

MERGING

Medicine

Alternative medicine—as a phrase—is in itself passé, and with its passing is a small history of how the conventional medical community has changed its view of therapies such as acupuncture, yoga, meditation, guided imagery and herbal remedies.

“‘Alternative medicine’ really implies that it is outside traditional medicine and that sets a dichotomy that is very unfortunate,” says Katherine Gundling, M.D., assistant professor of internal medicine at University of California, Davis. “The term used by us—by those of us who study it—is *complementary* medicine, which means alongside.”

“I’m a child of the ’60s, a time when there was a mistrust of the medical establishment, and I think the term [alternative] came about from that era,” says Marcia Taylor-Carlile, R.N., who coordinates patient education for Mercy Healthcare. “But now the term is *complementary* medicine. . . . And the latest word is actually ‘integrative’—how do we use the best of both?”

Indeed, many standard bearers of traditional Western medicine are taking a close look at practices that used to be ignored or openly scoffed at by physicians. Kaiser Permanente’s internal medicine department, for example, uses acupuncture as a treatment for chronic pain and is running clinical trials for black cohosh with menopausal patients and magne-

Formerly ignored by most conventional medical practitioners, alternative medical therapies are gaining recognition in today’s doctors’ offices.

BY THEA MARIE ROOD

ILLUSTRATION BY MAGUÉ CALANCHÉ



培

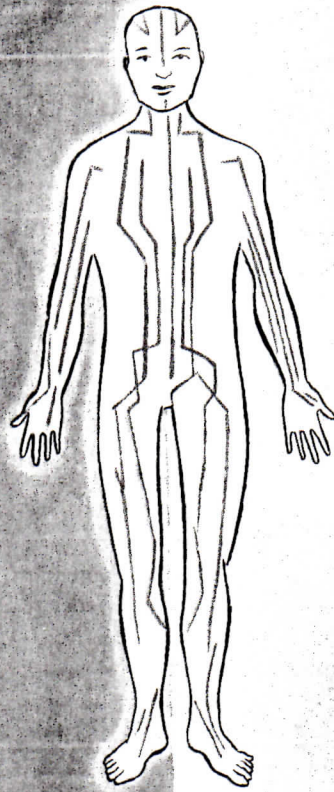


fig 2a



態



Taraxacum officinale



Trifolium pratense

課



fig 8



mgue

sium with migraine patients. U.C. Davis is currently researching a variety of complementary techniques, such as one study that explores whether ginseng helps the flu vaccine work better and a second major NIH study that will look at whether ginkgo biloba affects memory in older patients. Mercy is studying the effects of guided imagery on cardiac patients and runs monthly meetings—known as the Healing Circle—that focus on the risks and benefits of complementary treatments. Finally, all the major hospital systems have physicians on staff who speak openly about the importance of the mind-body connection and the mysteries of healing.

“What I try to do is get a sense of what in a person’s life in general is producing symptoms,” says Maxine Barish-Wreden, M.D., an internal medicine physician with Sutter Medical Group. “I think the future of medicine is to understand what people need to do to treat any illness—even cancer: who are you incomplete with, who haven’t you forgiven, what are you called to do in life that you aren’t doing?”

Similarly, says Taylor-Carlile: “We’re not just a body of symptoms, we are all three things: body, mind and spirit—that’s what we’re made up of and all these things impact our health.”

“I like the idea of tapping into the body’s self-healing mechanism—which maybe people were more aware of 5,000 years ago,” agrees Mark Taylor, M.D., a Kaiser physician in the physical medicine and rehabilitation department. “And when you have [so] many people having a positive response [to complementary therapies], you have to re-evaluate your thinking.”

On the other hand, no one is saying complementary therapies are always effective—or even always safe. “You have people who won’t take high blood pressure medication, but will take herbs,” says Barish-Wreden. “People think if it’s natural, it’s better—but I’m not convinced.”

Similarly, many health care professionals have concerns about self-diagnosis: standing in a health food store aisle treating your own depression, for example, or having non-medical practitioners tell you why you’re

“I think the future of medicine is to understand what people need to do to treat any illness—even cancer: who are you incomplete with, who haven’t you forgiven, what are you called to do in life that you aren’t doing?”

tired. “I’ve had 23 years of school and I can tell the difference between a person with an insulin-secreting tumor and someone basically healthy with low glucose levels,” says Gundling. “Or one of the symptoms of pancreatic cancer is depression. The problem is if you’re not diagnosed [properly] in time and it kills you.”

What is also concerning to many experts is the lack of scientific research—and regulation—of complementary therapies, and many are

motivated to study these issues in part to protect consumers. For example, a recent Kaiser patient survey found that “50 percent were interested in and/or already using these modalities,” says Harley Goldberg, D.O., Kaiser’s regional director for complementary and alternative medicine for Northern California. “How do you differentiate between what’s safe and what isn’t? And how [as a physician] do you help them make choices that are safer and won’t harm them?” Gundling agrees: “Millions and millions of people are already using [herbal remedies] and they don’t know what [the chemicals] are doing.”

