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The body's dignity in integrative understanding of health in IBD – a hermeneutic approach to holistic care

Abstract

Background and purpose: This article will convey a new understanding of health and disease as a coherent dimension where the whole body interacts with its natural environment. This understanding is linked to a theoretical framework and illustrated by reference to research with patient experiences with inflammatory bowel disease (IBD), with the disorders Crohn's disease and ulcerative colitis. Creating ecological sustainability towards a greener health service where the body has a higher intrinsic value is a growing concern.

Material and methods: The methodological approach is hermeneutic, whereby the results of one's own research are interpreted and reconceived through reflection towards a new understanding. Themes from patients' experiences are interpreted in light of the theoretical frame of reference of this article in order to achieve a new understanding.

Results: The further interpretation of the state-of-the-art article and empirical articles resulted in the following themes: 1. The lived body is understood as a coherent whole and a place of inner freedom. 2. The body in a lowered state of stress helps the patient to experience dignity and vitality. 3. An integrative understanding of health in terms of IBD brings dignity and wholeness to the body.

Conclusion: This article sheds light on the connections between body knowledge, nutrition, dignity, and integrative understanding of health in acute and chronic IBD. In clinical practice, the connections may happen when giving the patient the opportunity for recovery by learning to listen to the body. Dignity is linked to both coping and expert help from clinically competent health professionals.

Keywords:

human body, dignity, inflammatory bowel disease, integrative healthcare, patient experiences, hermeneutics

1. Introduction

Current medical science has made great progress in the treatment of Inflammatory Bowel Disease (IBD) with antibiotics, pain, and fever inhibitive, anti-inflammatory, and biological medicines, all of which aid in bringing the patient out of an acute illness situation.

Nevertheless, we now see that more chronic symptoms persist, and masking of acute relapse is established. We run the risk of controlling illness with external agents rather than establishing health as a balance between the body's inner and outer environment [1,2]. A change in course entails listening to important experience expressed by the patient group themselves and actively keeping these experiences in mind when choosing future treatment options. Attending gastroenterologists, IBD nurses, nutritionists, physical therapists and general practitioners are the healthcare professionals closest to the patient and who are responsible for providing worthy care for the patient.

The theoretical framework - the dignity of the body in an integrative understanding of health

The theoretical frame of reference is linked with dignity, the body, health as a whole and integrative healthcare treatment. A person's dignity, comprising both absolute and relative dignity, is caring science's most basic value. Absolute dignity is a matter of inviolability and respect for the people's opportunity to shape their own lives and being [3,4]. Relative dignity reflects the absolute dignity and is more connected to the psychological and bodily dimension [5]. Relative dignity is shaped by culture and society and the norms and rules that prevail within the culture. An inner freedom to make one's own choices and the right to protect oneself against external harm are aspects of dignity. Persons living with IBD are often experiencing an ongoing loss of personal dignity, and experiencing bodily decline can be a threat towards self-respect and the sense of dignity. Dignity of identity is concerned with the integrity of the subject's body and mind, and the universal human dignity pertains to all human beings. The universal dignity cannot be taken away from any person [3,5].

The goal of the future should be to ensure a development that respects the value of personal dignity, vulnerability and ecological sustainability [6,7]. By ensuring that healthcare

personnel meet the patient with confirmatory communication and an attitude of appreciation, the patient will perceive dignity and respect. It takes time to be able to cope with one's suffering. In recent thinking, dignity is associated with pride, self-esteem and self-worth [8]. The health personnel's task is to realize the patient's potential and safeguard the patient's dignity [9,10].

French phenomenologist and existential philosopher Maurice Merleau-Ponty [11,12] claims that we experience the world and other people through our bodies. Hence, the body is an existential basic prerequisite, i.e. common to all humans. Our body can be neither selected nor rejected, and the living body is a basic prerequisite for experience to occur. Through body language, people can express themselves and speak to others around them. The lived body is understood as a coherent whole and a place of inner freedom [11,12]. The body is in constant interaction with nature and our surrounding environment. A holistic understanding of health is based on Gadamer's philosophy as found in his book *The Enigma of Health* [1]. Gadamer developed a conception of what lies at the core of health and what basic prerequisites or processes are at work and lead to understanding, coping and perception of the connection with recovery. Every person has experienced expectations. When living with a daily focus on illness, all patients wish to escape this and recover. With an understanding of how health is created, recovery can be enabled through knowledge of one's own limits of tolerance and the establishment of bodily knowledge [13] (NB! Reference is inserted after acceptance of the article). Life force, a concept often used synonymously with vitality, is understood as being at the core of human health [14]. The goal is to alleviate suffering, regain health and again feel one's own vitality.

