

Myths and Facts

about Complementary and Alternative Medicine

The world of complementary and alternative medicine (CAM)¹ may seem mystifying to funders. In this era of health reform – with a renewed emphasis on prevention and wellness – it may be the perfect time for philanthropy to explore its opportunities. Several foundations are doing just that; indeed, a number have included CAM and integrative medicine as a funding priority for quite some time. This article will give a brief background on CAM, some of the myths that surround it, and the potential role of philanthropy.

BACKGROUND

The Consortium of Academic Health Centers for Integrative Medicine (2009) defines integrative medicine as “the practice of medicine that reaffirms the importance of the relationship between practitioner and patient; focuses on the whole person; is informed by evidence; and makes use of all appropriate therapeutic approaches, health care professionals, and disciplines to achieve optimal health and healing.”

When most people think of alternative medicine, they tend to picture treatment modalities such as acupuncture, but it is much more comprehensive than that. Some of the most common methods of nonconventional medicine include nutritional supplementation (vitamins, minerals, herbs) and healing touch (massage, yoga, chiropractic care). Additionally, holistic healing through the mind-body connection is based upon the principle that good mental and emotional health is essential for good physical health; these techniques may include spirituality, meditation, hypnosis, and art and music therapy (NCCAM 2011a).

MYTHS AND FACTS

For some, CAM is perplexing or unimportant; others consider it controversial and actively resist its approaches. They may be uninformed about its benefits, or they may have seemingly conflicting interests in the fields of conventional medicine and pharmacology (Nienstedt 1998). CAM, however, continues to establish a strong foothold in the system of mainstream health care (Ruggie 2005). Furthermore, applying selected, evidence-based CAM practices could improve quality of life and reduce

The benefits being observed with complementary and alternative therapies may yield important lessons for our health care system: the time, attention, and reassuring touch traditionally provided by caring health care providers is in short supply and is a highly important commodity.

– Josephine P. Briggs, Director, National Center for Complementary and Alternative Medicine (NCCAM 2011b)

health care costs (Debas et al. 2006). To help funders understand the world of CAM and how they could have a positive on it, it is useful to examine a few prevalent myths and corresponding facts.

- **MYTH #1: No one is really interested in using CAM.** In fact, there is both established and growing consumer interest in CAM treatments. In a report published by the National Center for Health Statistics, researchers found that almost 4 out of 10 adults utilized a CAM therapy within the previous year (Barnes et al. 2008). The overwhelming majority of patients who apply CAM therapies use them in conjunction with conventional care – rather than foregoing mainstream medical care. As this popularity continues to steadily grow, there is a corresponding greater demand for both diverse services and ease of accessing those services (Eisenberg et al. 1998).
- **MYTH #2: CAM techniques are too new to be considered trustworthy.** In fact, these types of alternate treatments for the purpose of healing and health have existed since antiquity in numerous cultures throughout the world. The history of healing traditions and medical interventions in both Eastern and Western medicine is well beyond the scope of this article. When considering the history of modern medicine within the United States, however, there have always been efforts to integrate alternative practices into conventional settings (Nienstedt 1998). Currently there is a revitalized social movement to explore all types of treatments available, initiated by both patients and providers (Ruggie 2005).

¹ Also referred to as “integrative medicine,” “nonconventional medicine,” or “holistic health care.” Although there are subtle differences in definitions, for the purposes of this article these terms will be used interchangeably. The terms “mainstream” or “conventional” will be used to refer to the dominant form of health care and medicine.

► **MYTH #3: CAM is dangerous and not proven by science.**

In fact, cutting edge research is proving that many CAM therapies are safe and effective. For example, studies have been conducted in which CAM treatments – such as supplementing with glucosamine to reduce the chronic pain of osteoarthritis and utilizing acupuncture to relieve the effects of chemotherapy – have met a significant burden of proof regarding effectiveness and safety (Debas et al. 2006). In the United States, it is true that some alternative approaches are not endorsed or even studied by the U.S. Food and Drug Administration and that some traditional medicines have included substances now found to be dangerous, for example including heavy metals (Byard 2010). All things considered, this complex situation means that consumers can find themselves with a variety of CAM options without knowing how to use them.

► **MYTH #4: CAM is too expensive.** In fact, CAM can be inexpensive, especially for situations in which consumers are able to learn about and conduct their own treatments (Ruggie 2005). CAM modalities, such as guided imagery, relaxation, and nutritional supplementation, can be either a practitioner-based therapy or a patient self-management therapy – taught and replicated in the privacy of one’s own home. But people do need support for self-care. Additionally, prevention and wellness contribute to cost-effectiveness in health care (Ruggie 2005). Those concepts, however, have been underemphasized in comparison to “pharmacological, surgical, and other technological approaches [that] have come to dominate conventional health care,” even though such conventional approaches are expensive and not without side effects (WHCCAMP 2011).

THE ROLE OF PHILANTHROPY

There is a role for philanthropy in the world of CAM. Funding pathways to explore may include:

- **RESEARCH:** According to a *Philanthropy Magazine* article, six strategies for philanthropic funding of medical research include: investigating unconventional hypotheses, fostering collaboration among researchers, accelerating the move from lab to market, funding researchers early in their careers, raising awareness among the general public, and focusing on rare and neglected afflictions (Keiper 2010). These strategies dovetail nicely with funding research for nonconventional medicine. Sufficient research funding for CAM would advance the field in the eyes of the general public, policy-makers, and conventional medicine. Inadequate funding for CAM may hinder building the kind of research infrastructure that exists for mainstream medicine (Ernst 2003).
- **ACCESS:** For many years, health philanthropy has been dedicated to the issue of access to health care; with the continuing and growing interest in CAM, foundations have an opportunity to provide guidance and knowledge to the field

in this arena. Funders could focus on the utility of CAM and the medically underserved: a recent study suggests that underserved populations with depression have been using CAM therapies to manage their symptoms (Bazargan et al. 2008). Funders could also address workforce preparation as demands for CAM treatments grow. There has been a steady increase in the number of medical schools that include CAM therapies in their curricula as providers try to quickly get up to speed to inform patients about CAM modalities, refer them to CAM practitioners, or perform the techniques themselves (Wetzel et al. 2003).

- **PUBLIC EDUCATION:** Funders can become involved by implementing public education and communications campaigns about available CAM treatments and their potential benefits. They may identify and disseminate best practice models of health care entities that are seamlessly integrating CAM into conventional medicine. Similarly, they can publicize research studies that have already been conducted that demonstrate which CAM modalities are both safe and effective.

Recently, Grantmakers In Health conducted a survey of its Funding Partners on activities related to CAM. Responses included:

- “I am most interested in CAM therapies as a source of stress management and healing for the medically indigent. If they are accepted and adopted by our target populations, therapies – such as meditation – promise low- to no-cost, sustainable, and immediate health benefits for people of very limited means.”
- “I think that the greatest need at this point is making CAM credible for people oriented and trained in Western medicine and medical traditions. Until there is a respected body of literature that validates CAM, most funders will be hard-pressed to divert their finite dollars away from mainstream avenues into these opportunities.”
- (Our current CAM grants are focused on) “...expanding CAM modalities into more focus on patient-centered care and health care choices, as well as focusing on wellness programs that offer patients the broadest access to that which helps them attain and maintain their health.”

Funders are often surprised by how many of their staff, board, and trustees have an interest in CAM, whether on a personal or professional level. By engaging in the world of CAM, health philanthropy can continue to build the vision of a health care system that is comprehensive in the approaches it offers to patients to promote healing and whole health.

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