

Innovative use of CAM in health care and public health systems

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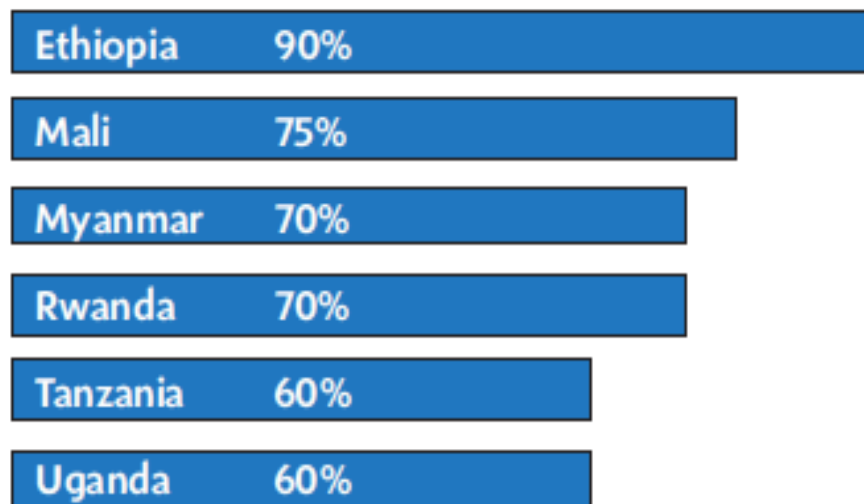
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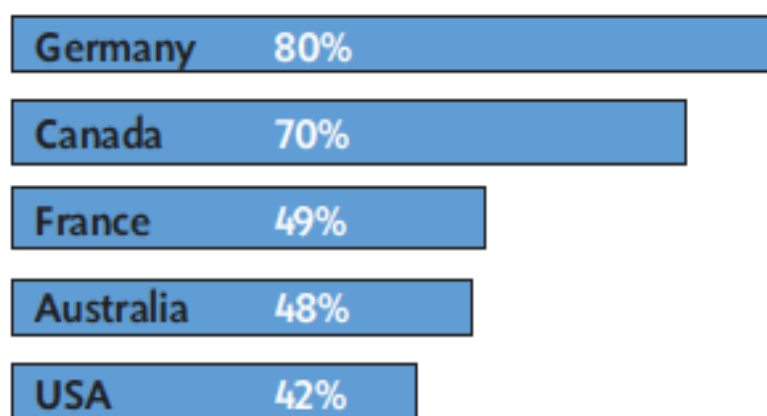
*From uninformed scepticism
or uncritical enthusiasm
towards a well informed and
balanced healthcare systems
perspective...*

Use of traditional medicine (TM) in selected developing countries and use of complementary and alternative medicine (CAM) in selected developed countries

Populations using traditional medicine for primary care



Populations in developed countries who have used complementary and alternative medicine at least once