In nursing and in medical science, a nascent view of the patient as a whole and a systemic perspective on life in general is beginning to be adopted [6,15]. The systemic perspective on life entails an acknowledgement that health is a subjective experience that occurs over time. Health is a state of well-being that emerges when the organism functions optimally [4,6,16]. This means a state of well-being that is due to a balance which includes the physical and mental aspects of the organism, as well as interaction with the natural and social environment. Both "integrative nursing" and "integrative medicine" have been established as new scientific disciplines, entailing a desire on the part of both organizations and individuals to change the existing medical health system [17,18]. At the same time, we are now witnessing a

renaissance of interest in sustainable development in agriculture and local communities, and a connection between healthy soil, healthy individuals, and healthy communities [6].

Integrative health care is a common concept for established health services, in which research includes complementary and alternative medicine (CAM), and patients share their experience in terms of the help they have received [19,20]. Integrative health care, in this article, encompasses caregiving, nursing and treatment as fundamental elements of recovery. These include the use of nutrition, physical activity up to the limits of tolerance, the use of Western medicine (allopathy), and the use of natural medicine. It includes herbal medicine, homeopathy, deriving from German medical tradition and acupuncture from Chinese medical tradition. Health science has shed light on the use of complementary methods and helped to develop concepts and research in the field [17,21,22,23,24].

The purpose of this article is to shed light on the relationship between dignity, integrative health care and the whole-and-part perspective, and to shed light on the complementary interaction in the further development of health services. This research is a contribution seeking new valid understanding to a knowledge gap we have seen through empirical individual studies in caring for patients with IBD. This article will introduce abstraction of the language, which provides the opportunity for more long-term recovery. This abstraction is done with the help of reinterpretation of research through a circular hermeneutic understanding process.

2. Methods

The methodological approach is hermeneutic, whereby the results of one's own research are interpreted and reconceived through reflection towards a new understanding [25,26]. Patients' experience is interpreted in light of the theoretical frame of reference of this article in order to achieve new understanding. People with IBD exhibit a special vulnerability to stress. Stress resilience is a matter of handling stress in a positive manner through coping and enhanced self-esteem. Acquiring a new understanding is to establish greater confidence in one's own self-worth. This requires recognition from health care professionals in direct communication with patients. When patients gain confidence, they will reveal what helps them to maintain and reinforce their health and dignity [3,4,5]. It is important that both parties be open about their pre-understanding so that a common understanding can be achieved in the

relationship. An open attitude between the patient and the therapist is required to create a common understanding.

Gadamer [25] uses the concept of fusion in the thesis that all understanding is interpretation. Fusion is used as a metaphor for new understanding, where fusion is about merging horizons between pre-understanding and understanding leading to new understanding. This means that different viewpoints become relevant through understanding health as an integral whole. The objective is a broader and more complex, multi-faceted understanding. Because horizons are open, the fusion can continue to develop [27,28].

To achieve this multi-faceted understanding, two interpretations are shown. One of these interpretations is that medicines tested on a large number of patients show documented efficacy. On the other hand, homeopathic medications are effective if they affect the individual symptom scenario. These are two different perspectives for understanding. The first perspective assumes that one can measure individual effect on a defined symptom such as physical pain. The second position is to administer a medicine that targets several symptoms of the pain that the patient has, and the patient corroborates improvement. When choosing the approach to the pain, it is a matter of listening to what the patient herself/himself is considering and wants. The new understanding creates a more open horizon in that it includes the patient's own participation in making his/her own choice. The objective is to use fewer medical interventions to achieve a more long-term improvement. Table 1 demonstrates the pre-understanding that it is possible to create health by strengthening resistance through integrative health care.

