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## **Understanding Complementary and Alternative Medicine**

Decisions about your health care are important--including decisions about whether to use complementary and alternative medicine. If you are interested in learning about complementary and alternative medicine (CAM) options or if you are considering a visit to a CAM provider, you are not alone in America. The most comprehensive and reliable findings to date on Americans' use of CAM were released in May 2004 by the National Center for Complementary and Alternative Medicine (NCCAM) and the National Center for Health Statistics (NCHS, part of the Centers for Disease Control and Prevention). They came from the 2002 edition of the NCHS's National Health Interview Survey (NHIS), an annual study in which tens of thousands of Americans are interviewed about their health- and illness-related experiences. The survey included questions on various types of CAM therapies commonly used in the United States. These included provider-based therapies, such as acupuncture and chiropractic, and other therapies that do not require a provider, such as natural products, special diets, and megavitamin therapy.

In the United States, 62% of adults are using some form of CAM. CAM use spans people of all backgrounds. But, according to the survey, some people are more likely than others to use CAM. Overall, CAM use is greater by: Women than men; People with higher educational levels; People who have been hospitalized in the past year; and Former smokers, compared with current smokers or those who have never smoked. About one-fifth of the people surveyed used natural products.

The U.S. public spent an estimated \$36 billion to \$47 billion on CAM therapies in 1997. Of this amount, between \$12 billion and \$20 billion was paid out-of-pocket for the services of professional CAM health care providers. These fees represented more than the public paid out-of-pocket for all hospitalizations in 1997 and about half of what it paid for all out-of-pocket physician services. Five billion dollars of out-of-pocket spending was on herbal products. (To Obtain the Report: The report's citation is Barnes P, Powell-Griner E, McFann K, Nahin R. CDC Advance Data Report #343. Complementary and alternative medicine use among adults: United States, 2002. May 27, 2004. It is available, along with a press release and graphics, at <http://nccam.nih.gov/news/camsurvey.htm>.)

"These new findings confirm the extent to which Americans have turned to CAM approaches with the hope that they would help treat and prevent disease and enhance quality of life," said Stephen E. Straus, M.D., Director, National Center for Complementary and Alternative Medicine (NCCAM). "The data not only assists us in understanding who is using CAM, what is being used, and why, but also in studying relationships between CAM use and other health characteristics, such as chronic health conditions, insurance coverage, and health behaviors."

There are many terms used to describe approaches to health care that are outside the realm of conventional medicine as practiced in the United States. This fact sheet explains how the NCCAM, a component of the National Institutes of Health (USA), defines some of the key terms used in the fields of CAM. First, however, it defines conventional (mainstream) medicine and discusses who practices in the wide array of conventional medical disciplines. Then, after defining and briefly discussing who practices in the wide variety of CAM disciplines, the official position and recommendations of the *White House Commission on Complementary and Alternative Medicine Policy / FINAL REPORT / March 2002* is presented for the reader's review. This is followed by information about how NCCAM classifies CAM therapies, which is followed by information on what to ask mainstream and CAM practitioners. Finally, this document concludes with a few significant definitions related to CAM fields.

Conventional medicine is a system in which medical doctors (practitioners with degree designations such as M.D.) or doctors of osteopathy (D.O.) and other allied healthcare professionals (such as registered nurses, pharmacists, physical therapists, mental health therapists, and psychologists) treat symptoms and diseases using drugs, radiation, or invasive procedures such as surgery. This system of medicine primarily treats patient symptoms using remedies that attack symptoms and produce effects different from those caused by the disease itself. While an abundance of scientific evidence exists supporting many conventional therapies, theories, methods, and approaches, not everything is proved and we do not as of yet hold all the answers for many key questions regarding how (and even if, in some cases) some things work or what the long-term adverse effects upon human life may be concerning a variety of mainstream beliefs and practices. Other vocabulary for conventional medicine includes allopathy, Western, mainstream, orthodox, biomedicine, allopathic, and regular medicine. Some conventional medical practitioners are also practitioners of CAM.

