

## MEANINGS OF ACUPUNCTURE FROM THE PATIENT'S POINT OF VIEW

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### ABSTRACT

**Objective:** to understand the meaning of acupuncture from the point of view of this health practice's user.

**Method:** this is a descriptive, exploratory study with a qualitative approach, using the Symbolic Interactionism theoretical-methodological framework, carried out in a private acupuncture clinic located in Minas Gerais' Western Health Macroregion. The data was obtained through individual interviews, with a semi-structured script, drawn up based on the objectives and theoretical framework, consisting of a characterization of the research participants and guiding questions. The data was collected between April 2022 and January 2023 and analyzed using content analysis.

**Results:** a total of 25 people were interviewed, the majority of whom were female and had undergone acupuncture for between 2 months and 10 years. After analysis, four categories related to the patient's view of acupuncture treatment were revealed: 1) Oriental technique with many benefits; 2) The health professional and acupuncture; 3) Acupuncture and other techniques; 4) The context of the search for acupuncture. In the light of symbolic interactionism, it was possible to understand that the meanings of acupuncture underwent changes during the care process and the influence of the professionals involved in providing health care.

**Conclusion:** understanding the meanings of acupuncture in the patient's health is of paramount importance in order to value the symbolism of the technique for the patient and to use the care space as an environment for comprehensive care, education and promotion of health and quality of life.

**DESCRIPTORS:** Acupuncture. Collective Health. Qualitative research. Symbolic Interactionism. Nursing.

**HOW CITED:** Costa BT, Abreu LP, Silveira EAA. Meanings of acupuncture from the patient's point of view. *Texto Contexto Enferm* [Internet]. 2023 [cited YEAR MONTH DAY]; 33:e20230413. Disponível em: <https://doi.org/10.1590/1980-265X-TCE-2023-0413en>

# OS SIGNIFICADOS DA ACUPUNTURA: SOB O OLHAR DO PACIENTE

## RESUMO

**Objetivo:** compreender o significado da acupuntura sob o olhar do usuário desta prática de saúde.

**Método:** trata-se de um estudo descritivo, exploratório de abordagem qualitativa, com referencial teórico-metodológico do Interacionismo Simbólico, realizado em uma clínica privada de referência em atendimento de acupuntura, localizada na Macrorregião Oeste de Saúde de Minas Gerais. Os dados foram obtidos mediante entrevista individual, com roteiro semiestruturado, elaborado com base nos objetivos e referencial teórico, composto pela caracterização dos participantes da pesquisa e perguntas norteadoras. Os dados foram coletados entre abril/ 2022 e janeiro/2023 e analisados à luz da análise de conteúdo.

**Resultados:** Foram entrevistadas 25 pessoas, sendo a maioria do sexo feminino, que fizeram acupuntura durante 2 meses a 10 anos. Após análise, desvelam-se quatro categorias relacionadas ao olhar do paciente sobre o tratamento de acupuntura, sendo estas: 1) Técnica oriental com muitos benefícios; 2) O profissional de saúde e a acupuntura; 3) Acupuntura e outras técnicas; 4) O contexto da busca pela acupuntura. À luz do interacionismo simbólico, foi possível compreender que os significados da acupuntura sofreram modificações durante o processo do cuidado e influência dos profissionais envolvidos na prestação do cuidado em saúde.

**Conclusão:** a compreensão dos significados da acupuntura na saúde do paciente é de suma importância para valorizar o simbolismo da técnica para o paciente e utilizar o espaço do atendimento como um ambiente de cuidado integral, educação e promoção da saúde e qualidade de vida.

**DESCRITORES:** Acupuntura. Saúde Coletiva. Pesquisa Qualitativa. Interacionismo Simbólico. Enfermagem.

# LOS SIGNIFICADOS DE LA ACUPUNTURA DESDE LA PERSPECTIVA DEL PACIENTE

## RESUMEN

**Objetivo:** comprender el significado de la acupuntura desde la perspectiva del usuario de esta práctica de salud.

**Método:** estudio descriptivo, exploratorio, con abordaje cualitativo, con el marco teórico-metodológico del Interacionismo Simbólico, realizado en una clínica privada de referencia en la atención de acupuntura, ubicada en la Macrorregión Sanitaria Oeste de Minas Gerais. Los datos fueron obtenidos a través de entrevistas individuales, con un guión semiestruturado, elaborado sobre la base de los objetivos y el marco teórico, compuesto por la caracterización de los participantes de la investigación y preguntas orientadoras. Los datos fueron recolectados entre abril de 2022 y enero de 2023 y analizados mediante análisis de contenido

**Resultados:** se entrevistó a 25 personas, la mayoría del sexo femenino, que se habían sometido a acupuntura entre 2 meses y 10 años. Luego del análisis, se revelaron cuatro categorías relacionadas con la visión del paciente sobre el tratamiento con acupuntura, siendo estas: 1) Técnica oriental con muchos beneficios; 2) El profesional de la salud y la acupuntura; 3) Acupuntura y otras técnicas; 4) El contexto de la búsqueda de la acupuntura. A la luz del interaccionismo simbólico, fue posible comprender que los significados de la acupuntura sufrieron cambios durante el proceso de atención como también la influencia de los profesionales involucrados en la prestación de cuidados a la salud.

