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The effectiveness of Melissa officinalis L. essential oil inhalation on anxiety and symptom burden of hemodialysis patients: a randomized trial study

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Abstract

Background Hemodialysis patients suffer from physical and mental symptoms for which aromatherapy might be useful. This study aimed to determine the effectiveness of Melissa officinalis L. (Lemon Balm) essential oil inhalation on anxiety and the burden of symptoms in hemodialysis patients.

Methods This study is a randomized clinical trial with a pretest-posttest design. Sixty-eight hemodialysis patients were randomly divided into intervention (who underwent Melissa officinalis L. inhalation aromatherapy 3 times a week for one month) and control (who inhaled refined sweet almond oil) groups. The intervention in both groups was conducted during the hemodialysis session. The data were collected using the state-trait anxiety inventory and Dialysis Symptom Index. Data were analyzed through SPSS-25, using Mann-Whitney, Wilcoxon, t-tests and MANOVA.

Results Before the intervention, both groups were similar in terms of anxiety and symptoms burden (P > 0.05). However, after the intervention, a significant difference was found between the groups in terms of state and trait anxiety, and severity of constipation, nausea, vomit, diarrhea, swelling in legs, muscle cramps and shortness, worry, nervousness and anxiety, and trouble staying asleep. Moreover, after the intervention, a significant difference was observed between the groups regarding the prevalence of symptoms burden such as feeling anxious and having a dry mouth (P < 0.05).

Conclusion Melissa officinalis L. essential oil inhalation aromatherapy reduced the symptoms burden and anxiety in hemodialysis patients. Given the effectiveness of aromatherapy in hemodialysis patients, it is suggested that healthcare workers should use this complementary and integrative health to reduce the anxiety and symptoms burden in hemodialysis patients.

Trial registration RCT registry Iranian Registry of Clinical Trials (IRCT) number: IRCT20191021045178N3; Registration date 27/04/2021.

Keywords Aromatherapy, Melissa officinalis L., Anxiety, Symptom burden, Hemodialysis



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professor of Traditional Pharmacy who is a member of the Medicinal Plants Processing Research Center was a member of this research team. The product was prepared by an aromatherapy specialist who was familiar with Melissa officinalis L. and the extraction method in a reliable pharmaceutical company. To ensure the product safety the research assistant was present with the patients throughout the intervention and was ready to answer their phone calls about possible side effects. Given the challenges and findings of this study, using Melissa officinalis L. (Lemon Balm) might be effective in a hemodialysis setting as an implication of this study.

The research limitations included the short duration of the study (20 min in each time), patients' visits in three separate four-hour cycles per day, fear and anxiety of the patients and the researcher about the COVID-19 pandemic, and quick and correct removal of cotton impregnated with essential oil to prevent the spread of aroma in the place after the intervention. Filling out the forms by the researcher's assistant might cause bias. Therefore, it is suggested that in another study illiterate patients should be excluded from the study to reduce the risk of researcher bias.

The results of the present study showed that sweet almond oil reduced trait anxiety. To compare its effect on trait anxiety, it is suggested that three groups of almond oil, Melissa officinalis L. (Lemon Balm), and water inhalation aromatherapy should be compared in another study to determine the effect size of each aromatherapy.

Conclusion

The present study demonstrated that Melissa officinalis L. essential oil inhalation aromatherapy decreased the symptoms burden and anxiety in hemodialysis patients. Melissa officinalis L. essential oil inhalation aromatherapy reduced the severity of constipation, nausea, vomiting, diarrhea, swelling in legs, muscle shortness, worrying, and trouble staying asleep. Moreover, this intervention reduced the prevalence of feeling anxious and dry mouth. Thus, it is suggested that healthcare workers should use this intervention. As to evidence-based practice, it is recommended that more studies should evaluate the effect of Melissa officinalis L. aromatherapy on symptoms in ESRD patients undergoing hemodialysis.