Complementary and alternative medicine, as defined by NCCAM, is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine. CAM practitioners employ forms of treatment that are used in addition to (complementary) or instead of (alternative) conventional medical approaches. These practices generally are not

considered standard medical approaches. Standard treatments go through (usually very) long and (very, very) expensive bureaucratic processes, en route to approval and/or acceptance by the United States Food and Drug Administration (FDA). Nonetheless, many Eastern medicines have safely and effectively employed CAM approaches for literally thousands of years without FDA approval. CAM is comprised of a wide array of disciplines and options including but not limited to Acupressure, Alexander Technique, Applied Kinesiology, Aromatherapy, Aura Healing, Ayurveda, Bach Flower Remedies, Bioelectromagnetic medicine, Biofeedback, BioWaves Sound, Botanicals, Brain wave therapy, Chelation Therapy, Chinese Herbs, Chiropractic, Colloidal Silver, Colonic Irrigation, Color Therapy, Cranio-Sacral Therapy, Divine Intervention, Edgar Cayce Method, Electrodiagnostics, Energy Therapies, Environmental Medicine, Feldenkrais Method, Feng Shui, Flower Essence Therapy, Foot Detoxification, Guided Imagery, Healing Touch, Herbal Medicine, Homeopathy, Hormone Supplements, Hypnotherapy, Iridology, Kinesiology, Light Resonance, Light/Color Therapy, Macrobiotics, Magnetic Therapy, Massage Therapy, Meditation, Midwifery, Mind-Body Medicine, Movement Education, Myofascial Release, Naturopathic Medicine, Network Chiropractic, Neurofeedback, Neuro-Linguistic Programming, Neuromuscular Therapy, Nutrition Counseling, Nutritional Supplements, Ozone/Oxygen Therapy, Pain Management, Polarity Therapy, Pranic Healing, Psychology, Psychotherapy, Qi Gong, Reflexology, Reiki, Rife Frequency Therapy, Rolfing, Shiatsu, Spiritual Direction, Tai Chi, Therapeutic Touch, Touch for Health, Trager Method, Trigger Point Therapy, Vibrational Beauty, Visualization, Western Herbs, and Yoga. While an abundance of scientific evidence exists supporting many CAM therapies, theories, methods, and approaches, not everything is proved, and we do not as of yet hold all the answers for many key questions regarding how (and even if, in some cases) some things work.

**White House Commission on Complementary and Alternative Medicine Policy**  
**FINAL REPORT**  
**March 2002**

**Chapter 2: Overview of CAM in the United States: Recent History, Current Status, And Prospects for the Future**

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Complementary and alternative medicine, or CAM, can be defined as a group of medical, health care, and healing systems other than those included in mainstream health care in the United States. CAM includes the worldviews, theories, modalities, products, and practices associated with these systems and their use to treat illness and promote health and well-being.

Although heterogeneous, the major CAM systems have many common characteristics, including a focus on individualizing treatments, treating the whole person, promoting self-care and self-healing, and recognizing the spiritual nature of each individual. In addition, many CAM systems have characteristics commonly found in mainstream health care, such as a focus on good nutrition and preventive practices. Unlike mainstream medicine, CAM often lacks or has only limited experimental and clinical study; however, scientific investigation of CAM is beginning to address this knowledge gap. Thus, boundaries between CAM and mainstream medicine, as well as among different CAM systems, are often blurred and are constantly changing. ...

Despite their diversity, there are some common threads that run among many traditional systems of health care as well as systems that have emerged more recently. These similarities include an emphasis on whole systems, the promotion of self-care and the stimulation of self-healing processes, the integration of mind and body, the spiritual nature of illness and healing, and the prevention of illness by enhancing the vital energy, or subtle forces, in the body. ...