Fusion of horizons is a matter of joint contemplation whereby the parties move beyond reflection. It is about what, why and how, and wherein an understanding or explanation may lie in why. The relationship between explanation and understanding is not a polarity, but instead a place where interaction takes place. The bridge between explanation and understanding is the hermeneutical arch, with the arch being anchored in the soil like the roots of a tree [25,26]. To use the simile, a tree and its roots, underscores the concept of seeing life as dependent on nature around us. It is about seeing oneself in an interplay with the tree in its natural surroundings. Both nursing and medicine have their historical roots. Medicine has its historical roots in the Hippocratic oath, which teaches that physician is not to harm the patient's body. History depicts a genealogical tree from which medicine takes different

directions or branches out in terms of treatment choices. In recent times, a chemical branch has developed and many of these medicines are life-saving in an acute phase of disease. These are the medicines that nurses are trained to observe the effects of as well as any side effects. Homoeopathic medicines, on the other hand, are not chemical medicines. These are from plants, minerals and from organisms, where an extract from one of these is affected by the use of physical energy to increase potency and efficiency in the medicine. This agent is administered only if the symptom scenario is adapted for the individual patient. This requires understanding for further development of a new, integrative knowledge base in health science.

2.1. Material for further interpretation

This project is a further development with an interpretation of the results/themes from one's own research that are in turn regarded as pre-understandings. The results of the articles are interpreted in light of the theoretical frame of reference of *this* article and recent, relevant research.

The first study was a qualitative literature analysis of 28 scientific articles in 2011 that resulted in two themes (1 and 2 below). An empirical study was then conducted with interviews of thirteen people with IBD; the interviews were interpreted according to Brinkmann and Kvale's [29] qualitative steps: Self-understanding, critical understanding and theoretical understanding. Analysis and interpretation of the interviews resulted in the next five themes in the articles from 2015 and 2017 (3-7 below) (NB! References are inserted after the article is accepted):

- Theme 1: Intestinal immunology between stress and the treatment of advanced gastrointestinal disease [30]
- Theme 2: Nutrition and diet advice for IBD [30]
- Theme 3: Familiarity with symptoms of illness as a source of recovery [13]
- Theme 4: Recovery through nutrition in various stages of IBD [13]
- Theme 5: Understanding of bodily limits of tolerance [13]
- Theme 6: Re-establishing balance is to create a new equilibrium [24]
- Theme 7: Creating resilience through integrative health treatment [24]

2.2. Seeing connections towards a new understanding

Understanding by seeing relationships is to understand something new, or to understand something in a new way. We understand the whole from the parts and the parts from the whole. Bodily limits of tolerance in theme 5 [13] are established over time through experience with food that is eaten in terms of what the body can tolerate and cannot tolerate, but instead leads to reactions. Bodily limits of tolerance are now associated with a reflection around the gut 's ability to break down and metabolize the food and its importance in nourishing the body. New understanding is associated with the study findings in what food that the body is able to break down and metabolize better, symptoms abate and the body provides us with basic perceptions of improvement. These are possible interpreted knowledge options that apply to IBD. In theme 7 [24], the informants refer to experiential knowledge in integrative health care. This is illustrated by interpretation of recent research towards new understanding. This may lead to further research in the field. There are five themes from the articles that have been subject to new interpretation: 1, 3, 5, 6, 7. Themes 2 and 4 require more specific knowledge pertaining to nutrition and IBD and are therefore not taken into account in the further interpretation. The new interpretation resulted in three themes. The interpretation process from pre-understanding to new understanding is illustrated in the following table:

Pre-understanding	Understanding	New understanding
To create health through health care by means of integrative health care, theme 7	Drugs for medical treatment of IBD have been developed through experimentation in randomized controlled trials Homoeopathic medicine has both a mitigating and curative effect if it is effective on the individual symptom scenario. These approaches to treatment can combine to enhance more rapid improvement and recovery in the patient.	Individualization of treatment increases the patient's own participation. To understand the foundation of both nursing and medicine, it is a matter of viewing the interaction between the part and the whole. This can result in an 'added' effect that has a beneficial effect on the body's ability to 'heal' itself. This may emerge as a double effect in integrative health care.

