

# A complement to medical care

**Alternative medicine isn't mainstream yet, but with doctors willing to give therapies like acupuncture a chance and new research taking hold, this form of health care is gaining ground — and believers.**

By Markian Hawryluk / *The Bulletin*

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Training for a marathon, Nicole Henry went for a run on a rainy Bend morning in early January. At the Reed Market-Brookwood roundabout, she slipped on a piece of black ice and felt her ankle snap.

"I knew instantly I had broken my ankle," the 34-year-old woman said. "I dislocated it. It was hanging off my leg. I was crying like a baby."

Two passers-by helped her get to the hospital, and six hours later, she was in surgery. The ankle, broken in three places, was fused back together with a plate and three screws. She was sent home to recover with a prescription medication for her pain.

A few weeks after her surgery, she faced a dilemma: The drugs left her feeling "a little off," but she felt she still needed them.

"I was still in so much pain, I wasn't ready to get off (the medication)," she said.

Then, her friends suggested she try acupuncture. Henry had never tried any alternative therapies before. But when she ran it by her doctor, he approved. Within a few sessions with the acupuncturist, Henry was able to start weaning herself off the pain medications. She no longer needed sleeping pills to fall asleep.

"It just got my pain under control," she said. "I just feel like my doctor was wonderful and my acupuncturist was wonderful and both of those together really has helped me to feel cared for in a more comprehensive way."

While doctors once outright rejected alternative therapies such as acupuncture, many physicians are now approaching such treatments as complementary to their practices, and many institutions are working to integrate therapies they once denigrated.

But significant hurdles remain to convincing physicians of the effectiveness of complementary therapies and to making them an affordable option for patients.

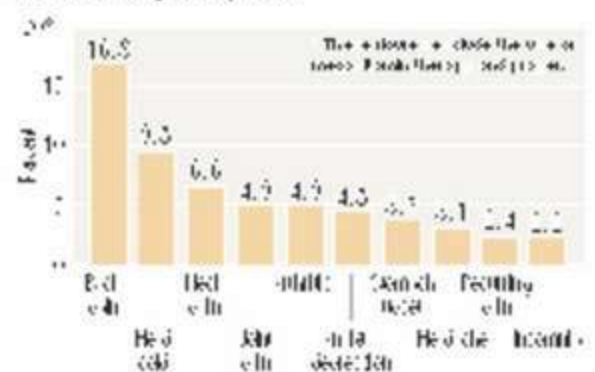
Dr. Aaron Askew, the orthopedic surgeon who operated on Henry's ankle, said he has seen many patients benefit from complementary therapies, but it's generally the patients who bring it up during their visits. At times, he's even written prescriptions for massage therapy or other alternative treatments so that patients can get insurance to cover the treatment.



Anthony Dimaano / *The Bulletin*

Kym Garrett, an acupuncturist with Mountain View Acupuncture in Bend, treats patient Nicole Henry last week. Henry broke her ankle in January and turned to acupuncture — with her doctor's approval — to help with the pain during her recovery.

**Disease/condition for which CAM is most frequently used**



Source: National Center for Complementary and Alternative Medicine

Graphics by Andy Zeigert / *The Bulletin* Photo by Anthony Dimaano / *The Bulletin*

"I am open to them being treated by someone who does alternative medicine at the same time they're seeing me," he said. "They don't need to hide it. I will be honest with them if there is something that is contraindicated or dangerous."

It's a change in attitude among doctors that has happened only in recent years, he said.

"I think in the past, we would say, 'I'm not comfortable with you doing that while I'm treating you.' They would have to almost hide the fact that they're seeing a massage therapist. That was something they did in a parlor. It was quackery," Askew said.

"That's definitely changed. We've seen the limits of medicine, particularly for pain management or spine and back problems, and we see people getting better with acupuncture or massage therapy."

### Evolution of care

Mary Ruggie, a professor of public policy at Harvard University's John F. Kennedy School of Government, said it's public demand that has worn down doctors' resistance to alternative medicine.

Ruggie became interested in alternative therapy when the clinic that was treating her breast cancer in 1997 offered her complementary care options. She documented the growing acceptance of complementary therapies in her book, "Marginal to Mainstream: Alternative Medicine in America" and in an article in the health policy journal Health Affairs.