**Recent History of CAM in the United States**

The history of CAM in the U.S. is a long, complex story that has been shaped by scientific, economic, and social factors. A detailed rendering of this history is beyond the scope of this report. ...

**The Current Status of CAM in the United States**

Today, use of CAM approaches and therapies is more prevalent in a number of patient populations in the United States, no matter how narrowly or broadly it is defined. Physicians, hospitals, and other conventional health care organizations also are showing a growing interest in CAM. Although such prevalence of use and interest in CAM is not an indication that these practices are effective, it does suggest that those with chronic conditions and the physicians who treat them are looking for more therapeutic options than are widely available in conventional health care settings. Indeed, for some chronic conditions, state-of-the-art conventional therapies have provided only modest gains. For example, according to a number of assessments over the years, expensive mainstream health care approaches to managing chronic lower back pain often have not been very effective. ... This is perhaps why individuals with back pain are some of the most frequent users of CAM practices.

### **Consumer Use of CAM Practices**

Because of the dramatic increase in the prevalence of chronic conditions, the past decade has witnessed acceleration both in consumer interest in and use of CAM practices and/or products. Surveys indicate that those with the most serious and debilitating medical conditions, such as cancer, chronic pain, and HIV, tend to be the most frequent users of CAM practices. CAM usage also appears to be high among certain ethnic populations that have access to their traditional forms of healing. ...

### **Models of Integration**

Over the past few years, a growing number of hospitals, major academic medical centers, managed care companies, and insurance carriers have become interested in integrating some aspects of CAM into their operations. According to the American Hospital Association ... nearly 16 percent of America's community hospitals offered CAM services in 2000, up from about 11 percent in 1999. Furthermore, many major medical centers, particularly comprehensive care cancer centers such as M. D. Anderson in Houston, Memorial Sloan-Kettering Cancer Center and Columbia - Presbyterian Medical Center in New York City, and Duke University in Durham, North Carolina, have begun integrating CAM services into all of their patient care. ...

## **Chapter 4: Education and Training of Health Care Practitioners**

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Since the public utilizes both conventional health care and complementary and alternative medicine (CAM), the Commission believes that this reality should be reflected in the education and training of all health practitioners. Thus, the education and training of conventional health professions should include CAM, and the education and training of CAM practitioners should include conventional health care. The result will be conventional providers who can discuss CAM with their patients and clients, provide guidance on CAM use, collaborate with CAM practitioners, and make referrals to them, as well as CAM practitioners who can communicate and collaborate with conventional providers and make referrals to them. ...

**Recommendation 18: The Department of Health and Human Services should evaluate current barriers to consumer access to safe and effective CAM practices and to qualified practitioners and should develop strategies for removing those barriers in order to increase access and to ensure accountability. ...**

**Recommendation 22: The Federal government should facilitate and support the evaluation and implementation of safe and effective CAM practices to help meet the health care needs of special and vulnerable populations.**

### **Actions**

22.1 The Department of Health and Human Services and other Federal Departments should identify models of health care delivery that include safe and effective CAM practices, evaluate them, and then support those models which are successful for use with special and vulnerable populations, including the chronically and terminally ill. ...

## **Chapter 8: CAM in Wellness and Health Promotion**

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In recent years, people have come to recognize that a healthy lifestyle can promote wellness and prevent illness and disease, allowing them to enjoy a long, high-quality life. To achieve this goal, many people have used various approaches, including complementary and alternative medicine (CAM). ...

### **The Role of Safe and Effective CAM Practices and Products in Promoting Wellness and Helping to Achieve the Nation's Health Promotion and Disease Prevention Goals**

The most recent Federal government report on the health status of the nation, Healthy People 2010, is designed to further two overarching goals: 1) increasing the quality and years of healthy life and 2) eliminating disparities in health. ...