Table 1: An example of the hermeneutic process between pre-understanding, understanding and new understanding

2.3. Ethical considerations

Dignity is a concept that is often used together with respect in interpersonal relations and in the care and treatment of the whole human being [10]. The ethical responsibility in the further interpretation lies in the choice of a theoretical frame of reference that opens up for the dignity and health of the body through the principle of harm avoidance and benevolent treatment.

The researcher is primarily an instrument in qualitative research in which the intention is to get as close as possible to reality or to lived experience as it unfolds in a natural setting [31]. Credibility and reliability pertain to the trustworthiness and consistency of the study and its results [29]. In this article, it is a matter of being accurate and faithful to the texts. This means clarifying the basis for the result. For the researcher, being aware of one's own pre-understanding is an important factor in adding credibility and validity.

3. Results

The further interpretation of the empirical results resulted in the following themes: 1. The lived body is understood as a coherent whole and a place of inner freedom. 2. The body in a lowered state of stress helps the patient to experience dignity and vitality. 3. An integrative understanding of health in terms of IBD brings dignity and wholeness to the body. The themes are illustrated in the table below:

<i>Themes from the articles</i>	<i>Understanding based on the text</i>	<i>New understanding</i>
Familiarity with symptoms of illness as a source of recovery, theme 3	Understanding of food tolerance, physical activity and stress promotes knowledge of one's body and health.	Using <i>diet or food</i> as medicine and adapted <i>physical</i> activity for IBD is slow intervention. The body will acquire increased energy, endurance and well-being. The return to health is shown by recovery.
Understanding of bodily limits of	The ability of the bowel to break down and metabolize the	Establishing body knowledge that leads to the patient's choice. Through

<p>tolerance. Reaction to food to be digested and physical activity, theme 5</p>	<p>food and its importance for nourishing the body. Adapted physical activity to avoid worsening illness.</p>	<p>body language, people can express themselves and speak to others around them. Recovery is reflected in increased well-being.</p> <p><i>1. The lived body is understood as a coherent whole and a place of inner freedom</i></p>
<p>Intestinal immunology between stress and the treatment of advanced gastrointestinal disease, theme 1</p> <p>Creating resilience through integrative health treatment, theme 7</p>	<p>Strengthening the internal resistance of vulnerable people with IBD reduces physical, mental, or social stress.</p> <p>Mastering creates stress resistance, which is about managing stress in a positive way. Healthcare professionals help to strengthen self-esteem and dignity of identity</p>	<p>Resilience is about resistance and the ability to handle stress.</p> <p><i>2. The body in a lowered state of stress helps the patient to experience dignity and vitality</i></p>
<p>To restore health in better balance is to create a new equilibrium, theme 6</p> <p>Creating resilience through integrative health treatment, theme 7</p>	<p>Health is the balance between the physical and mental dimension of IBD, in interaction with the environment.</p> <p>Understanding disease and health as lived experiences. Our consciousness is both a biological and a social phenomenon. The human being is a living body, soul and mind.</p> <p>Establishment of interdisciplinary teams focusing on the living body that is open</p>	<p>The living body exists in a state of perpetual change. Health is dynamic balance.</p> <p>Individualization of treatment increases the patient's own participation. To understand the foundation of both nursing and medicine, it is a matter of viewing the interaction between the part and the whole. This can result in a 'added' effect that has a beneficial effect on the body's ability to 'heal' itself.</p> <p>It is about respect for human dignity, for living beings and for humans as nature.</p>

	to the world and influenced by the environment	<i>3. Integrative understanding of health in terms of IBD brings dignity and wholeness to the body.</i>
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Table 2. Result of the interpretation process of themes towards new understanding