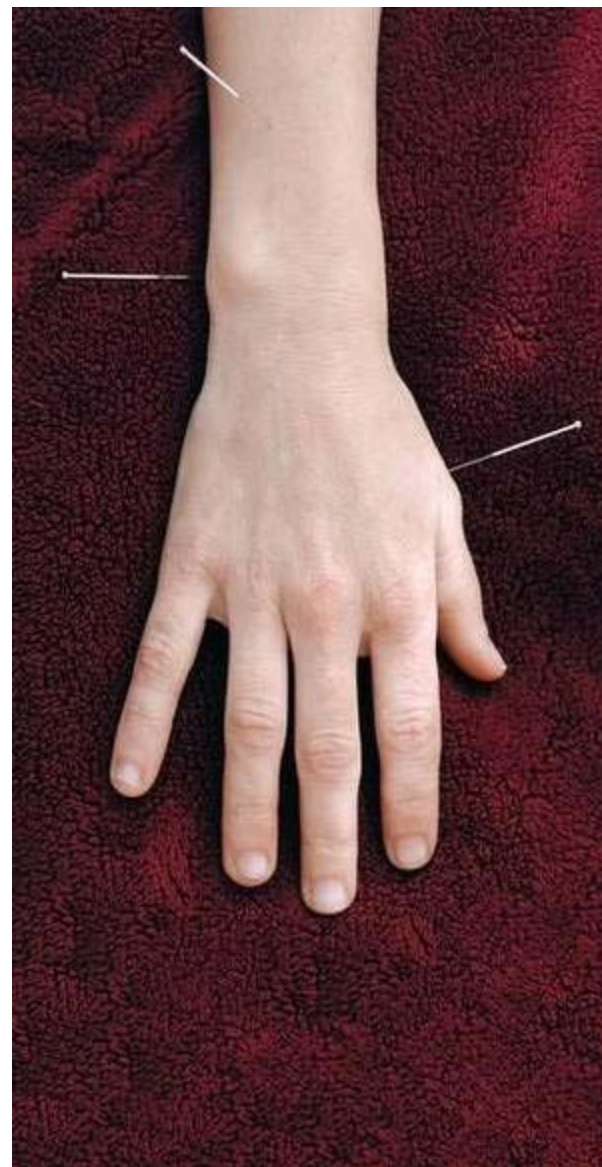
The transition, she said, began in the mid-1990s when surveys showed increasing numbers of patients using chiropractic, acupuncture, herbs, massage, yoga and mind-body relaxation techniques as an adjunct to conventional medicine.

In 1991, a survey found that one-third of Americans spent about \$14 billion on alternative therapies. By 1997, those numbers increased to 42 percent, spending \$21 billion.

Seeing the demand from their patients, major health care institutions began providing alternative services or setting up integrative medicine clinics, choosing treatments for which there seemed to be good evidence of safety and efficacy.

Then the whole field got a boost when Congress started the Office of Alternative Medicine at the National Institutes of Health, and in 1999 changed its status from an office to a center, creating the National Center for Complementary and Alternative Medicine.

"When NIH started the National Center for Complementary and Alternative Medicine, I think that was a huge turning point for acupuncture," said Kym Garrett, an acupuncturist with Mountain View Acupuncture in Bend, who treated Henry's ankle pain. "Studies actually started being done, and that's a huge part of what it takes for medicine to be accepted."



Source: National Center for Complementary and Alte

Graphics by Andy Zeigert / The Bulletin Photo by Anthony Dimaano / The Bulletin

## Alternative medicine types

The National Center for Complementary and Alternative Medicine groups therapies into four domains:

1. Biologically-based practices that use substances found in nature, such as herbs, special diets or vitamins in doses used outside of conventional medicine.
2. Energy medicine involves the use of energy fields, such as magnetic fields or biofields, that some believe surround and penetrate the body.
3. Manipulative and body-based practices are based on manipulation or movement of one or more body parts.
4. Mind-body medicine uses a variety of techniques designed to enhance the mind's ability to affect bodily function and symptoms.

The center also studies whole medical systems that purport to cut across all domains.

With research came more acceptance from physicians and tighter licensing laws, she said. And that led to insurance coverage for acupuncture, which prompted doctors to refer more patients for treatment.

“While it’s not necessarily the first modality that people will think of, more and more so, it’s becoming one of the top three,” Garrett said. “Acupuncture isn’t alternative any more.”

### **Mainstreaming therapies**

Last year, Mountain View Acupuncture was invited by the doctors at The Center: Orthopedic & Neurological Care & Research to move into the medical facility and help treat their patients.

The move has given the acupuncture practice a sort of legitimacy in the eyes of many patients.

“I wouldn’t have thought that it would have made that much difference, but we have had patients say to us, ‘If you weren’t in this building, we would not have come,’” Garrett said. “We have a lot of elderly patients who think of acupuncture as voodoo medicine. But us being here gives us a certain amount of credibility.”

