Embracing the unknown
Practitioners of traditional medicine are opening up to ‘complementary’ treatments

By Misti Crane | THE COLUMBUS DISPATCH | February 27, 2011

The path to well-being doesn’t always include prescription medications. Doctors trained in traditional Western ways are increasingly embracing and acknowledging therapies that fall into a category they call “complementary medicine.”

Acupuncture, nasal rinses, nutritional supplements and other approaches that many doctors formerly frowned upon — or at least were skeptical of — are becoming commonplace. A national survey in 2007 found that almost 40 percent of Americans use complementary or alternative medicine, according to the National Institutes of Health.

This month, in its third strategic plan, the National Center for Complementary and Alternative Medicine emphasized the importance of continued research into natural products and mind and body interventions.

The center pays for and conducts studies and has served as a key resource for many doctors, nurses and others looking to diversify the way they care for patients.

Experts say the integration of complementary medicine has been driven in large part by a growing body of research that has helped legitimize treatments formerly seen as alternative and unproven.

They define complementary medicine as treatments that work in concert with traditional medicine, and alternative medicine as treatments pursued instead of traditional medicine.

The other driving force is patients who are seeking less-invasive treatments or more-natural remedies for their ailments.

“I kind of look at the body as having an innate ability to help itself, and if we can help it along, that’s what I prefer rather than using medicines,” said Dr. Doug DiOrio, who practices at Max Sports Medicine on the city’s Northwest Side.

DiOrio, who is trained in integrative medicine, said he believes strongly in complementary approaches and performs acupuncture and myofascial release, a technique in which gentle, sustained pressure is applied to connective tissue.

“Things like irritable-bowel disease, migraine headaches ... in Western medicine, we kind of just throw drugs at them.”

But in many cases, DiOrio said, patients don’t get better that way. Therapies that restore normal body mechanics and blood flow can allow the body to heal naturally, he said.

But he and Dr. Glen Auckerman, director of Ohio State University’s Center for Integrative Medicine, said there are times when drugs and other Western therapies are appropriate.

Auckerman said he has spent a lot of time in recent years focusing on how nutritional needs interact with genetic requirements for better health.
Many of his patients go through elimination diets in which several foods are initially avoided in an attempt to get rid of disease through nutritional changes.

Paula Kobelt, clinical-outcomes manager of pain management and complementary therapies at Grant Medical Center, said she has seen much more acceptance of various complementary approaches in recent years.

They include the hospital’s Healing Touch program, in which practitioners use their hands “to either balance or work in the energy field that surrounds your body.”

Their work resembles gentle massage, but their hands usually are several inches from the patient’s body.

“We always have the best intention in mind for our patients, a very positive intention,” Kobelt said. “Most of the time we start working with them, and within five minutes, they’re asleep.”

At first, skepticism from doctors and nurses was common, but many now refer patients to the program for its benefits in reducing stress and helping with pain, she said.

At least 30 Healing Touch sessions take place each month.

“Our medical staff and our nursing staff is more open-minded to some of these types of therapies as long as they know it is evidence-based. They’ve seen research to show it can work and it is safe.”

Diane Crislip said the best description of how the therapy feels is “soothing.”

The 43-year-old Reynoldsburg woman suffers from pseudotumor cerebri, a painful condition that sends her to the hospital frequently. An excess amount of cerebrospinal fluid accumulates in patients with the disorder.

Dr. Patricia Stafford, a radiologist who went to the University of Arizona to complete a fellowship in integrative medicine, is about to open a Dublin practice focused on wellness, nutrition and preventive medicine.

As a radiologist, she liked to spend a lot of time talking with her patients and came to realize that many had questions and concerns that weren’t being addressed by their primary-care physicians, or that they didn’t feel comfortable discussing with those doctors, Stafford said.

“It’s interesting to me to know that actually just good nutrition and exercise is not something that’s addressed in traditional medicine, not something we learn in medical school,” she said.

Many doctors recommend fruits and vegetables and low-fat diets, but they’re unlikely to discuss how joint pain can be aggravated by certain types of vegetables, including potatoes, or might not consider that a person’s bowel trouble is linked to gluten intolerance, Stafford said.

Supplements including vitamin D and fish oil are more commonly recognized nowadays as beneficial for many patients, but most doctors don’t have the time and aren’t reimbursed for time spent talking about potential nutritional changes or exercise regimens that might be healing, she said.

“I’d love to see more research and good quality research in the United States for many complementary therapies, and I think that’s coming along,” Stafford said.

Doctors also need to remain open about talking to patients about what they’re taking, she said, because research has shown that most patients won’t tell their doctors if they’re using an herbal supplement or some other type of complementary medicine.

“I think there’s benefit to a lot of complementary therapies, and I think we’ll see more and greater benefits. But it has to be done safely.”

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Paula Kobelt, left, and Karen Lynch, registered nurses at Grant Medical Center, administer “healing touch” therapy to patient Diane Crislip in her hospital room.