

Aromatherapy Clinical Effectiveness Evidence Map

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This Map is part of the Evidence Maps on the clinical application of Medicine Traditional, Complementary, and Integrative (MTCI) integrating the Brazilian National Policy on Integrative and Complementary Practices (PNPIC). This is a product of the Cooperation Project amongst BIREME/PAHO/WHO, the Brazilian Ministry of Health, and the Brazilian Academic Consortium for Integrative Health (CABSIn). The databases VHL, PUBMED, EMBASE and CINAHL were searched. 73 review studies were selected and included in the Map (33 systematic with meta-analysis, 1 systematic review of randomized controlled studies, 35 systematic reviews and 4 meta-analyses). The group of researchers used the methodological quality assessment AMSTAR 2 (1) to classify the studies. The studies were classified by level of confidence for the reported results: High (n = 07), Moderate (n = 06), Low (n = 10) and Critically Low (n = 06). = 50). The group of researchers in the field of Aromatherapy evaluated, characterized, and categorized all studies. The studies included in the Aromatherapy Map gather evidence for interventions with essential oils (49 essential oils), vegetable oils (06 fatty vegetable oils), mixtures (66 synergies) and 01 hydrosol, using five forms of application: bath, inhalation, ingestion, massage, in management or topic. Each intervention was related to 55 health outcomes classified into 7 groups: Pain; Metabolic and Physiological Indicators; Noncommunicable Diseases; Well-Being, Vitality and Quality of Life; Mental health; Infectious Diseases; and Reproductive Health totaling 420 associations. The group of researchers included effects for each intervention/outcome reported, as positive, potentially positive, no effect, inconclusive effect, noting that there were no negative and potentially negative effects. Lavender (Lavandula angustifolia Mill.) was the most researched essential oil. Rose oil (Rosa damascene Mill.) was the second most researched essential oil. Regarding the country in focus, which indicates where the primary studies included in the reviews were conducted, 38 countries appear indicated in most of the 73 studies included in the Map. The researchers consider advertising that adequate training is important for a professional to work with clinical applications of Aromatherapy in humans. Noteworthy most authors' 73 reviews included concluded their heterogeneity in the Aromatherapy clinical trials, interfering with systematizing systematic reviews and meta-analyses (2, 3).

1. Shea et al., BMC Medical Research Methodology, 2007, 7, 1-7.

2. Website: https://mtci.bvsalud.org/pt/mapa-de-evidencias-efetividade-clinica-da-aromaterapia/3. Wolffenbutteletal.Informeexecutivo,2022[https://docs.bvsalud.org/biblioref/2023/04/1410881/aromaterapia_informe_pt_25abr23.pdf]

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