Garrett said the doctors at The Center have been overwhelmingly supportive of having the acupuncturists on site. Many physicians will recommend that patients try acupuncture before resorting to surgery. Meanwhile, Garrett and her partner, Marjon Mirbaha, have tried to stress to the doctors the scientific research supporting acupuncture and how the treatments can complement medical care.

“Studies have shown that acupuncture can help with back pain or tennis elbow, a lot of the things that Western medicine has a really difficult time treating,” she said. “Or patients that are pregnant and are in pain, and they can’t get the surgery or the medication until they have the baby.”

Mirbaha also sees many women who are undergoing in vitro fertilization. A review published last month in the British Medical Journal found that patients undergoing acupuncture during their IVF process have a 65 percent higher rate of success. That means that for every 10 women who undergo acupuncture in conjunction with IVF, there would be one additional successful pregnancy. And the cost of adding acupuncture to the regimen — about \$65 to \$75 per session — is dwarfed by the \$12,000 average cost of repeating IVF.

Those numbers convince doctors, particularly when their business relies on their rate of successful pregnancies. In other cases, it might be the inability to help patients with certain symptoms that leads doctors to warm to alternative approaches. Ruggie said that’s why many leading oncology programs across the country have welcomed complementary therapies.

“That field has gone the furthest in integrating complementary therapy into treatment,” she said. “Cancer patients have side effects like fatigue, depression, tension and stress. When you see this kind of stress and you don’t want to give the patient more drugs, you’re open-minded to things that are not harmful.”

### **Filling the gaps**

This week, St. Charles Bend is launching a comprehensive care program that integrates complementary therapies into its cancer therapy services. Dr. Linyee Chang, a radiation oncologist and medical director of the Cancer Treatment Center, said many of the therapies have been in place at the hospital before, but the new program will pull them all together.

Source: National Center for Complementary and Alternative Medicine

Complementary medicine is used together with conventional medicine.

Alternative medicine is used in place of conventional medicine.

Integrative medicine is an approach that combines both conventional and nonconventional methods of treatment into a comprehensive program of care.

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Source: National Center for Complementary and Alternative Medicine

“Everything we do in cancer, we care about it being evidence-based. We’ve really embraced that, and we’ve been very stringent about adhering to guidelines in our core practices,” she said. “We care that our complementary piece be as strong, too. We want that to be evidence-based as well.”

The cancer center is relying on the work of the Society for Integrative Oncology, an international body made up primarily of cancer doctors. The group has painstakingly sifted through the evidence to determine what complementary therapies have been shown to be effective and how strong the evidence is.

“There’s a healing aspect to it,” Chang said. “We want to address more of our patients’ needs than just targeting the disease.”

Now when patients are treated at the center, they’re given a list of complementary therapies that have been shown to be effective with the services the hospital provides. Those include mind-body techniques such as meditation, guided imagery or yoga, and energy therapies such as Reiki. The materials describe what benefits are supported by research.

For example, the handout given to patients says that “manipulation of energy fields” has not been proven to have a therapeutic benefit, but that therapies such as Reiki may help to reduce anxiety and depression.

“This is all patient driven,” Chang said. “We will let our patients know that these are available, and it’s up to them to request it. But there’s no endorsement of anything.”

The hospital can also provide patients with counseling on nutrition and nutritional supplements. It provides information from the Sloan-Kettering Cancer Center on how the supplements a patient may be taking can affect their cancer treatment. It will also refer interested patients to acupuncturists.

Chang said about 60 percent of cancer patients will use complementary therapies. Patient demand and good quality research, she believes, is helping doctors to becoming more accepting of an integrated approach.

“Because our patients seek it, we have to maintain an open mind and be receptive,” she said. “You think of some of the studies that have been done on acupuncture — that has really affected our perceptions. There’s a scientific basis for the method of action.”

### **Battling resistance**

The rate of integration may speed up now that many of the large academic medical centers training the next generation of doctors have embraced complementary and alternative therapies. While many have chosen to create self-contained integrative medicine centers on their campuses, Oregon Health & Sciences University has taken the somewhat different approach of embedding complementary therapies into its existing departments.

“There’s no financial margin in these services, and you can get the infrastructure of the existing programs to support it,” said Anne Nedrow, medical director for the integrative medicine program at OHSU. “But this is what patients really want, to have it where they are getting their clinical care, not having to go to some free-standing center.”

Portland is home to some of the nation’s leading alternative medicine teaching institutions, including a chiropractic college, a naturopathic college and an Oriental medicine college. That’s provided well-qualified practitioners who are also familiar with teaching and research settings.

“We did specifically select fields that had the most research behind them,” Nedrow said. “There’s a reason, even though I’ve been approached a lot, why we don’t have energy healers.”