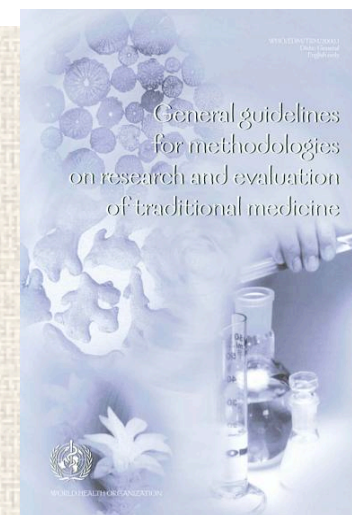
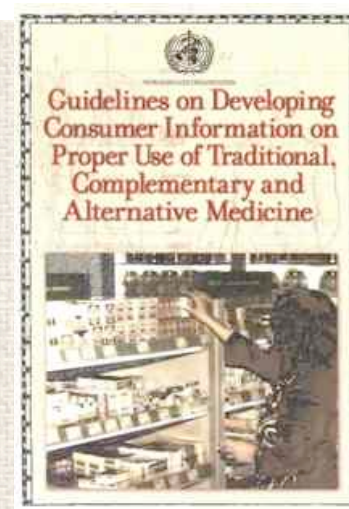
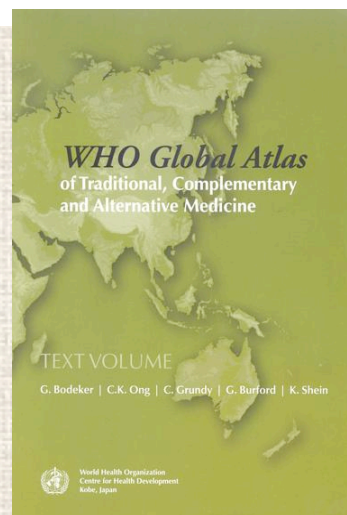
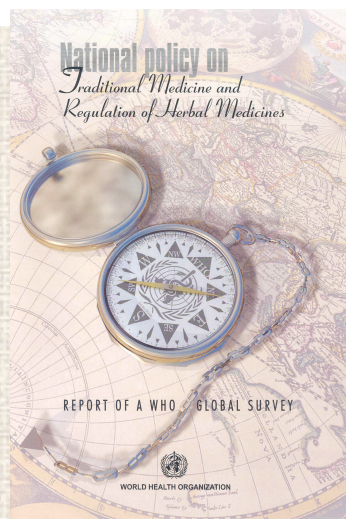
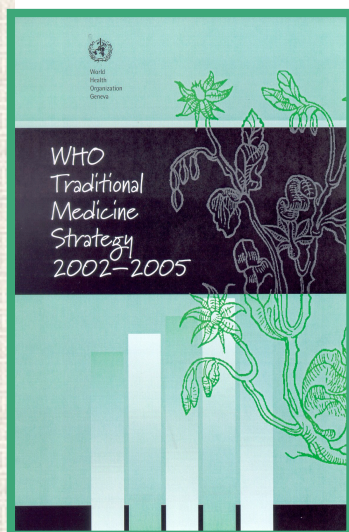


FIFTY-SIXTH WORLD HEALTH ASSEMBLY

Resolution 56.31 Traditional medicine

Noting further that many Member States have taken action to support the proper use of traditional medicine in their health systems,

1. TAKES NOTE of WHO's strategy for traditional medicine, and its four main objectives of framing policy, enhancing safety, efficacy and quality, ensuring access, and promoting rational use;
2. URGES Member States, in accordance with established national legislation and mechanisms:
 - (1) to adapt, adopt and implement, where appropriate, WHO's traditional medicine strategy as a basis for national traditional medicine programmes or work plans;



124th Session

Agenda item 4.5



EB124.R9

26 January 2009

The Executive Board, **Traditional Medicine**

RECOMMENDS to the Sixty-second World Health Assembly the adoption of the following resolution:

The Sixty-second World Health Assembly, recalling the Declaration of Alma-Ata which states, inter alia, that “The people have the right and duty to participate individually and collectively in the planning and implementation of their health care”, and “Primary health care relies, at local and referral levels, on health workers, including physicians, nurses, midwives, auxiliaries and community workers as applicable, as well as traditional practitioners as needed, suitably trained socially and technically to work as a health team and to respond to the expressed health needs of the community”;

Noting that the term “traditional medicine” covers a wide variety of therapies and practices, which may vary greatly from country to country and from region to region;

Recognizing traditional medicine as one of the resources of primary health-care services that could contribute to improved health outcomes, including those in the Millennium Development Goals;

Recognizing that Member States have different domestic legislation, approaches, regulatory responsibilities and delivery models related to primary health care; **Noting the progress that many governments have made to include traditional medicine into their national health systems...**

Evidence-based Healthcare

How to make health policy and management decisions

- ◆ for many patients, the process of **care** is as important as the **outcome**;
- ◆ the process of **care can influence the outcomes of care**, not only with respect to patient satisfaction but also in terms of the patient's state of health and effectiveness of treatment;
- ◆ modern medicine and complementary medicine can be used together in what has been called '**integrative medicine**' ;

Sir JA Muir Gray. Evidence-based Healthcare. How to make health policy and management decisions. Churchill Livingstone. 2001.

Health Technology Assessment & Evidence Based Decision Making

“Hierarchies of evidence should be replaced by accepting - indeed embracing - a diversity of approaches.”

Sir Henry Rawlins, president NICE, UK

Science, Practice and Mythology: A Definition and Examination of the Implications of Scientism in Medicine

For we always think the horizon of what we know is also the horizon of what is true and real, as opposed to what our knowledge allows us to see...

And then the danger is quite real to take science as a surrogate for religion and define our reality from that vantage point... (Harald Walach)

Implications for policy and practice

- ◆ Care & Cure!
- ◆ From the patient perspective – optional integrative models in health care!
- ◆ But is it safe, effective, caring and is it financially justifiable?

