for their unconditional love, encouragement and understanding.

moments of intense dedication. A special thanks to Daniela Pividori, whose support, encouragement and constant presence were fundamental to the construction and realization of this dream. May this work be a reflection of the faith, affection and collaboration that have sustained me throughout along the way.