## QUESTIONNAIRE ON THE USE OF COMPLEMENTARY AND ALTERNATIVE MEDICINE BY CANCER PATIENTS IN NIGERIA

This questionnaire is designed to find out to what degree cancer patients in our hospital employ alternative and complementary remedies in the treatment of their cancer. It is only a research work. The answers you give to the questions here will in no way influence how we are going to treat you as an individual. The findings of this research will help us to understand our cancer patients better and therefore help us to improve the care that we render to them. We implore you to give us as honest an answer to each question as possible. You may choose not to respond to any of the questions you are not comfortable with. We guarantee you confidentiality.

		CASE	NOTE NO:_	
<b>DEMOGRAP</b>	HIC DATA			
1. Age:			2. Sex: Ma	ıle Female
3. Marital statu	s: (A) Married		(B) Not mar	ried
	(C) Widow		(D) Divorce	d/Separated
4. Highest leve (A) Nor	l of education attain (B) P	ed: Primary	(C) Post prin	nary/Secondary
(D) Uni	versity/Polytechnic/	College of educ	ation	
5. Profession/O	occupation:			
	s than N10,000.00/r		(B) Less th	an N50,000.00/month
(C) Mor	re than N50, 000.00	/month		
7. Religion:	(A) Traditional relig	gion (B) C	atholic	(C) Pentecostal
(	(D) Anglican	(E) Moslem	(F) (	Others (specify)

8. If you are to rate your self, how religious would you say you are?  (A) Extremely religious	
(B) Very religious	
(C) Religious	
(D) Not really religious	
(E) No religious ideas	
CONVENTIONAL CANCER TREATMENT	
9. Type of cancer?(Plse confirm from case note)	
10. Stage of cancer?( Plse confirm from case note)	
11. How long have you had this disease?	
12. How long have you been on treatment for this disease?	
13. What types of treatment have you received in the past for this cancer?  (A) Drugs for cancer	
(B) Surgery (specify)	
(C) Radiotherapy	
(D) Others (specify)	
14. What type of treatment are you currently receiving for this disease?	
COMPLEMENTARY AND ALTERNATIVE MEDICNE (CAM) USE  15. Have you used any thing other than that given to you by a medical doctor	
to treat this cancer.	

(B) No

(A) Yes

16. Below is a list of CAM people have used to treat cancer. We will like to know which ones you have used in the past, which ones you have used since this cancer started and which ones you think you may use in future. You should mark all that applies to you for each CAM

**Biological Products:** 

Biological Products:			
	Used in	<u>Used since</u> this cancer	Hope to
	the past	uns cancer	<u>use</u>
Herbal drugs			
High dose/ mega vitamins			
Forever Living Product			
Tuja 1000			
Alo vera			
GNLD product			
Nutri water			
Medicinal tea			
Green tea			
Kosagog tea			
Special diet/ nutritional therapies & supplements			
Mineral Treatment			

## SPIRITUAL THERAPY/MIND-BODY SYSTEMS

	Used in the past	Used since this cancer	Hope to use
Faith healing/ prayer house healing			
Divination/ Incantations			
Meditation			
Visualization/ Vision			
Hypnosis			
Psychic Therapy			
Mind-body Technique			
Mental Imagery			
ALTERNATIVE S	<u>YSTEMS</u>		
CI.	Used in the past	<u>Used since</u> <u>this cancer</u>	Hope to use
Chinese Medicine			
Indian Medicine			
Acupuncture			
Homeopathy			

PHYSICAL THE	Used in the past	Used since this cancer	Hope to use
Chiropractic			
Osteopathy/ Bone setters			
Massage			
Manual healing (therapeutic Touch)			
ENERGY THERA Bioelectro- magnetics	<u></u>		
Oxygen/ozone Treatment			
OTHERS Blood letting Couping			
Local surgery/ Scarification			
Ritual Sacrifice			
Urine therapy			
Folk remedies (specify)			
Black stone			
Shark cartilage			
Python fat			
Animal extracts			

17.	Are there other types of CAM not listed above which you have used?  (A) Yes (specify) (B) No
18.	If you have used any CAM in this cancer, for how long have you used it?
19.	How frequently have you been using CAM in this cancer? (A) Daily (B) weekly
	(C) Occasionally (D) Only once
	Which of the following sentences explains how you have been using the CAM and ventional treatment?
	(A). You started conventional treatment only when you stopped CAM
	(B) You started CAM only when you finished conventional treatment
	(C) You were using CAM during the same period as you were using conventional
	treatment so that both will work to help each other
21.	How do you hope to use your CAM and the orthodox treatment as your treatment progresses?  (A) Use the two to help each other
	(B) Use the CAM instead of the orthodox medicine
	(C) Use orthodox medicine instead of CAM
	How frequently have you visited a CAM practitioner since you were diagnosed to e cancer? (A) Non (B) Once (D) Several times
23.	What are your reasons for deciding to use CAM (you can choose more than one)
	(A). You were disappointed that conventional treatment is not working
	(B). Conventional treatment is too toxic or too mutilating
	(C). You think CAM is more in keeping with your beliefs and your inner self

(D). you want to take control of your treatment and your faith in your own hands
(E). Conventional treatment is too mechanistic/technological and lacks human
touch
(F) You are just trying every thing that can help
(G) Others (specify plse)
24. What benefits were you hoping to get from the CAM you used in this cancer? (you can choose more than one)  (A) It will directly treat/cure your cancer
(B) It will boost your body's ability to fight the cancer
(C) It will allow you to relax/sleep
(D) It will clean up your wounds
(E) It will relieve symptoms of conventional treatment which you are receiving
(F) It will relieve the symptoms of the cancer
(G) It will improve your psychological/emotional well being (hope, optimism)
(H) to do every thing possible to fight the cancer
(I) It will improve your physical well being
(J) Others (specify)
(b) Statets (speedly)
25. Have you obtained any particular benefit from the CAM you used?  (A) Yes (specify)
26. Did you experience any unwanted effect from the CAM you used in this cancer?  (A) Yes (specify)(B) No
27. How satisfied are you with the performance of the CAM you used in this cancer?  (A) Very satisfied (B) Satisfied (C) Disappointed
28. Would you use CAM again for cancer or recommend it for someone with cancer? (A) Yes (B) No

29. Have you had to abance CAM?.	don conventional treatmen	at for CAM since you started using
(A) Yes	(B) NO	
started CAM?		ox treatment for CAM since you
31. Did you mention to th have used/are using CAM		your cancer management that you (B) No
		re using CAM, what is it that makes
•		
more than one)	know of the CAM you are	e using/have used (you can choose
(B) From health po	ersonnel in the hospital	
(C) From Friends		
(D) From family n	nembers	
(E) From CAM pr	actitioner	
(F) From Mass me	edia (TV, newspaper, radio	o, magazines)
(G) From your chu	urch/religious group	
(H) From Migrant	advertisers	
(I) From other pat		
•	7)	
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34. How do you get your supply of CAM?  (A) From friends
(B) From relations
(C) From CAM practitioner
(D) You buy from the market
(E) From your church
(F) Others (specify)
35. How much do you estimate that you have spent on CAM in the last one year?  36. What particular aspects of your CAM would you have wished is available in orthodox medicine?