**Conclusión:** la comprensión de los significados de la acupuntura en la salud del paciente es de suma importancia para valorar el simbolismo de la técnica para el paciente y utilizar el espacio donde se brinda la atención como ambiente de cuidado integral, educación y promoción de la salud y calidad de vida.

**DESCRIPTORES:** Acupuntura. Salud Colectiva. Investigación Cualitativa. Interaccionismo Simbólico. Enfermería.

## INTRODUCTION

Acupuncture is a therapeutic method of Traditional Chinese Medicine (TCM), which focuses on balancing the body by stimulating energy points that are distributed throughout the body along lines called acupuncture meridians<sup>1</sup>.

Acupuncture produces analgesic, neuroprotective and anti-inflammatory therapeutic effects, as well as endocrine, immunological, and psychological modulations. This action occurs as a result of the stimulation of the acupoints that promote an alteration in the peripheral nervous system that are conducted, producing neuromodulations at a local and distant level, which can send stimuli to brain areas that are responsible for releasing different organic responses, as well as altering the biochemical response of neurotransmitters that regulate physiological processes such as pain, temperature and blood supply<sup>2</sup>.

Among the therapeutic responses, analgesia is the most studied and proven effect in Western medicine<sup>1</sup>. Although studies with greater levels of scientific relevance are needed, an integrative review that analyzed the scientific evidence for the use of acupuncture in workers found that the technique is effective in relieving pain complaints, psycho-emotional illnesses, improving sleep patterns and helping with weight loss by controlling appetite and binge eating<sup>3</sup>. Acupuncture has been practiced in Brazil since the 19th century, influenced by Japanese and European immigrants who practiced TCM knowledge and other integrative and complementary practices (ICPs). It gained greater notoriety after the National Policy for Integrative and Complementary Practices (*Política Nacional de Práticas Integrativas e Complementares*, PNPIC). The PNPIC boosted the inclusion of ICPs in the Unified Health System (*Sistema Único de Saúde*, SUS), with the aim of increasing integrality and resolubility in health services<sup>4</sup>.

Among the professional health councils that recognize acupuncture as a postgraduate degree (physiotherapy and occupational therapy, biomedicine, nursing, medicine, pharmacy, speech therapy and psychology) and regulate the practice, the Federal Council of Medicine (*Conselho Federal de Medicina*, CFM) considers acupuncture to be a medical specialty and defends the guarantee of the practice as a medical exclusivity. However, in view of Brazilian public health policies, ICPs are a multidisciplinary competence. To date, there is no general regulation of the practice of acupuncture in the country, which influences the consolidation of the practice<sup>5</sup>.

Nursing is one of the professions that had the practice of acupuncture recognized by the Federal Nursing Council (*Conselho Federal de Enfermagem*, COFEN) for the first time, through Resolution 197 of 1997. This legislation, which recognized Alternative Therapies, including acupuncture, as a professional area of practice, was revoked due to the need for updates. COFEN resolution 326/2008 authorized nurses to use acupuncture autonomously in their professional conduct<sup>6</sup>, and COFEN resolution 585/2018 consolidated the recognition of acupuncture as a specialty/qualification for professional nurses<sup>7</sup>. In addition, COFEN Resolution No. 739/2024 complemented the standardization of nursing in PICS, including acupuncture<sup>8</sup>.

The advances made by COFEN project the profession as a potential player in the field. However, there is a need for investment in training, good practice promotion, implementation and dissemination of the technique and its therapeutic benefits, reflecting on and claiming the legitimization of acupuncture as a nursing care practice, adding nurses' broader view of health to the holistic vision of ICPs<sup>6</sup>.

Professionals from different areas of health see acupuncture and TCM as a resource for increasing resolutiveness by changing the biomedical viewpoint focused on pathologies to the search for holistic and integral care<sup>9-10</sup>, in which the care's meaning for the patient is fundamental.

A bibliometric study that analyzed scientific documents published in Brazil and around the world related to acupuncture between 2000 and 2014 shows that the countries that publish the most on the subject are the United States, China, and South Korea, with Brazil coming in 10th place. In Brazil, there was a significant increase in publications in 2006, when the PNPIC was created. However, in contrast to the number of publications, Brazil is in last place in the ranking of the top 20 countries in terms of article citations, and the number of citations is less than half the world mean, which may be due to the recent increase in publications and the quality of Brazilian acupuncture studies<sup>11</sup>.

Quantitative studies are just as important as those using qualitative approaches. Qualitative studies differ from the standard research model in that they encompass the subjectivity of human beings and their relationships, making it possible to understand the complexity of the data collected through representations of verbal and non-verbal content, as well as systematized analysis methods, always focusing on the individual and their relationships and interactions with the environment<sup>12</sup>.

Knowing subjective aspects, especially the meanings attributed by patients to acupuncture, is important, since these meanings, constructed through social interaction and reflection, guide actions such as the motivation to undergo acupuncture<sup>13</sup>. Thus, qualitative research makes it possible to understand the symbology and meaning of the client in the treatment process using the acupuncture technique, seeking a broad view from the decision to seek the technique.

In this context, the following questions emerge: What is the meaning of acupuncture for the patient? What symbols and meanings are attributed to acupuncture in the context of patients' health? Therefore, this study aims to understand the meaning of acupuncture from the point of view of the user of this health practice.

## METHOD

This is a descriptive, exploratory study with a qualitative approach, based on the theoretical and methodological framework and Symbolic Interactionism (SI).