3.1. The lived body is understood as a coherent whole and a place of inner freedom

By taking into account their own bodily limits of tolerance to food through an adaptation of their diet, patients calm their digestive system, which in turn calms the brain and enhances cognitive capacity [13,24]. The understanding of bodily limits of tolerance and the importance of food led to a reflection after the empirical study over the English term ‘nurture’. Gaynor [32] claims that by nurturing and nourishing nature, one thereby nurtures health - ‘Nurture nature - nurture health’. This is linked to the fact that the environment in the modern world can be the cause of illness and ill health. Nurturing means fostering: ‘a person's breeding, upbringing, education, or training’ (www.oed.com;). In this article we use the term nursing, which comes from the English ‘to nurture’. In nursing, 'to nurture' is about providing care for the sick, but also about giving the body the nourishment it can tolerate and needs to heal. One might describe it as caring for nature in the human body, to ‘nurture nature in the human body’. For patients with IBD, it will be important to acquire knowledge so that they can ensure nutritious and healthy food to strengthen their body [13]. Most profoundly, it is a matter of respect for the food that nature can create and what one can tolerate when eating of it. Experience with bodily limits of tolerance in patients with IBD emerged clearly. By taking into account bodily limits of tolerance, body knowledge is acquired, along with improved well-being and enhanced energy levels. This can be experienced as important both as nourishment and to nourish the body for the purpose of improving health. Food can be experienced as both nursing the body from within and as a treatment. This means that food can treat the suffering and lead to improvement or recovery – where the patient herself/himself learns this treatment through health guidance from a nurse or nutritionist.

Empirical data on the effect of food on the body's limits of tolerance are described by patients suffering IBD and who develop self-care techniques [13,33]. Self-care consists of recognition of symptoms and adaptation of diet. Further interpretation of the results of this study also showed that there is a possible connection between the food consumed over time

that affects the body's limits of tolerance, and a weakened immune system. Therefore, it is important to influence the adaptive or outer immune system with food that is tolerated and where diet helps to balance the immune system [34,35].

The composition of macro and micro-nutrients in food affects the whole at the cellular level, through metabolism, and at the level of the whole organism. Using food as medicine, or a diet, is slow intervention with a high degree of self-activity on the part of the person himself/herself. It is about taking responsibility for getting on a better track and providing the body with increased energy and general improvement. Thinking 'slowly' about possible solutions relating to food intake and then testing these is the task of the individual patient. Improvement is felt specifically in the body with indicators such as less pain and diarrhoea, enhanced energy, endurance and a feeling of inner freedom. Inner freedom is linked to experiencing oneself in better health and is linked to self-awareness of one's own situation. Patients with IBD develop conscious feelings to protect themselves [36]. By developing such feelings, they retain their own dignity and lessen their shame. They develop a recognition that protects and strengthens resilience [24]. Promoting one's own well-being is linked to proper sleep, correct diet, good relationships and active use of nature.

3.2. The body in a lowered state of stress helps the patient to experience dignity and vitality

People with IBD exhibit a special vulnerability to stress that healthcare professionals should listen to [24]. Strengthening the internal resistance in people with IBD means a lot for people who are more susceptible to reactions to physical, mental or social stress. Resilience is about resistance and the ability to handle stress. Stress resilience is a matter of handling stress in a positive manner [37]. To experience worthy treatment from healthcare professionals through confirmation can contribute towards increasing the patient's positive self-esteem through reacting less to stress; furthermore, it creates an opportunity to develop stress resilience. This is about mastering stress factors and regaining mental and physical equilibrium. Promoting enhanced self-esteem and mastery strengthens the ability to handle stress and may be interpreted as establishing greater confidence in self-worth and dignity.

Interaction with a significant other has an impact on the patient's self-esteem and pride in mastering his or her suffering, which enables improved health. Dignity means that the patient experiences confirmation and recognition from significant others so as to have enhanced self-identity [8]. The body plays a vital role in our understanding of the world and contributes

throughout life as my 'I' and in the development of my identity as a person. This development helps to bring the person to their own understanding of dignity of identity: Who am I, and what does interaction with others mean?

Worthy patient care bolsters self-esteem and enables patients to better cope with their situation by using different problem-solving methods. In the use of psychosomatic medicine, homoeopathy and hygiene, the spotlight is on phenomena such as life-strength and vitality [1]. Life-strength is interpreted as being more vigorous, while vitality is interpreted as a general expression of improved energy levels. These two phenomena have an external and an internal quality in them. Gadamer [1] says that we are part of nature, and that it is this nature in us, along with the unsupported organic defence system in the body, which is capable of maintaining our internal equilibrium. The art of healing is the ability to produce and restore something.