The principles that underlie CAM practices are consistent with the two overarching goals of Healthy People 2010. Several CAM practices have shown promise in addressing some of the specific objectives outlined in Healthy People 2010, such as massage therapy to reduce the limited activity caused by chronic low back pain (Objective 2-11), meditation or biofeedback to reduce high blood pressure (Objectives 12-9 through 12-12), and tai chi to increase physical activity and flexibility (Objectives 22-1 through 22-5). These and other CAM practices and products that have been shown to be safe and effective should be evaluated to determine their potential for helping to achieve the nation's health promotion and disease prevention goals and objectives. ...

**Recommendation 28: Research on the role of CAM in wellness and health promotion, the application of CAM principles and practices, and the role of CAM practitioners in the management of chronic disease should be expanded.**

#### **Actions**

28.1 The Department of Health and Human Services should fund demonstration projects to evaluate the clinical and economic impact of comprehensive health promotion programs that include CAM. These studies should include underserved and special populations.

28.2 The Federal government and private health organizations should evaluate CAM practices and products that are currently being used for wellness and health promotion to determine their effectiveness and applicability to the management of chronic disease. Funding should be provided for demonstration projects in the Centers for Medicare and Medicaid Services, the Department of Veterans Affairs, the Department of Defense, the Health Resources and Services Administration, and other Federal agencies for those CAM practices and products found to have benefit in the management of chronic disease, end of life such as hospice. ...

#### **Chapter 10: Recommendations and Actions**

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#### **COORDINATION OF RESEARCH**

**Recommendation 1: Federal agencies should receive increased funding for clinical, basic, and health services research on CAM. ...**

**Recommendation 2: Congress and the Administration should consider enacting legislative and administrative incentives to stimulate private sector investment in CAM research on products that may not be patentable. ...**

**Recommendation 11: The Federal government should make available accurate, useful, and easily accessible information on CAM practices and products, including information on safety and effectiveness. ...**

**Recommendation 23: Evidence should be developed and disseminated regarding the safety, benefits, and cost-effectiveness of CAM interventions, as well as the optimum models for complementary and integrated care.**

The entire **White House Commission on Complementary and Alternative Medicine Policy / FINAL REPORT / March 2002** (hereinafter "Commission Report") is available on-line (as of June 2006) for free review and download at <http://www.whccamp.hhs.gov/tc.html>.

Integrative medicine, by the way, which was mentioned in the Commission Report, as defined by NCCAM, combines mainstream medical therapies and CAM therapies for which there is some high-quality scientific evidence of safety and effectiveness.

NCCAM classifies CAM therapies into five categories, or domains:

1. **Alternative Medical Systems:** Alternative medical systems are built upon complete systems of theory and practice. Often, these systems have evolved apart from and earlier than the conventional medical approach used in the United States. Examples of alternative medical systems that have developed in Western cultures include homeopathic medicine and naturopathic medicine. Examples of systems that have developed in non-Western cultures include traditional Chinese medicine and Ayurveda.

2. **Mind-Body Interventions:** Mind-body medicine uses a variety of techniques designed to enhance the mind's capacity to affect bodily function and symptoms. Some techniques that were considered CAM in the past have become mainstream (for example, patient support groups and cognitive-behavioral therapy). Other mind-body techniques are still considered CAM, including meditation, prayer, mental healing, and therapies that use creative outlets such as art, music, or dance.

3. **Biologically Based Therapies:** Biologically based therapies in CAM use substances found in nature, such as herbs, foods, and vitamins. Some examples include dietary supplements, gemmotherapy, oligotherapy, herbal products, and the use of other so-called natural but as yet scientifically unproven therapies (for example, using shark cartilage to treat cancer). Some uses of dietary supplements have already been incorporated into conventional medicine. For example, scientists have found that folic acid prevents certain birth defects and that a regimen of vitamins and zinc can slow the progression of an eye disease called age-related macular degeneration (AMD).

4. Manipulative and Body-Based Methods: Manipulative and body-based methods in CAM are based on manipulation and/or movement of one or more parts of the body. Some examples include chiropractic or osteopathic manipulation, and massage.