The SI is understood as a methodological perspective that interprets the understanding of the meaning attributed to a situation or context based on the interpretation and correlation of symbols and meanings applied in the social context in which they are inserted. It also analyzes the relationship between the symbols and their choices or ways of acting<sup>14</sup>. Meaning is a fundamental element in understanding behavior, interactions, and processes, and is understood as a social product of the actions of beings as they interact with the environment, in the context and reality they experience<sup>15</sup>.

IS aims to produce verifiable knowledge of human life and behavior in groups, connecting meaning to the dynamic social interaction between human beings, mediated by society. The method is based on three premises: 1) human behavior in relation to the world is based on the meanings attributed to it; 2) meanings come from the interactivity of social interaction; 3) meanings change through the interpretation of the being immersed in a context<sup>13</sup>.

In line with the study's objectives, therefore, the SI is the appropriate methodology to guide knowledge of individuals' perceptions and meanings about acupuncture, based on their context and experience.

The study was carried out in a private acupuncture clinic located in the city of Divinópolis, a hub of the Western Health Macroregion, in accordance with the new division and nomenclature of health regions according to the 2012 Regionalization Master Plan of the Minas Gerais State Health Department<sup>16</sup>.

The study included people of both genders who are undergoing treatment or have undergone acupuncture sessions in the study setting in the last three years, for at least one month or four sessions. Exclusion criteria were people under the age of 18, participants who at the time of the interview were unable to answer and/or felt uncomfortable, and those who could not be located.

The participants were seen by three different professionals who provide acupuncture services at the study site. Participants were invited to take part in the study on an equal basis, so that all practitioners' clients were equally represented to avoid possible research bias. While waiting for the acupuncturist, people who met the inclusion criteria were invited to talk to the researcher in a private room. The objectives and data collection procedures were presented. They were then asked if they were willing to take part in the research. When they agreed to take part, the participants read and signed the Informed Consent Form (ICF), thus legitimizing their participation.

The data for this study was obtained through individual interviews, using a semi-structured script, drawn up based on the objectives and theoretical framework of this study, consisting of two parts, the first comprising a characterization of the research participants and the second consisting of guiding questions, based on the study objectives, about the participant's experience with acupuncture for their health.

The interviews were conducted in person and virtually, respecting the preference and availability of the participants. The interviews were conducted in such a way as to give the participants freedom of speech, without interfering in their speech or in the formulation of ideas and thoughts, thus avoiding research bias and obtaining a true reflection of the reality of the experience studied.

It is important to note that at the time of data collection, from April 2022 to January 2023, Brazil was in the process of being vaccinated against COVID-19. As a result, many participants felt insecure about coming to the clinic to take part in interviews. With the approval of the Ethics Committee, the interviews were conducted virtually or in person, allowing participants to choose the option that would bring them the most safety and well-being.

After approval from the Ethics Committee, four interviews were carried out with the aim of assessing the applicability, relevance of the questions and the participants' understanding, seeking to understand whether the questions and the method used were in line with the study's objectives. After analyzing the interviews that made up the pilot study, data collection began.

The interviews were carried out by three duly trained researchers, two of whom always took part in the interviews and transcriptions, to ensure that the data collection and analysis process followed the same criteria. For ethical reasons, the acupuncturist researcher did not conduct interviews with her patients.

All the interviews were audio-recorded as a way of preserving the participant's image. It should be noted that in order not to lose the non-verbal information transmitted by the participants during the interview, the interviewers wrote down their perceptions in a field diary, which was taken into account in the data analysis phase. The interviews were identified by alpha numeric codes, date and time of collection: "E" for interview, followed by the sequential numbering of the order of the interview (E1, E2,...,25). The recordings will be kept by the researcher responsible, stored for five years and then deleted in order to guarantee confidentiality.

The audios were carefully transcribed in their entirety. The data collected was analyzed at the same time as it was collected, allowing the researcher to make initial reflections at the start of data collection. Therefore, the interviews were transcribed as soon as possible after collection, thus starting the data analysis process, which was further refined throughout the study and the other data collections, using content analysis as the data analysis methodology.

Content analysis is a methodological tool for analyzing verbal and non-verbal data in the field of social research, which aims to interpret discourse, text and the meaning of words, based on deduction and inference. As such, it is structured in three phases: 1) pre-analysis: this includes the floating reading of the data, choosing documents for analysis, formulating and reformulating objectives and, finally, hypotheses and formulating indicators; 2) exploration of the material, categorization or coding, which aims to categorize the data for a more careful analysis, grouping and regrouping the registration units; 3) results treatment: the phase of inferences and interpretation of the results themselves, in the quest to give meaning to the data, through a critical and reflective analysis<sup>17</sup>.

As this is a qualitative study, the number of interviews was not predetermined, as representativeness is not based on numerical criteria. Therefore, data collection progressed until data saturation, i.e. the repetition of information, with no new evidence being added<sup>18</sup>. This occurred in the twenty-first interview and, after saturation, four more interviews were carried out to ensure that no data relevant to the study was not captured.

Respecting the ethical precepts of Resolution 510 of April 7, 2016 of the National Health Council, the project for this study was submitted to the Ethics and Research Committee of the Federal University of São João del-Rei – Midwest Campus / Dona Lindu, and the research only began after approval.

