Introduction

- Therapeutic Touch and Healing Touch are complimentary, energy-based treatments. They are based on the premises that (1) illness is a result of “a disruption of the flow of energy surrounding a person’s being” and (2) reattuning the energy field facilitates health (Minten, 2001, p. 145).
- During an intervention, practitioners hover their hands just above the patient’s body, seemingly adjusting and balancing the energy field via the flow of healing energy through their hands.
- Healing Touch and Therapeutic Touch are promoted in the curriculum at UWECD and at hundreds of universities nationwide.
- Proponents of these interventions claim myriad benefits, including pain relief, accelerated wound healing, reduced anxiety, and increased relaxation (Fazzino et al., 2010).
- However, peer-reviewed, controlled studies have shown that human energy fields are not systematically measurable or detectable, even by trained energy therapy practitioners (Rossa et al., 1998).
- Further, multiple previous reviews of the studies that have examined these practices have concluded that research that claims to support the validity of these interventions, is fraught with methodological errors, such as small samples, lack of appropriate placebo control, and subjective rather than objective outcome measures (Anderson & Taylor, 2011; Peters, 1999; Robinson et al., 2007).
- We conducted a review of recently published papers (2010-2016) to determine if the quality of the research has improved.

Study Selection

- We searched MEDLINE, Cochrane Library, CINAHL Complete, All HealthWatch, and Health Source: Nursing for articles published between 2010 and 2016, with Therapeutic Touch or Healing Touch in the title; we also examined reference lists of the articles recovered from the database searches.
- Searches recovered 57 articles, 34 of which were empirical studies with stated purpose of testing the effects of Healing Touch or Therapeutic Touch.
- Empirical articles were coded independently by three raters for three critical elements of methodological integrity: discrepancies were resolved by discussion.
  1. Touch: To be a true test of a practitioner’s "healing energy," the intervention should not involve touch.
     (yes, no, unclear: Kappa = .62 to .69)
  2. Blind: To address potential placebo effects, high quality studies make certain that participants are either blind to condition (or asleep) or naive (e.g., babies.
     (yes, no, unclear: Kappa = .67 to .82)
  3. Placebo/Mimic: To address potential placebo effects, high quality studies include a placebo or "mimic" intervention condition.
     (yes, no, unclear: Kappa = .66 to .81)

Results

- Results Did Not Support TF/HT (N = 4)
- Results Supported TF/HT (N = 2)
- Mixed Results (N = 3)
- Results Did Not Support TF/HT (N = 4)
- Results Supported TF/HT (N = 5)
- Claimed Support on Basis of Practitioners' Subjective Impressions (N = 2)
- Claimed Support, but Data Contradicted Claim (N = 2)

Discussion

- Previous reviews of the empirical literature on Healing Touch and Therapeutic Touch (e.g., Anderson & Taylor, 2011) have called for more rigorous tests of these energy therapies before the medical establishment can conclude that they are evidence-based practices. Our review of the literature published since then (between 2010 and 2016) suggests that the quality of the research has not improved. Of the 57 papers we found, just nine involved rigorous, well-designed tests of the claim that practitioners can facilitate healing through intentional repatterning (or “smoothing”) of a yet-undetectable energy field (Rossa et al., 1998). We categorized these studies as well-designed because they: (1) did not involve touch, and (2) addressed the possibility of placebo effects by blinding participants to their treatment condition (e.g., by using infants or conducting the treatment while patients slept) or by including a placebo or “mimic” group. Only two of the nine well-designed studies offered support for the energy therapies; the other studies were mixed or, in four cases, offered no support.
- Over half of the empirical studies we found allowed practitioners to touch their patients during their healing sessions, thus removing the feasibility of testing these practices as “energy therapies.” Notably, nearly every paper we read, regardless of its study design or results, began with a review of claims (from other poorly designed studies) about the positive effects of the therapies, and concluded with positive sentiments about the healing potentials of these therapies; in fact, two papers claimed statistical support when the data they laid out in their tables and results sections clearly showed no support at all. Thus, those who are not well-versed in research design or statistics might easily walk away from the literature with a mistaken conclusion that Healing and Touch and Therapeutic Touch are scientifically supported practices.
- On the basis of our review of recent studies and of previous reviews of the literature on Healing Touch and Therapeutic Touch, we conclude the following:
  1. Ethically, medical practitioners are obligated to provide the best available and empirically supported treatments. Therapeutic Touch and Healing Touch have not established themselves as empirically supported.
  2. At UWECD and many universities nationwide, class time and resources are devoted to energy therapies, including Therapeutic Touch and Healing Touch. We are not suggesting that complementary therapies in general are ineffective; however, we are opposed to researchers’ claims that their evidence supports energy therapy in particular if their effects may actually be a product of physical touch, relaxation, or hope inspired by a caring and well-intentioned practitioner. Valuable time and resources in and out of the classroom should be devoted to treatments and medical practices that have been systematically tested and consistently supported by randomized placebo-controlled designs.

References


Acknowledgements

This research is supported by the Office of Research and Sponsored Programs at UWECD. We thank ITS for printing this poster.