5. Energy Therapies:

Energy therapies involve the use of energy fields. They are of two types:

Biofield therapies are intended to affect energy fields that purportedly surround and penetrate the human body. Some forms of energy therapy manipulate bioelectromagnetic fields by applying pressure and/or manipulating the body by placing the hands in, or through, these fields. Examples include qi gong, Reiki, and Therapeutic Touch.

Bioelectromagnetic-based therapies may also involve the use of electromagnetic fields, such as pulsed fields, magnetic fields, or alternating-current or direct-current fields. Biofeedback devices, including the L.I.F.E. System, may be used to challenge and interact with bioenergetic forces of the humankind.

NCCAM, by the way, is the (United State's) Federal Government's lead agency for scientific research on CAM. NCCAM is dedicated to exploring complementary and alternative healing practices in the context of rigorous science, training CAM researchers, and disseminating authoritative information to the public and professionals.

The amount of time a health care provider or consultant is willing to spend with you may prove key in your decision making process as to which branch of medicine you want to favor the most. It takes time to get to know another person – and you will need time in order to get to really know and appreciate a health practitioner. It will take you time to get to know the practitioner and how much she or he understands your particular case, needs, and interests. And, certainly, it takes a goodly sum of time for a practitioner to get to know you well enough to properly address your health concerns. Being able to spend time with somebody is very important.

Before deciding on a mainstream or CAM practitioner, you may want to consider telephoning the practitioner's office and asking if it is possible to have a brief consultation in person or by phone with her or him. This will give you a chance to speak with the practitioner directly. The consultation, of course, may or may not involve a charge. Either way, though, the purpose is to learn how open to direct communication with you the provider is, and how available she or he is willing to be to you.

During your consultation with a health care professional in any of the mainstream and/or CAM disciplines, it is always a good idea to inquire about what training or other qualifications the practitioner has. Ask about her or his education, additional training, licenses, and certifications. Will a practitioner with a doctoral degree be necessary or more beneficial to you, considering your personal interests, health and medical conditions? Or would a properly trained and certified individual serve you just as well, and safely and properly meet all of your needs?

Whether you are interested in visiting with an allopathic or CAM practitioner, there is a set of questions you may want to consider asking either (or both). The first visit is very important. Come to your appointment prepared to answer questions about your health history, such as surgeries, injuries, and major illnesses, as well as prescriptions, vitamins, and other supplements you take. Not only will the practitioner wish to gather information from you, but you will want to ask questions, too. Write down ahead of time the questions you want to ask, or take a family member or friend with you to help you remember the questions and answers. Some people bring a tape recorder to record the appointment. (Ask the practitioner for permission to do this in advance.) Here are some questions you may want to ask:

What does the allopathic or CAM approach to my concerns involve? – exactly?

What benefits can I expect from this therapy?

What are the risks associated with this therapy? – especially if the therapy includes pharmaceutical agents!

Do the benefits outweigh the risks for my disease or condition?

What side effects can be expected? – especially if the therapy includes pharmaceutical agents!

Will the therapy interfere with any of my daily activities? – especially if the therapy includes pharmaceutical agents!

How long will I need to undergo treatment? How often will my progress or plan of treatment be assessed?

Will I need to buy any equipment or supplies? prescription drugs or nutraceuticals (nutritional supplements)?

Do you have scientific articles or references about using the treatment for my condition?

Could the therapy interact with other conventional or CAM approaches and/or treatments?

Are there any conditions for which this treatment should not be used? – especially if the therapy includes pharmaceutical agents!

Immediately below, please find some significant CAM-related definitions.

Acupuncture ("AK-yoo-pungk-cher") is a method of healing developed in China at least 2,000 years ago. Today, acupuncture describes a family of procedures involving stimulation of anatomical points on the body by a variety of techniques. American practices of acupuncture incorporate medical traditions from China, Japan, Korea, and other countries. The acupuncture technique that has been most studied scientifically involves penetrating the skin with thin, solid, metallic needles that are manipulated by the hands or by electrical stimulation.