## RESULTS

A total of 25 semi-structured individual interviews were carried out between April 2022 and January 2023. The interviews were conducted using both face-to-face and online resources, respecting the choice and availability of the study's collaborators. Of those interviewed, 20 (80%) were female and 5 (20%) were male. Of all those interviewed, 19 (76%) said they were white and 6 (24%) said they were brown. The interviewees' ages ranged from 34 to 73.

The participants' education ranged from incomplete high school to a master's degree, and the data was characterized in terms of frequency: 2 (8%) incomplete high school, 2 (8%) complete high school, 1 (4%) technical course, 1 (4%) incomplete higher education, 9 (36%) complete higher education, 9 (36%) post-graduates and 1 (4%) master's degree.

In relation to marital status, 4 (16%) were single, 16 (64%) married and 5 (20%) divorced. Regarding the number of children: 9 (36%) had no children, 2 (8%) were pregnant, 7 (28%) had one child, 6 (24%) had two children and 1 (4%) had three children.

The length of acupuncture treatment ranged from 2 months to 10 years, with patients who had been undergoing treatment for longer reporting that they had been out of treatment for some time and had subsequently returned to the practice. In relation to the frequency of sessions, some patients reported that, at the beginning, they had up to two sessions a week, while the majority had weekly or fortnightly sessions. Two participants reported that after their complaints improved, they held sessions sporadically.

From the data obtained from the transcription of the audio interviews, after exhaustive reading, a total of 56 recording units were initially identified, which were processed and analyzed, giving rise to 10 codes. From these, four categories emerged: 1) Oriental technique with many benefits; 2) The health professional and acupuncture; 3) Acupuncture and other techniques; 4) The context of the search for acupuncture.

### **Oriental technique with many benefits**

This category discusses the codes 1. Oriental technique that seeks to treat the body energetically and 2. Benefits of acupuncture, as shown in the Chart 1.

**Chart 1** – Distribution of participants' reports according to the category Oriental technique with many benefits. Minas Gerais, MG, Brazil, 2023.

Code	Report example
Oriental technique that seeks to treat the body	<p><i>I see it as a stimulation of strategic points in our body that will heal our body... Our emotions. Emotions, which is what's going to generate, right? That is causing a disease or a symptom (E5).</i></p> <p><i>When I'm doing acupuncture, I feel really good! And I feel this good energy coming in. What's suffocating me? It comes out. I can feel it all. This exchange of energy is beneficial to me, and I leave feeling calmer (E23).</i></p> <p><i>I've seen that acupuncture goes deep like this. It goes right to the cause, to what's causing the symptom I'm feeling. That's what I saw. So I really liked it (E8).</i></p>
Acupuncture benefits	<p><i>It's a really therapeutic, ancient oriental treatment? It has many benefits for us... In everything physical, mental... It brings healing and a lot of positive results (E20).</i></p> <p><i>My intestines were also very compromised and very dry. I would go five or seven days without going to the toilet. Acupuncture also brought me benefits in this sense because the acupuncturist worked on many points to stimulate the intestine and brought me a lot of improvement and positivity in this sense (E20).</i></p>

The participants saw acupuncture as a technique that has oriental origins and brings many health benefits. Among them are relaxation, reduction of pain, depression and anxiety and quality of sleep. Through treatment with acupuncture, it is possible to obtain improvements in neurological and intestinal symptoms and a positive evolution in laboratory parameters. By using needles, acupuncture stimulates strategic points in the body that act on the physical and emotional, providing balance to the body and seeking to achieve healing.

The meanings constructed by the participants relate acupuncture to renewing energies, helping with physical and emotional balance, promoting quality of life, encouraging self-care and self-knowledge, and changing perceptions about life: the participants are therefore hopeful about the treatment, since they report that positive results appear, even if symptoms worsen at first, because it acts deeply on the cause of the problem.

### Health professionals and acupuncture

This category discusses codes 6 – Professionals' attitude, 7 – Professionals' influence on the outcome of the technique and 10 – Acupuncture should be better accessible, as shown in the Chart 2.

Humanized listening and professional commitment were pointed out as differentials that can positively influence the results of the technique. On the other hand, prejudice, misinformation and resistance on the part of professionals can hinder the search for and reliability of the technique. Faced with the perception of so many benefits, the participants believe that access to this treatment should be made easier.

**Chart 2** – Distribution of participants' reports according to the category Health professionals and acupuncture. Minas Gerais, MG, Brazil, 2023.

Code	Report example
Professionals' attitude	<i>Today, I also see that even people trained in medicine, in allopathic medicine, are turning their attention to integrative practices, right? Especially acupuncture, many doctors today are acupuncturists, aren't they? Many recommend herbal medicine. I've seen that, you know? Not many! But it's a group that's growing in this way (E1).</i>
Influence of the professional on the technique's results	<i>You see, it's not like just arriving, lying down and her putting some needles in you and that's it. No! She does everything. She sits you down. She asks how you're doing... if everything's OK at home. So she really welcomes you. I feel very comfortable (E12).</i>
Acupuncture should have greater access	<i>I think it should be a more widespread and valued method. I speak for myself! I was unaware of the effects and indications and I see that many of my colleagues don't believe in it because they're uninformed. I think that if this information were available, it would be better accepted and associated with the treatments we already have. Acupuncture has given me back my quality of life and enabled me to enjoy my pregnancy (E16).</i>

## Acupuncture and other techniques

In this category, participants discussed the types of acupuncture, the association of acupuncture with other techniques and the difference between allopathy and acupuncture, as shown in the Chart 3.

