The Feasibility of Developing an Inpatient Acupuncture Program at a Tertiary Care Pediatric Hospital

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Background

• Utilization of complementary and integrative medicine has increased significantly in recent decades, with hospital-based acupuncture programs becoming more common.

• Acupuncture was first established at Seattle Children’s Hospital in 2004 as an outpatient service, however not having an assigned inpatient provider prevented providing acupuncture treatments regularly to inpatients.

• In 2013, philanthropic funding was received to provide inpatients with consistent weekly access to acupuncture.

• In January 2014, Seattle Children’s Hospital began a 6-month pilot project offering inpatient acupuncture and related manual therapies to pediatric patients who were either admitted to Seattle Children’s Hospital or seen for an outpatient surgical procedure.

Methods

• Outreach was conducted from September through December of 2013. After several rounds with the inpatient pain service allowed an opportunity for discussion between primary teams and acupuncturists. Presentations were given to all hospital services that requested information and at regional conferences.

• During the pilot project, inpatient acupuncture was available Monday through Friday from 8 a.m. to 12 p.m.

• A database was constructed to prospectively collect information regarding the utilization of the inpatient acupuncture service, including the reason for the consult, type and number of treatments provided, any reported response to treatment, and any reported adverse events.

• Questionnaires were administered to referring hospital providers at months 3 and 6 of the pilot program, as well as to patients and families.

Objectives

• We undertook a pilot project to assess the feasibility of developing an inpatient acupuncture program at a pediatric hospital.

• We aimed to increase awareness and promote education of acupuncture as a complementary and integrative health approach and nonpharmacological option available to patients.

• The program allowed greater access to treatments with quick reliable response time for new consults and the ability to accommodate requests for multiple treatments or treatments provided at specific times.

• We present our experience in developing an inpatient acupuncture service at Seattle Children’s Hospital from initial pilot project to the current full-time inpatient program.

Results

• During the 6-month pilot program, acupuncturists saw 87 patients ages 10 months to 23 years and provided 338 individual treatments (186 acupuncture treatments and 152 manual therapy treatments (Fig. 1).

• The average number of patients with active consults per day was five, with a maximum of nine with an average of four patients being treated per day. Patients received an average of 3.5 treatments each, with a minimum of 1 and a maximum of 22 treatments.

• Questionnaires were sent to 130 providers who ordered acupuncture consults and all patients and families treated during the pilot period. There was a 43% return rate from providers and a 70% return rate from patients and families.

Questionnaire Responses

Providers

• 95% felt that acupuncture and related manual therapies had been helpful for their patients and wanted to see the inpatient acupuncture service offered for inpatients on a permanent basis.

• 0% had hesitations in referring patients to the acupuncture service.

Patients and Families

• 72% felt that acupuncture and related manual therapies were helpful.

• 97% reported no discomfort or negative experience with acupuncture and related manual therapies.

• 83% reported that they would like to see the inpatient acupuncture service offered to inpatients on a permanent basis.

Discussion

• Challenges impacting acupuncture included scheduling conflicts with other therapies/procedures, limited hours, morning hours not being conducive to the patient’s clinical state, and treatment interruptions by other providers.

• Service related challenges included the lack of an order set for acupuncture consults linking to the acupuncturists, poor insurance reimbursement, lack of program development time, and the continued need for institutional/philanthropic support.

• High interest, demand, and positive feedback from hospital providers, patients, and families led to the development of a full-time inpatient acupuncture program in October 2014.

• The interest and demand for inpatient acupuncture has continued to grow since then (Fig. 2).

Patients were seen for a variety of symptoms and conditions.

- pain
- fatigue
- mood and emotional issues
- general support
- pain medication dependence or weaning issues
- pain syndromes (complex regional pain syndrome (CRPS) and central sensitization)
- gastrointestinal complaints (inflammatory bowel disease, abdominal pain, constipation)

- nausea
- sleep disturbance
- neurologic dysfunction
- seizure disorder

Acupuncture and manual therapy treatments during pilot period

FIGURE 1. Acupuncture and manual therapy treatments during pilot period

FIGURE 2. Number of new consults per month since start of pilot program

*July-September 2014 were transition months where the program was not yet full-time

- The inpatient program fosters inter-provider communication, allowing for safe and truly comprehensive and integrative care plans.

- The positive response to Seattle Children’s inpatient acupuncture program with feasibility and acceptability demonstrated by increasing consults and patient and provider questionnaire data, suggest that similar programs may be of interest to other pediatric hospitals.

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