

## ONCOLOGY ACUPUNCTURE: TRADITIONAL MEDICINE IN A BUSY NHS CANCER CENTRE

by **Mandy Brass**, Lead Acupuncturist at Dimbleby Cancer Care, Guy's Hospital, London

### INTRODUCTION

As an acupuncturist with over twenty-five years' experience, I've worked with all kinds of patients, but my experience of working with cancer patients has been the most rewarding. Over the years, I've had the privilege of supporting patients through all stages of their cancer journey, from diagnosis to treatment, recovery, survivorship and sometimes palliative care. Cancer treatments and recovery can be physically and emotionally challenging. Acupuncture becomes an invaluable tool to manage these symptoms and improve well-being and it gives me huge satisfaction to be part of the healing process. Using the words of one of my patients:

*"It's given me a focus and a way in to healing."*

### THE ROLE OF ACUPUNCTURE IN CANCER CARE

Conventional medicine excels at targeting cancer through surgery, chemotherapy, radiotherapy and more recently, immunotherapy, targeted therapy and endocrine therapy. However, these treatments often come with significant side effects, such as pain, peripheral neuropathy, fatigue, brain fog, hot flushes and night sweats, nausea, anxiety, insomnia and dry mouth. This is where acupuncture excels. There is a growing body of evidence that acupuncture, a component of Traditional Chinese Medicine, alleviates many of these symptoms, and is being increasingly integrated into mainstream healthcare providers such as the NHS. Patients are more likely to complete treatment, with fewer side-effects and better quality of life.

*"I have found the acupuncture treatments have played a vital role during my chemotherapy and have greatly improved how my body and mind have coped during those times."*

Acupuncture can aid recovery beyond alleviating physical symptoms. The shock of diagnosis, the physical toll of treatment and the fear of recurrence all contribute to an increased emotional burden. Acupuncture works by balancing the body's energy, or 'qi'. When there is a disruption in qi, it can manifest either physically or emotionally as stress, anxiety, or depression. By inserting fine needles into specific points on the body, acupuncture stimulates the body's natural

healing mechanisms. It allows patients to view their symptoms as an imbalance and to re-engage with their own healing. It is, after all, their body that is responding to the needles, and improving symptoms. This process can be a catalyst for change and for restoring positivity, in mind, body and spirit. One of the most fulfilling aspects of my work is being able to offer my patients not just a treatment for their physical symptoms but also a sense of peace, calm, and emotional relief.

*"It has been valuable to have a different perspective on my treatment and recovery."*

The benefits of an integrated setting  
From the patients' perspective, they are often interested in accessing acupuncture but are nervous about sourcing a practitioner who may not understand their cancer journey or their specific needs for precautions during treatment. Working in an integrated NHS cancer centre provides the patient with confidence and trust that their treatment will be safe, effective and individualised in the context of their cancer journey. As an acupuncturist, I collaborate with complementary therapists, oncologists, nurses and other healthcare professionals. This teamwork ensures patients receive the best of integrative medicine and a truly holistic experience.