The participants emphasized that acupuncture, when combined with other techniques, diet, and quality sleep, can produce positive results. Although it can be used concomitantly with acupuncture, the participants emphasize that allopathy differs because it is natural, seeks to resolve emotional problems without harmful effects and considers the intervention of energy.

**Chart 3** – Distribution of participants' reports according to the Acupuncture and other techniques category. Minas Gerais, MG, Brazil, 2023.

Code	Report example
Types of acupuncture	<i>Today I also see that there is an acupuncture technique without needles, right? It's acutonics, right? I've even had a few sessions. With a teacher of ours, which I thought was really cool (E1).</i>
Acupuncture combined with other techniques	<i>The sessions, the conversations with the professionals, were also talking about food, from the point of view of Chinese medicine, so, in fact, by associating acupuncture with food, I noticed an improvement in my quality of life, so to speak (E4).</i>
Allopathy differs from acupuncture	<i>[...] I see acupuncture as a totally alternative and natural medicine and I believe that it is possible to combine the two (allopathy and acupuncture), because there will always be some case where I won't be able to give up medication (E4).</i>

## The context of the search for acupuncture

Participants sought acupuncture because their problems were not solved by traditional methods, because they were recommended the method by others and as a complementary treatment, as can be seen in the Chart 4.



**Chart 4** – Distribution of participants' reports according to category. The context of the search for acupuncture. Minas Gerais, MG, Brazil, 2023.

Code	Report example
After failures with other therapies.	<i>I had this pain in my back that I'd already been to several orthopedists for and nobody had figured out what it was. So I ended up with a stiff neck. I spent about 40 days with a problem with my neck. I couldn't turn my neck and from there I was referred to acupuncture. I even went, but at the time I didn't really believe it, because I'd already taken a lot of medication, done a lot of things and it didn't work. Then, to my surprise, in one session I came out of there turning my neck. So it was a big surprise for me. And I loved it. (E8).</i>
Background to the search for acupuncture	<i>I've been treating depression with a psychiatrist for many years and medication alone doesn't solve it. And acupuncture helps me to become more active. I think it's very worthwhile to combine the two (E2).</i>

## DISCUSSION

The results show that acupuncture was associated with meaning as an oriental technique with many benefits. This finding is corroborated by the literature, which defines it as an ancient technique that is part of traditional Chinese medicine and is used to treat various health problems, ranging from physical symptoms such as pain and inflammation to psycho-emotional problems such as anxiety, insomnia and other conditions<sup>19</sup>.

This practice was born in China and its knowledge spread worldwide, between generations, reaching our days through written accounts<sup>10</sup>. Thus, written language brings knowledge and meanings socially constructed at different times, which guide the practice of acupuncture. This construction takes place through interaction between people, and it is in this context that the processes of signification and re-signification take place<sup>13-14</sup>.

After undergoing several moments of re-signification and research, this practice has confirmed many of its benefits, which were expressed in the codes "oriental technique that seeks to treat the body" and "benefits of acupuncture", in the category "oriental technique with many benefits". It can be seen in the literature that acupuncture, in its various forms of application, has been shown to be effective in reducing anxiety symptoms in students, increasing relaxation, and reducing tension. This effect results from a reduction in the activity of the sympathetic nervous system together with a modulation of the hypothalamic-pituitary-adrenal system<sup>20</sup>.

The meanings constructed around acupuncture, structured through interaction, and expressed in language, are associated with the meaning of a source of healing for a variety of bio-psycho-emotional problems<sup>13</sup>. However, research indicates that there are topics that require further depth and delineation of studies on the subject, considering that current studies demonstrate a low level of scientific evidence, as well as results that are not very significant compared to placebos<sup>17</sup>. One example would be the intestinal symptoms reported by the participants.

In other areas, such as the pain reported by the participants, the literature indicates that there are improvements. Non-pharmacological control of chronic pain, with therapeutic application of acupuncture and electroacupuncture in patients with vertebral syndrome with irradiation, showed a reduction in pain intensity and consequent improvement in daily functions and quality of life<sup>21</sup>. A study that evaluated the practice of acupuncture by nursing professionals in habitual risk prenatal care, analyzing the effect of acupuncture on low back pain, found a 50% reduction in pain, in addition to reports of satisfaction and well-being<sup>22</sup>.

Another quantitative-qualitative study, carried out in California, analyzed the use of acupuncture in the treatment of diabetic patients with painful neuropathic disease; the patients reported that acupuncture, in addition to bringing physical and psychological benefits, contributed to greater attention to health care and proved to be a hope for individuals with such a diagnosis, especially those on low incomes<sup>23</sup>.

The strategies used by acupuncture to achieve the aforementioned results involve stimulating specific points on the body called acupoints. Traditionally, this is done using needles, but methods that don't require needles can be used, such as the auriculopuncture mentioned under the heading "types of acupuncture". In a study carried out in Brazil with nursing professionals during the COVID-19 pandemic, auriculopuncture, a technique that applies acupuncture to the ear pinna, was perceived as a beneficial tool that promotes a sense of physical, psychological, and emotional comfort<sup>24</sup>.