Acknowledgements

The present study was extracted from a master's thesis by Mansoureh Aghababaei at School of Nursing and Midwifery, Shiraz University of Medical Sciences, Iran (Code: 20701). We are deeply grateful to those patients who actively participated in the study, as well as the respected colleagues of the Hemodialysis Department of Imam Reza Clinic and Nemazi Hospital and all individuals who helped us conduct this study. The authors would like to thank Shiraz University of Medical Sciences, Shiraz, Iran and Center for Development of Clinical Research of Nemazee Hospital and Dr. Nasrin Shokrpour for English editorial assistance.

Author contributions

MR, NP, MA and MMZ wrote the main manuscript text. The management of the data analysis was conducted by MR, NP, and MA. MMZ prepared Fig. 2. All authors reviewed and approved the manuscript.

Funding

The study was funded by Vice-chancellor for Research and Technology of Shiraz University of Medical Sciences (Code: 20701).

Data availability

The datasets of this study is available from the first author on reasonable request.

Declarations

Ethics approval and consent to participate

The present study was approved by the Ethics Committee of Shiraz University of Medical Sciences (Code: IR.SUMS.REC.1400.065). The study was performed following the Declaration of Helsinki. All hemodialysis patients signed an informed consent form. The research participants were aware of the research objectives and method, confidentiality of information, side effects of the essential oil, and the right to withdraw from the study; they were assured that there would be no change in their treatment and care. Written and informed consent was obtained from all participants.

Consent for publication

Not applicable.

Competing interests

The authors declare no competing interests.

Received: 30 April 2024 / Accepted: 27 February 2025 Published online: 13 March 2025

References

- Juraschek SP, Appel LJ. Chronic kidney disease: intensive blood pressure reduction lowers mortality in CKD. Nat Rev Nephrol. 2018;14(1):5.
- Ordunez P, Nieto FJ, Martinez R, Soliz P, Giraldo GP, Mott SA, et al. Chronic kidney disease mortality trends in selected central American countries, 1997–2013: clues to an epidemic of chronic interstitial nephritis of agricultural communities. J Epidemiol Community Health. 2018;72(4):6–280.
- Hill NR, Fatoba ST, Oke JL, Hirst JA, O'Callaghan CA, Lasserson DS, et al. Global prevalence of chronic kidney disease-a systematic review and meta-analysis. PLoS ONE. 2016;11(7):e0158765.
- Johansen KL, Chertow GM, Foley RN, Gilbertson DT, Herzog CA, Ishani A, et al. US renal data system 2020 annual data report: epidemiology of kidney disease in the united States. Am J Kidney Dis. 2021;77(4):A7–8.
- Sepanlou SG, Barahimi H, Najafi I, Kamangar F, Poustchi H, Shakeri R, et al. Prevalence and determinants of chronic kidney disease in the Northeast of Iran: results of the Golestan cohort study. PLoS ONE. 2017;12(5):e0176540.
- Bouya S, Balouchi A, Rafiemanesh H, Hesaraki M. Prevalence of chronic kidney disease in Iranian general population: A Meta-Analysis and systematic review. Therapeutic Apheresis Dialysis. 2018;22(6):594–9.
- Guan Y, He Y-x. Effect of advanced care on psychological condition in patients with chronic renal failure undergoing hemodialysis: A protocol of a systematic review. Medicine. 2019;98(10):14738.
- Raja SM, Seyoum Y. Intradialytic complications among patients on twiceweekly maintenance Hemodialysis: an experience from a Hemodialysis center in Eritrea. BMC Nephrol. 2020;21:1–6.
- Senanayake S, Gunawardena N, Palihawadana P, Bandara P, Haniffa R, Karunarathna R, et al. Symptom burden in chronic kidney disease; a population-based cross-sectional study. BMC Nephrol. 2017;18(1):228.
- Rambod M, Pourali-Mohammadi N, Pasyar N, Rafii F, Sharif F. The effect of Benson's relaxation technique on the quality of sleep of Iranian Hemodialysis patients: a randomized trial. Complement Ther Med. 2013;21(6):577–84.
- Kuo P-Y, Saran R, Argentina M, Heung M, Bragg-Gresham J, Krein S, et al. Cramping, crashing, cannulating, and clotting: a qualitative study of patients' definitions of a bad run on Hemodialysis. BMC Nephrol. 2020;21(1):1–10.