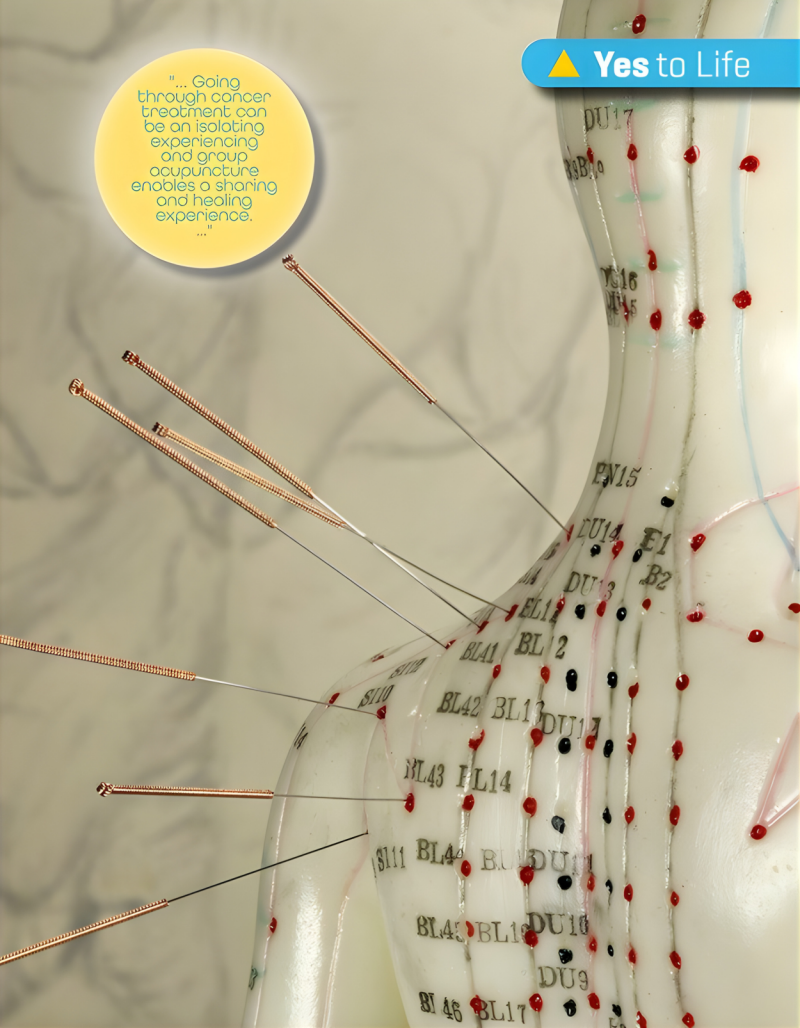
*"Being able to speak to someone who works with people with cancer all the time was really helpful."*

### BUILDING A TRUSTING RELATIONSHIP

Building trust is crucial to my work as an acupuncturist. Cancer patients are often facing one of the most difficult experiences of their lives, and they want to feel heard and understood. Many patients are often referred to my clinics, rather than choosing acupuncture, and are understandably sceptical about its potential to help. My approach is to listen and to truly hear their concerns, symptoms, and emotional struggles. From there, I work collaboratively with them, explaining how acupuncture can complement their medical treatment and support their overall healing process. I also offer lifestyle advice such as breathing techniques and have recorded acupressure sequences for patients to continue their treatments at home. I am always delighted when a patient tells me they are amazed by the results, because they really didn't think it was going to work!

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"... Going through cancer treatment can be an isolating experience and group acupuncture enables a sharing and healing experience."  
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*"Having someone who really listened to my concerns and treated me holistically, asking me questions about my whole well-being. I have found the whole process extremely therapeutic and helpful."*

### THE BENEFITS OF GROUP ACUPUNCTURE

Several years ago, I visited China to observe and learn about acupuncture in their hospitals. There, each patient is assessed and treated with a combination of acupuncture and Chinese herbal medicine alongside conventional medicine's diagnostic and treatment options. All treatments were in a group setting and the community spirit and positivity were palpable. It was inspiring to observe. I already ran a group clinic in my NHS acupuncture service and was determined to try and increase provision. Following completion of my research showing the effectiveness of group acupuncture, I have now opened a second group acupuncture clinic in our community hospital in Sidcup, Kent. Going through cancer treatment can be an isolating experiencing and group acupuncture enables a sharing and healing experience.

*"We were all in it together in a way."*

### CONCLUSION

Working with cancer patients as an acupuncturist has been one of the most rewarding experiences of my career. It's not just about treating symptoms, but about helping people feel seen, heard, and supported during a profoundly difficult time. By addressing

both the physical and emotional aspects of cancer care, acupuncture can improve quality of life, reduce symptoms, and promote healing. The resilience of the patients I work with continues to inspire me, and I am grateful to be a part of their journey.

Listen to Mandy on the Yes to Life Show [here](#).