The benefits of acupuncture go beyond the organic and physiological responses resulting from the insertion of needles or stimulation of acupoints. It is necessary to consider the dialogical relationship established between the user and the acupuncturist, which is a form of re-signification and a fundamental therapeutic element<sup>25</sup>. The acupuncturist's action generates a stimulus in the user during the interaction. The user then adapts and reflects on this stimulus, triggering a response that will be the stimulus for the acupuncturist. In this relational context, meanings related to health care are constructed<sup>14</sup>.

In the category "health professionals and acupuncture", the codes have meanings that recognize the professional as a key element in the outcome of the technique. Most countries consider medical training in non-conventional medicine to be important, justified by the increased use of these practices by the population, offering a range of approaches to undergraduate and postgraduate students, a trend that should be followed by Brazil in relation to homeopathy, acupuncture and other non-conventional therapies<sup>26</sup>.

This medical training is of paramount importance for the elaboration of meanings related to these practices. Individuals' actions are guided by their beliefs and meanings<sup>15</sup>. Professionals and patients act based on what acupuncture means to both of them. Thus, we can see in the reports that, although there was the meaning that acupuncture would not be a solution for treatment, this alternative was put into action. In this environment of experimentation, previous meanings can be modified during the interactive process since meanings about everyday objects are defined and redefined<sup>13</sup>.

Although the patient can re-signify it through other daily interactions, at first, the meaning attributed by the professional can encourage them to experiment and use it on a daily basis. Faced with positive changes and clarifications about the treatment, as can be seen in the reports, the person has hope that acupuncture can bring improvements to the health-disease process.

In this context, acupuncture nurses have linked the acupuncture technique itself to health actions related to recovery, rehabilitation, and health promotion, due to their broader view of biopsychosocial and spiritual well-being. Professionals such as nurses, who have incorporated integrative and complementary practices into their clinical work, can consider that the integrated use of ICPs and biomedical actions in clinical practice contributes to health actions aimed at biopsychosocial well-being, as well as to a positive interpersonal relationship between user and professional<sup>6</sup>.

In addition to the partial reduction and relief of symptoms in consecutive sessions, combined therapies can offer a better quality of life and symptoms for depressed patients<sup>27</sup>. However, it is necessary to implement greater integration between allopathy and complementary practices in the training curricula of health professionals<sup>28</sup>.

Despite its growing popularity, acupuncture is still superficially known by many professionals, who end up recommending acupuncture only when other approaches have been unsuccessful or

at the patient's own request, and most cases are related to pain<sup>28,29</sup>. In the category "context of the search for acupuncture", there are meanings related to the use of acupuncture in the face of failures with other therapies.

This situation motivated the search for alternative treatments such as acupuncture. Social life enables the process of interrelationships and interpretations of meanings to be shared<sup>10</sup>. In this context, allopathy has the shared social meaning of healing. Other healing techniques, such as acupuncture, are not always credited, as can be seen in the first report<sup>29</sup>. However, meanings can be manipulated, redefined, and modified through interaction and reflection<sup>28</sup>. By seeking acupuncture, the participants interacted with it, attributed new meanings, and glimpsed a new reality in which their needs were met.

Studies have shown that acupuncture is effective for a number of comorbidities, but the supply of this service in public health in Brazil is still limited<sup>29</sup>. The results point to the need to extend the benefits of the technique to more people, using the code "acupuncture should have more access". Even in the face of evidence-based scientific knowledge and advances in policies, the dissemination of the practice requires greater investment. The presence of obstacles related to the inadequate infrastructure of health units, as well as the complex process of implementation and financing, are some of the difficulties<sup>30</sup>.

A possible limitation of this study is the setting in which it was carried out, as it was a private clinic; the level of education and socioeconomic status can influence the meanings and symbols attributed to acupuncture, which may be different in a setting with public health patients. Another limitation is the scarcity of qualitative studies on the subject of acupuncture, making it impossible to have a more in-depth discussion of the subjectivity surrounding the topic.

## CONCLUSION

Given the findings described, it is highly important that health professionals, especially nurses, understand the concepts related to acupuncture, since the meanings present among them influence patients' senses and actions. The emphasis on nursing professionals is related to their professional practice of ensuring patient well-being and quality care in all their various fields of activity. It is therefore important for nurses to broaden their view of acupuncture, bearing in mind the potential benefits of the technique as a promising, low-cost health resource to be better explored and implemented in health services.

Furthermore, acupuncture has emerged as an area of activity for nurses that can boost their professional development, guaranteeing more autonomy, recognition, and solutions. It is recommended that this subject be included in professional training curricula and continuing education programs.

This study responded to the objective of understanding the meaning of acupuncture from the point of view of the user of this health practice. In the light of Symbolic Interactionism, it was possible to understand that the meanings of acupuncture changed during the care process and as the user experienced the treatment. There is a need for further qualitative studies to be carried out and published in scientific journals in order to better understand the experience of people undergoing acupuncture in different contexts.