Resistance stimulates the patient's own self-healing system. Experienced nurses are familiar with the wound-healing process and can see at a clinical glance when the patient is in general recovery. Florence Nightingale emphasized a number of external hygiene measures to facilitate self-healing. In Nightingale's time, children in London got better when given homoeopathic medicine by a knowledgeable doctor during epidemics, than when mothers shared children's medicines among themselves [38]. Gadamer [1] claims that science cannot say exactly what happens with medicines containing low homoeopathic doses. Today, several treatments with CAM are supported by evidence from quantitative studies, meta-analyses and systematic surveys, and there are studies on CAM in the treatment of IBD [39,40].

The results of the empirical studies show that patients have general improvement using homoeopathy rather than using painkillers or antidepressants over time [24]. Gadamer [1] notes that 'their favourable healing effects prevent "possible abuse of other biochemical medicines" (p. 107). This can be interpreted as meaning that our usual medicines such as pain killers and psychopharmaceuticals can have a good effect in the short term. This may also imply a masking of the symptoms that are at the root of the illness. In addition, it may also develop into abuse of an important acute-care medicine. This can occur when administering allopathic medicines over time, such as pain relievers, anti-inflammatory medicines and antibiotics to this patient group. These are medicines that relieve or remove the symptoms; however, they do not necessarily treat the 'root' or the basic cause of the illness. This is where homoeopathic medicine and nutrition can help give the body energy to heal itself. This

depends on whether the patient can actually corroborate physical and mental improvement that persists. If this approach proves ineffective, the allopathic approach will alleviate the complaints associated with the illness and will keep it under control and prevent it from worsening. The results of this study show the importance of listening to the complaints, both physical and mental, as well as to factors that may contribute to an already weakened immune system, with a view to finding potential solutions to the problems [13,24]. It is an interaction between the whole and parts of the body. Homoeopathy is a more holistic approach that requires clinical competence to achieve results. The allopathic medicine that doctors and nurses are most familiar with has its strength in acute treatment and use in tests and studies that confirm medical diagnoses. In chronic illness, homoeopathic treatment can contribute significantly in a long-term perspective and represents preventive treatment both in medicine and nursing [41,42].

The dignity of the body lies between the living body and the person's identity. The Bible has a well-known metaphor in the following: The body is the temple of the soul (1st Corinth. 6, 19–20, www.bible.com). Body, soul and spirit are part of a unique whole [4]. The human body is also a unit between the physical world – ‘matter’, the living world – ‘life’ and the world of mind – ‘mind’ [6,43,44]. This circle or spiral between the physical, living and the conscious world has been the basis for developing a holistic understanding of nursing science. The whole is larger than its parts and is the driving force of all development. The smallest unit of life lies in the living cell [6]. Today, the body is often nursed and treated as a physical object, but the body is in living interaction with the environment and belongs to the living world of ‘life’. This can be exemplified by the conception of an ovum and a sperm leading to the birth of a child. The basic unit of ‘life’ is the cell that has metabolism [6,43]. This can be interpreted as meaning that our body and our emotional/mental state appear as a separate entity or creation of the living body.

The results of this study show the benefit of activity up to physical limits of tolerance [13]. Psychomotor physiotherapy can contribute, via breathing exercises for stress reduction and adapted training. Breathing calmly can create an awareness that the body helps you to get into deeper contact with yourself and your environment. Patients seek psychological help for consultations about their mental state conversations after a persistently challenging life situation. Patients with IBD are concerned with the self-healing ability of the body and want to learn more about it through health guidance or as a life-enhancing treatment.

3.3. Integrative understanding of health in terms of IBD brings dignity and wholeness to the body

Research into the development of more integrative health services for patients with IBD shows a development from part/parts thinking to more holistic perception of the patient situation. Nurses have a positive attitude towards a more holistic approach to be able to understand both illness and health as lived experiences [19,24,45]. Results from this study show that there are two areas in which healthcare professionals can cooperate to develop in an interdisciplinary team: 1. The human being as a unit of life, a living body and mind/soul in the world. 2. Individualization of treatment to increase the patient's involvement.