In fact, changes in funding are producing a variety of good research studies, most of which do not yet have results. In the meantime, if you’re interested in exploring alternative health care, where do you start and how can you be reasonably assured of success?

What Science Says

According to local experts, there is not much hard scientific evidence available yet for many complementary therapies. For some people, that’s concerning; for others, it’s not. “I’ve seen lots of things that don’t have good explanations—and I don’t have a problem that we don’t understand how acupuncture works,” says Taylor, who performs acupuncture on patients at Kaiser. “There are lots of medicines we don’t understand exactly how they work either.”

Still, if you’re skeptical, it’s important to know what scientific research has determined to be true. Here are a few examples:

Acupuncture/acupressure—These treatments use fine needles (acupuncture) or pressure (acupressure) on points that are believed to affect energy flow channels of the body. Certain studies have shown effectiveness in relieving post-op pain, post-chemotherapy nausea, the nausea of early pregnancy and various types of chronic pain (including low back pain, carpal tunnel syndrome and headaches). There is also some evidence that it may be helpful with stroke rehabilitation and treatment of addictions. One study also validated the use of mock combustion—lighting an herb on a patient’s skin at a particular acupressure point—for turning a baby who is in a breech position.

Chiropractic—Chiropractic is external manipulation of the spine, either through massage or spinal adjustments. Limited studies have shown effectiveness in only one area: the relief of certain kinds of lower back pain.

OPEN TO THE PUBLIC

Call for Patients—U.C. Davis is currently looking for 750 patients over the age of 75 to participate in a major NIH six-year study that will examine whether ginkgo biloba improves or prevents dementia. Call Dr. Gundling at 734-2812.
The Healing Circle—Mercy Healthcare holds a monthly forum for anyone interested in more information about complementary therapies. Each meeting consists of an opening and closing meditation, as well as a speaker—usually a complementary medical practitioner. Call Marcia Taylor-Carlile at 484-2117.

Relaxation therapies—These types of therapies include tai chi, yoga, meditation, guided imagery and hypnotherapy. Some studies have found these to be effective in reducing blood pressure and, in the specific case of tai chi, improving balance and reducing the risk of falls in the elderly. Guided imagery is currently being studied in a variety of settings—such as with cardiac or cancer patients—to assist with healing.

Herbal Remedies/Dietary Supplements—Again, most major studies are just beginning, but the drugs being studied include St. John's Wort (depression); echinacea, zinc and ginseng (bolstering the immune system); saw palmetto (enlarged prostate); black cohosh (menopausal symptoms); B vitamins (certain neurological conditions); magnesium (migraines); and ginkgo biloba (improving or preventing dementia in the elderly).

Tell Your Doctor

The most critical piece of advice: tell your doctor about any complementary therapies you're involved in—especially herbal remedies. "Particularly if you're using them to treat a medical condition as opposed to maintaining health and wellness, make sure you're notifying your physician," says Taylor-Carlile. St. John's Wort, for example, may dangerously interfere with several heart medications—and certain herbs may counteract cancer treatments.

Secondly, don't assume that just because people have "M.D." after their names that they won't be open to therapies outside the conventional. "Although many people feel you have to be on one side of the fence or the other, I don't think there should be a fence. Because ultimately the goal should be what will most benefit the patient," says Gundling. "If there's something that may be a benefit to my patient and won't harm them, then I'm interested." And Barish-Wreden says: "If you have a commitment to healing, you need to be willing to look at everything."

Staying Safe

Choosing a Practitioner

Local experts—and several satisfied patients—frown on picking a complementary health practitioner by, say, paging through the phone book. "But then I wouldn't pick a doctor or a hairdresser that way either," says one. Instead use your best consumerism and follow these words of wisdom:

What to Look For

- 1) Practitioners should be certified and licensed by the State of California—a fairly careful, although not foolproof, process.
- 2) Practitioners should have been in the community for a while and have developed a good reputation. Talk to your physician or friends for referrals.
- 3) You should feel comfortable asking questions and free to say no to something you don't like.
- 4) Practitioners should be clear about the procedure, how long treatments will last, how much it will cost and what you can reasonably expect. (Said one expert: "If it sounds too good to be true, it probably is.")

SAGE ADVICE ABOUT HERBS

In addition to knowing about side effects and discussing what you're taking with a physician, it is also important to know what's actually in that bottle. What do local experts recommend?

- Stick to reputable brands, such as Metagenics or Nature's Way. Also pay attention to words like "standardized," which means it's a purer form.
- Similarly, go to reputable pharmacies and stores that have been in the community for a while. Good bets: places like the Professional Village Pharmacy, where they compound their own herbal products by buying the herb in a pure form and making capsules. Or, if you're a Kaiser member, pharmacy operations set up quality standards for certain herbs, such as echinacea, ginkgo biloba, St. John's Wort and saw palmetto.