## REFERENCES

1. Takemura RC, Lisboa MDSP, Souza DPD, Lacerda DA. Efeitos do tratamento com acupuntura em pacientes com fibromialgia – Revisão de literatura. *Braz J Dev* [Internet]. 2021 [cited 2023 May 29];7(4):36145-58. Available from: <https://doi.org/10.5935/2595-0118.20210010>
2. Wohlers KCP. Ação da acupuntura nos sintomas motores e não motores da Doença de Parkinson [tese]. São Paulo (SP): Instituto de Psicologia; 2019 [cited 2023 May 29]. Available from: <https://doi.org/10.11606/T.47.2019.tde-18122019-181618>
3. Pedro D, Ribeiro BMS. Acupuntura em trabalhadores: Revisão integrativa da literatura. *Rev Saúde Pública Paraná* [Internet]. 2021 [cited 2023 Jun 5];4(1):151-62. Available from: <https://doi.org/10.32811/25954482-2021v4n1p151>
4. Ruela LO, Moura CC, Gradim CVC, Stefanello J, lunes DH, Prado RR. Implantação, acesso e uso das práticas integrativas e complementares no Sistema Único de Saúde: Revisão da literatura. *Ciêns Saúde Colet* [Internet]. 2019 [cited 2024 Apr 8];24(11):4239-50. Available from: <https://doi.org/10.1590/1413-812320182411.06132018>
5. Correia DS, Cardoso GM de C, Taveira M das GMM, Duarte EM, Souza CDF de. Inserção da acupuntura no ensino médico: Revisão sistemática das experiências brasileiras. *Rev Bras Educ Med* [Internet]. 2021 [cited 2024 Apr 8];45(1):e010. Available from: <https://doi.org/10.1590/1981-5271v45.1-20200379>
6. Bousfield APS, Padilha MI. Avanços e desafios da Enfermagem em Acupuntura em Santa Catarina no período de 1997 a 2015. *R Enferm Cent O Min* [Internet]. 2020 [cited 2023 Apr 9];10:e3666. Available from: <http://doi.org/10.19175/recom.v10i0.3666>
7. Brasil, Conselho Federal de Enfermagem. Resolução nº 585/2018. Estabelece e reconhece Acupuntura como especialidade e/ou qualificação do profissional de Enfermagem [Internet]. Brasília, DF(BR): COFEN; 2018 [cited 2024 Apr 12]. Available from: <https://www.cofen.gov.br/resolucao-cofen-no-585-2018/>
8. Brasil, Conselho Federal de Enfermagem. Resolução nº 739/2024. Normatiza a atuação da Enfermagem nas Práticas Integrativas e Complementares em Saúde [Internet]. Brasília, DF(BR): COFEN; 2024 [cited 2024 Apr 12]. Available from: <https://www.cofen.gov.br/resolucao-cofen-no-739-de-05-de-fevereiro-de-2024/>
9. Nunes MF, Junges JR, Gonçalves TR, Motta MA. A acupuntura vai além da agulha: Trajetórias de formação e atuação de acupunturistas. *Saude Soc* [Internet]. 2017 [cited 2023 May 25];26(1):300-11. Available from: <https://doi.org/10.1590/S0104-12902017157679>
10. Contatore OA, Tesser CD, Barros NF. Acupuntura na Atenção Primária à Saúde: Referenciais tradicional e médico-científico na prática cotidiana. *Interface (Botucatu)* [Internet]. 2022 [cited 2023 Apr 6];26:e210654. Available from: <https://doi.org/10.1590/interface.210654>
11. Moré AO, Tesser CD, Silva JB, Min LS. Status and impact of acupuncture research: A bibliometric analysis of global and brazilian scientific output from 2000 to 2014. *J Altern Complement Med* [Internet]. 2016 [cited 2023 May 16];22(6):429-36. Available from: <https://doi.org/10.1089/acm.2015.0281>
12. Sousa JR, Santos SCM. Análise de conteúdo em pesquisa qualitativa: Modo de pensar e de fazer. *PDE* [Internet]. 2020 [cited 2023 May 30];10(2):1396-416. Available from: <https://doi.org/10.34019/2237-9444.2020.v10.31559>
13. Blumer H. Comment on Lewis The classic American pragmatists as forerunners to symbolic interactionism. *Sociol Q* [Internet]. 1977 [cited 2023 May 30];18(2):285-9. Available from: <http://www.jstor.org/stable/4105989>

