Evidence-based Integrative Medicine

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National Institute of Health:

- Complementary & Alternative Medicine (CAM)
  - A group of medical and health care systems, practices and products not presently considered to be part of conventional medicine.

- Complementary medicine
  - Used in conjunction with conventional medicine.

- Alternative medicine
  - Used in place of conventional medicine.

- Integrative medicine
  - Combination of mainstream conventional medicine and CAM therapies for which there is some high quality scientific evidence.
5 Categories of CAM (NCCAM)
Whole Medical Systems

- Traditional Chinese medicine (TCM)
- Ayurvedic medicine
- Homeopathy
- Naturopathy
Traditional Chinese Medicine

- Acupuncture
  - WHO Lists acupuncture as safe and effective for 28 conditions
  - Highlights
    - Headache, Hypertension, Depression, Pain
  - Results seen but more research required
    - Craniocerebral injury
    - Diabetes mellitus, non-insulin-dependent
    - Ménières disease
Traditional Chinese Medicine

- Acupuncture
  - Currently funded Veteran Clinical trials
    - East Orange WRIISC (PIs: Rusiewicz/Findley)
      - Veterans with TBI and PTSD
      - 24 individual sessions acupuncture
      - Outcome = Well-being (SF-36)
    - DC WRIISC (PI: Prisco)
      - Veterans with PTSD
      - Group delivery – Auricular acupuncture
      - Outcome = Sleep (Insomnia Severity Index; actigraphy)
Traditional Chinese Medicine

- Acupuncture – Energy Medicine
- Herbal Medicine - Biologically Based
- Qigong – Mind-Body Medicine
- Tui Na – Manipulative & Body-Based Practices
- Eastern Dietary therapy - Biologically Based
Alternative vs. Integrative

- “Alternative” in lieu of “conventional”
- Outside of normal
- Add-on Treatment

- Embrace evidence-based treatments
- Synergy
- 1+1=3

Presented by the VA NJ War Related Illness and Injury Study Center (WRIISC)
**VA Standard for Evidence-Based**

- CAM modalities permitted within VA must be safe and effective.
  - Evidence = USPTF equivalent rating of B or better
    - At least fair evidence practices improves important health outcomes and benefits outweigh harms. There is a sufficient, strong and consistent evidence of positive effect.
  - Practices without clear evidence of effectiveness may be considered if:
    - There is some evidence of effectiveness
    - They are known to be safe
    - Treatment options are limited
    - Provider believes it may offer benefit to veteran

*Presented by the VA NJ War Related Illness and Injury Study Center (WRIISC)*
Quality of Evidence

- Who is doing the intervention?
  - Practitioner training

- Study Designs
  - Randomized controlled clinical trials - few
  - Uncontrolled trials - the majority
  - Appropriate controls?

- Sample Size

- Rigor
Quality of Evidence cont.

- Who is the patient population?
  - Civilians
    - Majority of research on CAM modalities is conducted in civilians
  - Active Duty Military
    - Mounting research on acupuncture, supplements and others
  - Veterans
    - Yoga for back pain, acupuncture for PTSD
Quality of Evidence cont.

- What are the outcomes?
  - Quality of life
    - Increasing comfort
    - Emphasis on overall wellness
  - Symptoms
    - Minimizing burden, impact
    - Emphasis on treatment
  - Compliance
Compliance

- A critical issue in conventional medicine
  - Chronic conditions requiring complex treatment regimens
- Thus, CAM modalities with highest promise for success will involve simple practices that require fewer hospital visits
- Self-care practices vs. practitioner dependent
Challenge for Research

- High rates of CAM use in veterans and civilians alike
- Plus, high rates of lack of reporting of CAM use to conventional practitioners
- Therefore, CAM research will be best served recognizing that actual use is already integrative
CAM Intervention Improves Compliance to Diabetes Lifestyle

- 20 children with diabetes
- Randomly assigned to either:
  - Treatment Group: Massage therapy
  - Control Group: Relaxation therapy
- Outcomes:
  - Well-being: Parent and Child Mood
  - Biomarkers: Blood glucose
  - Behaviors: Insulin and food intake
Findings: Massage for Diabetes

- **Compliance** to diabetes lifestyle improved
  - Better compliance with insulin
  - Better compliance with food intake
- Blood glucose decreased to normal range
- Reduced parent anxiety & depressed mood
- Reduced child anxiety, fidgetiness, & depressed mood
Chronic Multisymptom Illness

- Nearly 40% of veterans that served in the Persian Gulf War suffer from an array of mood and cognitive symptoms, persistent fatigue and musculoskeletal pain.
CMI: Standard Care

- Of tested treatments, aerobic exercise has been shown to reduce CMI symptom severity.
- Unfortunately, long-term compliance is very poor:
  - 76% of Gulf veterans completing a structured exercise program fail to meet exercise recommendations long-term.
Promise of Eastern Forms of Exercise

- Beginners Mind
- Movements naturally gentle
- Opposite to the basic training mindset
  - “no pain, no gain”
- Yet, similar physical benefits as conventional forms of aerobic exercise
Tai Chi for Heart Failure: Veterans Study

- 40 HF patient completers (37-81 years; mean age=68.8, SD=4.2)
  - tai chi (n = 15), standard exercise sub-group (n = 10), usual care (n = 15)
- Tai Chi classes for 12 weeks (twice week)
- Fatigue
  - Multidimensional Fatigue Symptom Inventory
- Depression
  - Beck Depression Inventory

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Results: Fatigue

Total Fatigue Score (N = 14/group)

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Results: Depression

BDI Scores pre- to post- Intervention (N = 15/group)

(F(1,29)=4.8, p = .036)

BDI at Time 1 range = 0 - 31

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Results: Depression cont.

Subjects with BDI scores > 10 (N = 6/group)

(F(1,11)=14.4, p = .001)

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Qigong

- Simple movements can be used as physical therapy for all ages and physical abilities.
- Health benefits similar to moderate aerobic exercise.
- Improvements observed in:
  - Stress regulation
  - Heart function - blood pressure
  - Lung function - oxygen uptake
Qigong - Efficacy

- Strongest evidence for
  - Fibromyalgia
  - Balance
  - Hypertension

- Preliminary evidence for
  - Chronic Fatigue Syndrome
Impact of Fatigue on Veterans

- Of 532 veterans seen at the NJ WRIISC
  - 48.5% report fatigue for more than 6 months with 50% reductions in activity across two or more of four domains: work, school, home, and social functioning.
  - poorer physical functioning compared with their non-fatigued veteran counterparts.

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New WRIISC study

- Qigong for Gulf War Veterans with Fatigue
  - 12 sessions Qigong or Standard Exercise
  - Outcomes:
    - Compliance: in class and home practice
    - Physical Function: SF-36, 6 min walk
    - Symptoms: fatigue, pain, mood & cognitive
    - Physical Activity: actigraphy
    - Overall well-being

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Final Thoughts

- Challenges to meeting clinical needs of the Veteran population
  - Complex Comorbidities (PTSD/mTBI)
  - Medically unexplained & difficult to treat symptoms (pain, headache, balance)
- Wide use of CAM, limited evidence, even more limited in veterans
- Need for integrative models = opportunity for VA

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Thank you

- Questions…
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References


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References