Red Flags

- 1) A practitioner won't work in tandem with your physician, seems angry at the mainstream medical community or advises you to stop medical treatments or medications.
- 2) A practitioner gives you the "hard sell," particularly with regard to supplements. One patient reportedly left an herbalist's office with \$800 worth of dietary supplements—a three-month supply—and another was told her multivitamin was "garbage" and should instead purchase a bottle—from the practitioner—for \$200.
- 3) A practitioner makes exaggerated claims, especially when it comes to life-threatening, serious illness.

Follow the Money

There are two pivotal events that influenced complementary medicine in terms of money. One is that in 1991, Congress established the Office of Alternative Medicine, which is now called the National Center for Complementary and Alternative Medicine. "It has full NIH (National Institutes of Health) status and money is available for investigation," says Gundling, who is co-investigator on an NIH study at U.C. Davis that will look at ginkgo biloba. Most experts believe this funding source will encourage more high standard research into a variety of complementary therapies.

"Hopefully one day we will have more science so we can be more confident," says Taylor—several clinical trials of dietary supplements are also being run at Kaiser.

The second key monetary issue, which is not as warmly received by physicians, is the 1994 Dietary Supplement Health and Education Act. "In short, the act allowed [manufacturers of herbal remedies] to advertise, make medical claims and be labeled dietary substances," says Gundling, who adds that this removed them from the jurisdiction of the FDA (Federal Drug

Administration). "It's now up to the FDA to prove a dietary supplement is unsafe." This is opposed to drug companies, who must go through rigorous scientific testing proving safety for up to 15 years before releasing a product. What does this mean for consumers? "If you go to the health food store [to buy herbal products], you have no idea what you're getting," says Harley Goldberg, D.O. "What's in there can vary from batch to batch, from bottle to bottle, from pill to pill." In fact, studies have shown that some imported herbs—from India and China—may bear little resemblance to their label. "Some had 20 to 30 percent heavy metals," says Gundling, who adds that others contain the steroid prednisone, Motrin, aspirin and/or mild amphetamines. Some bottles, in fact, contain nothing but un-

The most critical piece of advice:
tell your doctor about any comple-
mentary therapies you're involved
in—especially herbal remedies.

labeled additives and none of the herb it was supposed to be. "No wonder people feel better," she says, "but it also means they are taking substances they and their physicians need to know about."

Do Your Homework

If you want to have input into your own health care—and you're interested in complementary therapies—it's just common sense to do some homework. Here are some references recommended by local experts:

Alternative Medicine: What Works by A. Pugh-Berman.

Fundamentals of Complementary and Alternative Medicine, M. Micozzi (editor).

Green Pharmacy by J. Duke.

Herbal Physicians' Desk Reference (Herbal PDR).

The Honest Herbal by V. Tyler.

JAMA (Journal of the American Medical Association), Nov. 11, 1998, Special issue devoted to complementary therapies.

What the Labels Won't Tell You by L. Chamberlain.

Web sites:

<http://www.nlm.nih.gov/services/html>

<http://comcnecolumbia.edu/dept/rosenthal/databases> ■

WHO WANTS COMPLEMENTARY MEDICINE?

According to surveys, patients most interested in complementary therapies are highly educated females. They may also be slightly younger: "I'm a little different than, say, my mother is," says Marcia Taylor-Carlile, R.N. "She's from that generation that went to the doctor, he told you what to do and you did it. Most people using complementary therapies are not like that. . . . They want to have input."

Personal Story

"I've had allergies—hay fever—since I was a kid," says Judy Parks, co-owner, with her husband Bruce, of Tarts and Truffles bakery. "I tried shots, but didn't get much relief, then I was pregnant and didn't want to do them anymore, so I just suffered. But then my youngest daughter developed allergies—she'd have nosebleeds every night, her eyes were so red her teachers would ask if she'd been crying."

Parks had read about acupuncture as a treatment for seasonal allergies, and leery of putting her daughter on medication, she found an acupuncturist in Roseville. "We both went and had really good results," she says. "It was the first time in 40 years I could sleep with the windows up in the spring. . . . And my daughter's nosebleeds stopped by the second week—and she'd been having them every night. She cleared up faster than I did."

Now they both go every spring for their treatments, which last approximately two months: they go once a week the first month and every other week the second. Although some insurance policies cover acupuncture treatments, the Parks' policy doesn't: her treatments are \$50 each time and her daughter's are \$30. And the needles? "We make jokes—two go on either side of our noses and we call those our 'kitty whisker' needles; then there's the 'unicorn needle' in the middle of our foreheads," says Parks, adding she has a total of about 28 needles. "Sometimes I feel the ones in my face—just a little tiny prick—but most I don't feel at all. In fact, the experience is so relaxing, I usually take a nap."

Parks has also had acupuncture treatments for pains in her wrists—probably some form of carpal tunnel syndrome—that worsened around the holidays, when she was spreading more cake batter and twisting pastry bags. "She treated me three times two years ago and I've had very little trouble since," says Parks. And about acupuncture itself, she says: "The results have been so dramatic—I just really believe in it. And I would certainly try that for a child before filling her full of Sudafed."