14. Utzumi FC, Lacerda MR, Bernardino M, Gomes IM, Aued GK, Sousa SM. Continuidade do cuidado e o Interacionismo Simbólico: Um entendimento possível. *Texto Contexto Enferm* [Internet]. 2018 [cited 2023 May 15];27(2):e4250016. Available from: <https://doi.org/10.1590/0104-070720180004250016>
15. Carvalho VD de, Borges L de O, Rêgo DP do. Interacionismo simbólico: Origens, pressupostos e contribuições aos estudos em Psicologia Social. *Psicol Cienc Prof* [Internet]. 2010 [cited 2023 Apr 10];30(1):146-61. Available from: <https://doi.org/10.1590/S1414-98932010000100011>
16. Secretaria de Estado de Saúde de Minas Gerais; Subsecretaria de Gestão Regional. Ajuste do Plano Diretor de Regionalização de Saúde de Minas Gerais (PDR/MG) [Internet]. Belo Horizonte, MG(BR): SES-MG; 2020 [cited 2021 Jun 1] Available from: <https://www.saude.mg.gov.br/parceiro/regionalizacao-pdr2>
17. Bardin L. Análise de conteúdo. São Paulo, SP(BR): Edições 70; 2011.
18. Deslandes FD, Cruz Neto O, Gomes R, Minayo MCS, organizators. *Pesquisa Social: Teoria, método e criatividade*. 32th ed. Petrópolis, RJ(BR): Vozes; 2020.
19. Lima MM, Silva FJA, Sabedra AP, Sanchotene IJ, Vieira-Souza LM. Acupuntura no esporte. *Rev CPAQV* [Internet]. 2023 [cited 2023 Jun 4];15(1):1-7. Available from: <https://doi.org/10.36692/V15n1-07R>
20. Almeida BSB, Farias MAF, Diniz HLN, Maia AML, Carvalho PPC, Sousa MNA de. Acupuntura na redução dos sinais e sintomas de ansiedade em estudantes: Uma revisão sistemática. *Sci Elec Arch* [Internet]. 2022 [cited 2023 May 19];15(4):69-75. Available from: <https://doi.org/10.36560/15420221528>
21. Carvalho EF, Brito DR, Barroso IMARC, Monteiro MJFSP, Rodrigues VMCP. A utilização da acupuntura no controlo da dor crónica em usuários com síndrome vertebral com irradiação. *Sci Med* [Internet]. 2021 [cited 2023 Jun 4];31(1):e39304. Available from: <https://doi.org/10.15448/1980-6108.2021.1.39304>
22. Martins ES, Costa N, Holanda SM, Castro RCMB, Aquino P de S, Pinheiro AKB. Enfermagem e a prática avançada da acupuntura para alívio da lombalgia gestacional. *Acta Paul Enferm* [Internet]. 2019 [cited 2023 Apr 11];32(5):477-84. Available from: <https://doi.org/10.1590/1982-0194201900067>
23. Liu R, Santana T, Schillinger D, Hecht FM, Chao MT. “It gave me hope” experiences of diverse safety net patients in a group acupuncture intervention for painful diabetic neuropathy. *Health Equity* [Internet]. 2020 [cited 2023 May 14];4(1):225-31. Available from: <https://doi.org/10.1089/heq.2020.0004>
24. Melo GAA, Lira Neto JCG, Martins MG, Pereira FGF, Caetano JA. Benefícios da auriculoacupuntura em profissionais de enfermagem atuantes na COVID-19 à luz da Teoria do Conforto. *Esc Anna Nery* [Internet]. 2020 [cited 2023 Apr 19];24(spe):e20200311. Available from: <https://doi.org/10.1590/2177-9465-EAN-2020-0311>
25. Pereira LF, Rech CR, Morini S. Autonomia e práticas integrativas e complementares: Significados e relações para usuários e profissionais da Atenção Primária à Saúde. *Interface (Botucatu)* [Internet]. 2021 [cited May 14];25:e200079. Available from: <https://doi.org/10.1590/interface.200079>
26. Teixeira MZ, Lin CA. Educação médica em terapêuticas não convencionais. *Rev Med (São Paulo)* [Internet]. 2013 [cited 2023 Jun 4];92(4):224-35. Available from: <https://doi.org/10.11606/issn.1679-9836.v92i4p224-235>
27. Sousa VM. Acupuntura e o tratamento da ansiedade: Revisão Sistemática de Literatura. *Rev Amazônia Science Health* [Internet]. 2021 [cited 2023 Jun 2];9(2):46-59. Available from: <https://doi.org/10.18606/2318-1419/amazonia.sci.health.v9n2>

28. Vega P, Urrutia EM, Aliaga BV, Campos RS. Profundización en la experiencia de profesionales de salud al incorporar terapias complementarias en su práctica clínica. *Enfermería (Montevideo)* [Internet]. 2020 [cited 2023 Jun 4];9(2):191-204. Available from: <https://doi.org/10.22235/ech.v9i2.2316>
29. Silva EDC, Tesser CD. Experiência de pacientes com acupuntura no Sistema Único de Saúde em diferentes ambientes de cuidado e (des)medicalização social. *Cad Saúde Pública* [Internet]. 2013 [cited 2023 Jun 19];29(11):2186-96. Available from: <https://doi.org/10.1590/0102-311x00159612>
30. Paiva LPM, Nunes MMO, Simões LG, Crivelaro AGM, Neves TV. The use of acupuncture in Primary Care in Brazil. *RSD* [Internet]. 2021 [cited 2023 Jun 4];10(13):e528101321363. Available from: <https://doi.org/10.33448/rsd-v10i13.21363>

## **NOTES**

### **ORIGIN OF THE ARTICLE**

Extracted from the dissertation – The meanings of acupuncture from the patient's point of view, presented to the Postgraduate Program in Nursing, Universidade Federal de São João del-Rei, in 2023.

### **CONTRIBUTION OF AUTHORITY**

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### **ACKNOWLEDGMENT**

To the study participants who shared their experiences and stories, trusting the authors to translate them into scientific language.

### **APPROVAL OF ETHICS COMMITTEE IN RESEARCH**

Approved by the Ethics Committee in Research of the Universidade Federal de São João del-Rei – Midwest Campus / Dona Lindu, opinion no. 5.140.326/2021, Certificate of Submission for Ethical Appraisal 51875521.9.0000.5545.

### **CONFLICT OF INTEREST**

There is no conflict of interest.

### **EDITORS**

Associated Editors: Melissa Orlandi Honório Locks, Maria Lígia dos Reis Bellaguarda.

Editor-in-chief: Elisiane Lorenzini.

### **TRANSLATED BY**

Leonardo Parachú.

### **HISTORICAL**

Received: February 21, 2024.

Approved: May 06, 2024.

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