Nedrow said she too has seen a significant shift in the attitude of doctors towards complementary medicine over the past decade.

“There are definitely still, probably here at OHSU more than in the community, some very resistant pockets,” she said. “But more and more doctors have come out of the closet where they’ll say, ‘Yeah, I tried acupuncture.’ I think before it was more of the ‘Don’t ask, don’t tell.’ And that was really different than resistance.”

Ruggie agreed that there’s less resistance among doctors than there once was.

"I would say the majority are in that middle area," she said. "There are really only a very few — I've seen figures of less than 10 percent — that are the hard-line, anti-alternative medicine. Most are still agnostic. There's about the same, 10 percent, that are 100 percent gung-ho."

And Ruggie said even among those agnostics, there are more who are favorably disposed.

### **Remaining hurdles**

For all the gains, however, integrative medicine is still the exception rather than the norm, and the field must overcome significant challenges.

"The big one is the association of many therapies with fringe, wacky stuff," Ruggie said. "That is part of what the integrated medicine movement is all about in the United States. It is legitimizing it within the medical context."

That has providers talking about stress-reduction techniques rather than meditation, and mind-body techniques rather than energy healing.

"It is the concern that this is hokey-pokey," Ruggie said. "But that's all the more reason that we've got to have the research."

She said that could lead to a divergence between alternative therapists willing to adopt a more traditional approach based on evidenced-based practices in a clinical environment and those who maintain a more alternative framework, with spiritual claims in their marketing pamphlets and incense burning in their offices.

"It does bother some people that this has become medicalized. Integrative medical clinics have to be headed by a physician in order to grant the legitimacy," Ruggie said. "But I'm not against it because it is a very big foot in the door for Chinese medicine."

Askew said he's not concerned about the spiritual claims of many alternative providers if the treatments are helping patients.

"I'm willing to overlook it when it's not hurting people," Askew says. "Anything we don't understand, we usually criticize it or fear it. I personally have belief in prayer. But I don't expect everyone to accept that. I've seen people healed through prayer. I wouldn't expect people just to take my word for it or give me extra money for it."

Chang said the therapies St. Charles has chosen to bring on board have real, documented benefits. But she doesn't discount the possibility of other benefits not as easily captured by clinical studies.

"You can't dismiss the spiritual aspect of it," she said. "There is the relaxation aspect of it. Maybe there's a placebo aspect. It's hard to figure out, but it is helpful to people."

Another barrier to further integration is the lack of good research. While the number of alternative medicine clinical trials is increasing, research funding still lags behind that of conventional therapies. And many of the studies that are conducted don't show any benefit.

When the Institute of Medicine reviewed 145 studies of complementary and alternative medicine for a recent report, only one-fourth showed that the therapies worked. The report said two-thirds of the studies provided insufficient evidence to make a definitive determination.

Meanwhile, studies of complementary therapies found a wide range of variability in how patients were treated for a condition. So even when a well-designed study found a benefit, its applicability across the board to all providers of that modality was called into question.

"How do you (do) quality control? I don't think you can," Chang said. "It's a little bit of a leap of faith."

Until both the research and quality-control questions are resolved, many insurance companies are still staying away from most alternative therapies. Plans are more likely to cover acupuncture or massage therapy, two modalities with very strong research behind them.

"Insurances are just not covering it," Ruggie said. "It continues to be the upper class that can pay for it who are using it."

By Leslie Garcia

The Dallas Morning News

Spring weather makes us want to stand outside or sit outside or run outside or garden outside. The key word being, of course, OUTSIDE.

But we also need to protect our skin against cancer. To that end, we've sought help from various sources (among them Coppertone Solar Research Center and [www.healthunit.org](http://www.healthunit.org)). The results: five ways to save your skin and, quite possibly, your life.

1. The shadow knows.

The sun's rays are at their peak when your shadow is shorter than you are. Make sure that during those hours, even more than others, you're wearing a hat, sunglasses, sun-protective clothing and sunscreen.

2. If it feels good.

Find a sunscreen that not only is at least 50 SPF, but also is easy to use and feels good on your skin. You'll be more likely to use it.

3. Ounce upon a time.

People used to be more concerned with slathering themselves in baby oil than sunscreen. Even now, many of us don't use enough sunscreen. You need a full ounce to properly protect your face and body.

4. Cloud and clear.

The sun's rays are strong. Up to 80 percent of them can penetrate fog, mist and light clouds. So wear sunscreen even when you're not squinting.

5. Be suspicious.

If anything on your skin changes or looks suspicious, check with a dermatologist. Even if you think all is well, schedule an annual checkup.

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