The person as a unit of life, a living body and mind/soul in the world. The dignity of the body has to do with acceptance of the living body that is open to the world and should not be confused with the objective body [46]. Merleau-Ponty claims that the body has to do with the acceptance of the living body that is open to the world [11, p. 114]. Modern medical science has largely explored the physical body, but the living body is more open to the world and influences from the environment.

In an overall interpretation, the body exists in a state of constant change and movement. There is an internal balance, known as homeostasis, which is related mainly to physical and physiological functions [47]. Health is a balance between the physical, emotional and mental in the living body. It is about balance or equilibrium. Patients with IBD are currently experiencing being met by various health professions in the hospital's outpatient clinic, and their patient organizations continue to seek additional advice from nutritionists, IBD nurses and, in particular psychologists [48]. International organizations are calling for their members to be met with openness and respect. Members are entirely dependent on the hospital's help in the event of acute worsening of their suffering. This may mean that patient and doctor co-determine the medication they depend on and, if necessary, make choices to reduce the amount of medication if the patient changes lifestyle. The patient group has experience with the use of natural medical methods, nutrition and physical activity in quiet phases of the disease. The results of the empirical studies show the utility of CAM [24]. This is an area of cooperation and further development of integrative health services. In the area of interdisciplinary cooperation, several health professions are working together in teams to address complex problems and aiming to better identify opportunities for recovery and dignity [49].

Individualization of treatment to increase the patient's cooperative participation.

Knowledge-based practice in nursing is currently an interaction between research-based knowledge, experience-based knowledge and user knowledge/interaction into a context [50]. To establish a better development where we look more to nature again, it may benefit us to acquire more ecologically oriented care and treatment of patients with IBD. Today's research-based knowledge is built up from qualitative and quantitative studies as well as systematic meta-studies. Drugs have been developed on the basis of many participants in randomized controlled studies to ascertain effects on disease that have health-enhancing results. Homoeopathic treatment and/or the ideal holistic medicine is based more on the principle of individualization. Those who need health care are individuals in their environment. The reason for this is that the IBD symptom scenario can vary from person to person in terms of how they react to the environment. In order to get good acute treatment, the medicines that have been developed must be potentially life-saving for the patient. On the other hand, the principle of individualization may give a 'added effect' – a beneficial influence on the body's ability to 'heal' itself in the subsequent improvement phase. The result of further interpretation shows that a dual effect is included in integrative health care [1,24,33,40,51,52].

Our reflexive consciousness's 'inner world' came into existence during evolution and along with language development and organized social relations [6]. This entails that our consciousness is both a biological and a social phenomenon. We need a scientific theory that combines matter, life and mind [6]. In general, processes of change occur in the network community above and down through traditional institutions, but also from below and upward, with systematic knowledge from patient experiences and research on natural medical methods. Altogether, it is about respect for human dignity, respect for the living and a recognition that humans themselves are nature, culture and health. Stimulating dialogic and creative processes will create the basis for a more sustainable future where nature and ecology are part of the whole.

Dignity is basic for promoting health and welfare [53]. To experience dignity over time, it is a matter of being met with respect, being seen and being heard. Negative attitudes and stigmatization of people suffering from IBD may materialize, including among healthcare professionals. Patients can also teach health professionals something new if they are willing to listen to experiences with CAM. Trust, respect and dialogue about these experiences are fundamental to promote health, well-being and dignity [24, 55]. Facilitating better individual

follow-up of patients with IBD can contribute to increased understanding, knowledge and better treatment.

4. New understanding – a discussion

By placing a new focus on the dignity of the body and an integrative understanding of health in interdisciplinary cooperation, new knowledge for overall health-enhancing initiatives can be provided. Gadamer [25] writes about interpretation and understanding as a universal aspect of any knowledge creation. Understanding does not begin anew: it presupposes that you have already understood something, and that what you have understood develops in a hermeneutic spiral of pre-understanding, understanding and new understanding. Understanding involves adjusting your own horizon with a different horizon and creating a horizon fusion through a new shared understanding.