Aromatherapy ("ah-roam-uh-THER-ah-py"): involves the use of essential oils (extracts or essences) from flowers, herbs, and trees to promote health and well-being.

Ayurveda ("ah-yur-VAY-dah") is a CAM alternative medical system that has been practiced primarily in the Indian subcontinent for 5,000 years. Ayurveda includes diet and herbal remedies and emphasizes the use of body, mind, and spirit in disease prevention and treatment.

Chiropractic ("kie-roh-PRAC-tic") is a CAM alternative medical system that proposes that there is a healing power in the body that establishes, maintains, and restores health. It focuses on the relationship between bodily structure (primarily that of the spine) and function, and how that relationship affects the preservation and restoration of health. Chiropractors use manipulative therapy with hands or hand-held instruments as an integral treatment tool.

Dietary supplements. Congress defined the term "dietary supplement" in the Dietary Supplement Health and Education Act (DSHEA) of 1994. A dietary supplement is a product (other than tobacco) taken by mouth that contains a "dietary ingredient" intended to supplement the diet. Dietary ingredients may include vitamins, minerals, herbs or other botanicals, amino acids, and substances such as enzymes, organ tissues, and metabolites. Dietary supplements come in many forms, including extracts, concentrates, tablets, capsules, gel caps, liquids, and powders. They have special requirements for labeling. Under DSHEA, dietary supplements are considered foods, not drugs, and therefore may not require a prescription.

Electromagnetic fields (EMFs, also called electric and magnetic fields) are invisible lines of force that surround all electrical devices. The Earth also produces EMFs; electric fields are produced when there is thunderstorm activity, and magnetic fields are believed to be produced by electric currents flowing at the Earth's core. And the living human organism is surrounded by EMFs.

Homeopathic ("home-ee-oh-PATH-ic") medicine is a CAM alternative medical system. In homeopathic medicine, there is a belief that "like cures like," meaning that small, highly diluted quantities of medicinal substances are given to cure symptoms, when the same substances given at higher or more concentrated doses would actually cause those symptoms.

Massage ("muh-SAHJ") therapists manipulate muscle and connective tissue to enhance function of those tissues and promote relaxation and well-being.

Naturopathic ("nay-chur-o-PATH-ic") medicine, or naturopathy, is a CAM alternative medical system. Naturopathic medicine proposes that there is a healing power in the body that establishes, maintains, and restores health. Practitioners work with the patient with a goal of supporting this power, through treatments such as nutrition and lifestyle counseling, dietary supplements, medicinal plants, exercise, homeopathy, and treatments from traditional Chinese medicine.

Osteopathic ("ahs-tee-oh-PATH-ic") medicine is a form of conventional medicine that, in part, emphasizes diseases arising in the musculoskeletal system. There is an underlying belief that all of the body's systems work together, and disturbances in one system may affect function elsewhere in the body. Some osteopathic physicians practice osteopathic manipulation, a full-body system of hands-on techniques to alleviate pain, restore function, and promote health and well-being.

Qi gong ("chee-GUNG") is a component of traditional Chinese medicine that combines movement, meditation, and regulation of breathing to enhance the flow of qi (an ancient term given to what is believed to be vital energy) in the body, improve blood circulation, and enhance immune function.

Traditional Chinese medicine (TCM) is the current name for an ancient system of health care from China. TCM is based on a concept of balanced qi (pronounced "chee"), or vital energy, that is believed to flow throughout the body. Qi is proposed to regulate a person's spiritual, emotional, mental, and physical balance and to be influenced by the opposing forces of yin (negative energy) and yang (positive energy). Disease is proposed to result from the flow of qi being disrupted and yin and yang becoming imbalanced. Among the components of TCM are herbal and nutritional therapy, restorative physical exercises, meditation, acupuncture, and remedial massage.