*"Being listened to and an understanding that although cancer treatment has finished, I am still recovering."*



**Mandy Brass** is a fully qualified acupuncturist with 24 years' experience. As well as being the lead acupuncturist for Dimpleby Cancer Care, she works from her private clinic in North West London. She specialises in oncology acupuncture, treating the side-effects of cancer and cancer treatments. She is a member of the British Acupuncture Council, the British Society of Integrative Oncology and the Research Council for Complementary Medicine.

She also has an interest in research in integrative oncology, having recently completed an MSc in research.

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## PEOPLE WITH CANCER NEED CURING AND HEALING

by **Professor Paul Dieppe**

**B**efore turning my academic attention to caring and healing, I was a rheumatologist. I suspect that there are many similarities between rheumatology and oncology, apart that is from the fact that arthritic diseases are rarely fatal. Both specialities deal with chronic diseases that we can often suppress, and occasionally cure. These diseases cause a lot of pain and distress to the whole person, in addition to whatever damage that may occur in specific joints or organs. And, as with cancer, rheumatologists have witnessed huge improvements in the treatment

options available over the last few decades. When I was a trainee my mentor told me that I was doing well, but that I needed to learn how to do fewer investigations, dish out fewer drugs, and just 'be there' for my patients [Dieppe 2024]. I thought those remarks foolish at the time, but I eventually learnt his lesson. At the end of one of the last outpatient clinics I did before retirement, I realised that I had not ordered any investigations or prescribed any medications for any of the patients I had seen. We all need to learn to 'just be there' for our patients,

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to care for them, and through that caring to facilitate healing. We never really 'cure' the diseases we see. We may cut them out (as with a hip replacement or an excised tumour), and drugs may suppress the pathological processes to little or nothing, but the damage to the whole person remains. Whatever the outcome, they are profoundly changed by their experiences. The main metaphor used for both cancer and arthritis management at present is that of 'war'. You [the patient] are in a battle against the disease, you must fight it, and the medical profession can help you win the war by prescribing drugs. But we never truly win those wars – unless we can help our patients heal. And trying to fight them, in the false belief that the war can be won is often counterproductive.

### CARING AND HEALING

Caring and healing are difficult to define. Caring for another sick person has been described as 'moderated love' [Campbell], and involves a number of specific behaviours that have been documented by several authors [Dieppe et al, Churchill and Schenk]. Quite a lot of writing about caring for sick people can be found in the nursing literature [Watson]; but there is very little about it in medical books or journals. Healing is about transformational changes for the better, allowing a person to flourish for the benefit of both themselves and those around them [Dieppe 2024]. Such transformational changes sometimes result in the disappearance of disease: a 'cure'. More commonly they result in lessening of disease activity and improvements in quality of life. Many self-identifying healers are working amongst us, but they are mostly dismissed as charlatans by the medical profession. We (contemporary doctors) have become totally seduced by our materialistic science, and tend to reject other approaches to health care. In my view that is a terrible, arrogant mistake on our part. In addition to using our modern technical skills, we also need, as my mentor said, to learn to just 'be there' for our patients: to care deeply for them, and to help them to heal. And I think oncologists need caring and healing skills even more than rheumatologists, as cancer always brings with it a threat to mortality that is rarely the case with arthritis. So, I believe that compassionate caring should be a central part of oncology practice, as set out in the 'Yes to Life' Charter [Ref].

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- Watson J. 2008. 'Nursing: the philosophy and science of Caring'. University of Colorado Press.
- Yes to Life Charter. Read about the Charter here, where you will also find links to the full downloadable Charter and a petition to support it

**Professor Paul Dieppe** BSc MD BS(Lond) FRCP FFPH – Emeritus Professor of Health and Wellbeing, University of Exeter Medical School, Emeritus Senior Investigator of the National Institute for Health Research (NIHR) UK, Honorary Professor of Health Services Research, University of Bristol  
Having treated hundreds of patients during his 40-year career as a rheumatologist, Dr. Dieppe is now exploring questions about individuals' healing experiences and the optimal conditions for healing (in contrast to curing). His Institute Scholar project aims to gain a better understanding of healing and to develop new theories that address what works, for whom, and in what circumstances.

The **Yes to Life**  
**CHARTER for ONCOLOGY**  
*Love as the guiding principle for cancer care*



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