The further interpretation has been aimed at creating a new understanding of the traditional way of understanding disease with natural scientific thinking to include a more holistic, integrative health treatment regime comprising nutrition, physical activity and natural medicine/CAM. This approach involves seeing possible new relationships with more opportunities for recovery than we currently have knowledge about or are accustomed to. This requires a curiosity about including clinical experience in a collaboration between medicine and natural medicine/CAM. This will require nurses and doctors to learn both to observe and assess when the whole consists of this 'more'. Integrative health understanding is created through a new common understanding where health and recovery means seeing the whole patient.

A holistic view of this type involves a professional competence in the field of acute, critical illness, which can create understanding and think innovatively about chronic diseases. In acute illness, it is about gaining control and saving lives. In the case of chronic suffering such as IBD, new thinking is now in demand along with a desire for more interdisciplinary collaboration. To create a new understanding of this aspect requires openness and basic knowledge that creates a dialogue aimed at achieving a common conceptual horizon. Pre-understanding provides an opportunity for critical reflection through which one tries to acquire new understanding through dialogue and input. A common conceptual horizon and the establishment of a renewed paradigm will only be accepted if the ability of the subject community to solve problems for the best of the patient population is enhanced.

In chronic disease, greater efforts are required to restore health, with the help of a doctor or professional therapist, and to contribute in stages of crisis and change that result in a better state of equilibrium. A circuit of feedback can enhance a growth process such as, for example, in a spiral towards a better level of health. Changes in a person's lifestyle due to illness are often examples of creative reactions that can provide the patient with better health than before the problem manifested itself. Today, integrative medicine and nursing have been established, in which one tries to combine the best of conventional treatment and complementary therapies into interdisciplinary health care teams [6,17,20,51,54]. Hippocrates' writings, which form the basis of Western medicine, define the therapist as a watchman/observer and assistant for natural healing powers.

Including integrative medicine is a health-enhancing form of treatment that allows the body to regain health. This intervenes in the body's biological processes and is energy medicine. It is used in several European hospitals that have established departments of integrative medicine. Integrative health care and nursing is used in parallel with the usual acute medicine on children's wards, in intensive care units and in rehabilitation [24,51,55].

The focus on ecological conditions for creating health in balance, where we are more in line with nature, will become important in the future [6, 56]. Gadamer [1] emphasizes the human experience of recovery, through which health returns naturally. Experiencing the recovery of our own body is experiencing nature in us with the self-sustaining organic defence system. Both medicine and nursing can look back to the historical roots of their professions in terms of what is needed to strengthen recovery processes. Today we require more systemic knowledge about what illness is and about how to enhance recovery processes.

5. Conclusion

IBD is currently perceived as an autoimmune disease for which there is a need to focus more on the environment. There is a need to promote a common horizon of understanding that safeguards the dignity and health of the body in the environment. Our Western medicine provides evidence of the most powerful treatment methods because they are the most easily measurable in controlled scientific experiments. To maintain the effect of the treatment given, the body contains a fundamental metabolism with circulation systems and energy transfer systems that should be used in future treatment and care of IBD.

The holistic conception of nursing and medicine in integrative health care is about being more in touch with ourselves, with our fellow human beings and with nature and the surrounding environment. This will strengthen human dignity and our connection to nature by seeing, feeling, listening to and experiencing how much it means for our health situation. More people have become concerned about the causes of illness and delve more deeply for answers. Therefore, integrative health care can help stimulate the body's own functions for normal activity and help stimulate the body's own self-healing ability.

A future health service that will make greater use of interdisciplinary cooperation in integrative health services will be able to achieve more effective prevention. This opens for the possibility of detecting new legal issues that are not well known in current body research. While the body on the whole regenerates, symptoms of disease will gradually become weaker and, in some patients, will naturally disappear by themselves. It is a tenet of the most sacred knowledge of both the physician and the nursing profession to protect the body from harm and to restore dignity to the body.

Recommendations to clinical practice:

- Our living body is fundamental for understanding and remembering. Knowing and eventually being able to rely on one's own experiences through self-care gives the person an inner sense of coherence and personal dignity.
- People with IBD have their own body knowledge and the confidence that the body will provide the necessary signals to allow them to make their own choices. This knowledge enables the person to choose between different strategies for solving problems and managing events in life.
- Integrative understanding of health and dignity is recommended concepts in building integrative health care teams.

Declaration of competing interest

The authors have no conflict of interest to disclose.

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