To answer this we need to break the dominance of the pharmacological model and acknowledge for example:

- Comparative effectiveness research (CER)
- Health economic research
- Mixed methods research
- Qualitative meta synthesis
- Action Research



Increased telomerase activity and comprehensive lifestyle changes: a pilot study

Dean Ornish, Jue Lin*, Jennifer Daubenmier*, Gerdi Weidner, Elissa Epel, Colleen Kemp, Mark Jesus M Magbanua, Ruth Marlin, Loren Yglecias, Peter R Carroll, Elizabeth H Blackburn

Summary

Background Telomeres are protective DNA–protein complexes at the end of linear chromosomes that promote chromosomal stability. Telomere shortness in human beings is emerging as a prognostic marker of disease risk, progression, and premature mortality in many types of cancer, including breast, prostate, colorectal, bladder, head and neck, lung, and renal cell. Telomere shortening is counteracted by the cellular enzyme telomerase. Lifestyle factors known to promote cancer and cardiovascular disease might also adversely affect telomerase function. However, previous studies have not addressed whether improvements in nutrition and lifestyle are associated with increases in telomerase activity. We aimed to assess whether 3 months of intensive lifestyle changes increased telomerase activity in peripheral blood mononuclear cells (PBMC).

Methods 30 men with biopsy-diagnosed low-risk prostate cancer were asked to make comprehensive lifestyle changes. The primary endpoint was telomerase enzymatic activity per viable cell, measured at baseline and after 3 months. 24 patients had sufficient PBMCs needed for longitudinal analysis. This study is registered on the ClinicalTrials.gov website, number NCT00739791.

Findings PBMC telomerase activity expressed as natural logarithms increased from 2.00 (SD 0.44) to 2.22 (SD 0.49; $p=0.031$). Raw values of telomerase increased from 8.05 (SD 3.50) standard arbitrary units to 10.38 (SD 6.01) standard arbitrary units. The increases in telomerase activity were significantly associated with decreases in low-density lipoprotein (LDL) cholesterol ($r=-0.36$, $p=0.041$) and decreases in psychological distress ($r=-0.35$, $p=0.047$).

Interpretation Comprehensive lifestyle changes significantly increase telomerase activity and consequently telomere maintenance capacity in human immune-system cells. Given this finding and the pilot nature of this study, we report these increases in telomerase activity as a significant association rather than inferring causation. Larger randomised controlled trials are warranted to confirm the findings of this study.

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See [Reflection and Reaction](#)
page 1023

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studies, research based on more comprehensive data, cost-effectiveness studies on CMM for specific diagnostic categories) are indicated.



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On Going Research Projects

David Finer
Fil Lic/Medical
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CritiCAM

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**Anthroposophic
health care system -
ethical, existential
and spiritual
questions**

Lena Oxelmark
Postdoc



**Use and attitudes
towards CAM in
Sweden**

Riitta Hoffren Larsson
PhD student



**Disclosing the
treatment processes of
the Rosen Body
therapy method**

Johanna Hök
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**CAM and Cancer
EU 7fp CAMbrella**

Bwira Kaboru
Postdoc



**The interface between
biomedical and
traditional health
practitioners in STI
and HIV/AIDS care**

Anette Forss
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**Technological
mediations in
oncoscapes**

Fanny Airosa
PhD student



**Towards touch
therapies in
emergency care**

Tobias Sundberg
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**Integrative care
research: informing
health sector reform**

Maria Niemi
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**Towards MBCT in the
Vietnamese health
system**



Costs, EQ-5D index and
self-rated health for patients
with chronic pain and stress
disorders

Costs, EQ-5D index and
self-rated health for patients
with chronic pain and stress
disorders

Sundberg et al, 2012

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Conclusion

Competing
interests

Authors'
contributions

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References

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history

Research article

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Towards a model for integrative medicine in Swedish primary care

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“The two systems of traditional and Western medicine are not only different, but also complementary. We wonder if considering an integrative approach with a diversity of therapeutic options and no particular differentiation between any health care paradigms might be more appropriate...”

Gaboury I, Toupin April K, Verhoef M: A qualitative study on the term CAM: is there a need to reinvent the wheel? BMC Complement Altern M 2012;12:131. O,
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Thank you!