Innovative use of CAM in health care and public health systems

Associate Professor Torkel Falkenberg

Leader – Research Constellation for Studies of Integrative Health Care, Department of Neurobiology, Care Sciences and Society, Division of Nursing, Karolinska Institutet, Sweden



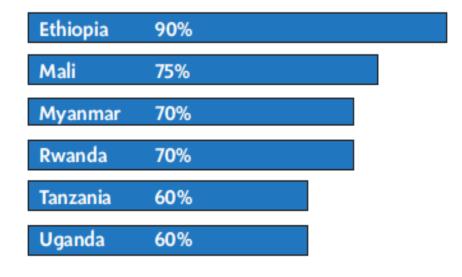


Leader – Research Foundation I C – The Integrative Care Science Center, Sweden

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

Germany	80%	
Canada	70%	
France	49%	
Australia	48%	
USA	42%	



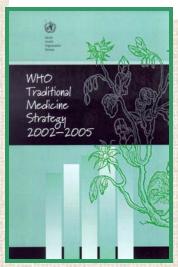
FIFTY-SIXTH WORLD HEALTH ASSEMBLY

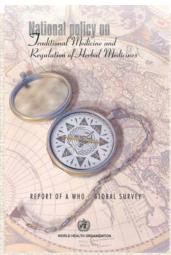
Resolution 56.31

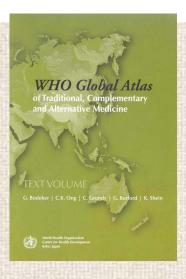
Traditional medicine

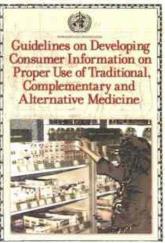
Noting further that many Member States have taken action to support the proper use of traditional medicine in their health systems,

- 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;
- URGES Member States, in accordance with established national legislation and mechanisms:
 - 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

ORIGINAL ARTICLE

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



makes activity and comprehensive lifestyle \mathbb{R}^{\bullet} 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

Displa

Pub

US Natio National

Eur J H

Patic

Koorer Departr

Abstr BACK clinica

OBJE

METH hospit insure

acupu RESU

type o DISCL

level,

(e.g. p focus

Lancet Oncol 2008; 9: 1048-57

Published Online September 16, 2008 DOI:10.1016/S1470-2045(08)70234-1

See Reflection and Reaction page 1023

*These authors contributed

Department of Medicine (Prof D Ornish MD, J Daubenmier PhD),

Department of Biochemistry and Biophysics (J Lin PhD, Prof E H Blackburn PhD), Department of Psychiatry (E Epel PhD), Department of Urology, The Helen Diller Family Comprehensive Cancer Center, School of Medicine (MJM Magbanua PhD, Prof PR Carroll MD), University of California, San Francisco, CA, USA; and Preventive Medicine Research Institute, Sausalito,

CA, USA (Prof D Ornish,

GWeidner PhD, C Kemp MSN,

R Marlin MD, L Yglecias BA)

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 lowdensity 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.

research based on more comprehensive data, cost-enectiveness studies on CAIVI for specific diagnostic dategories) are indicated.

<u>:</u> 💟

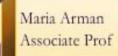
GP),

nd

ailed

On Going Research Projects

David Finer Fil Lic/Medical Journalist



Lena Oxelmark Postdoc



Johanna Hök Postdoc



Anthroposophic health care system ethical, existential and spiritual questions

Use and attitudes towards CAM in Sweden Disclosing the treatment processes of the Rosen Body therapy method

CAM and Cancer EU 7fp CAMbrella

Bwira Kaboru Postdoc



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

Technological mediations in oncoscapes

Anette Forss Postdoc

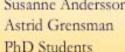


Towards touch therapies in emergency care

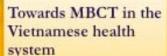
Fanny Airosa

PhD student

Tobias Sundberg Postdoc Susanne Andersson



Integrative care research: informing health sector reform Maria Niemi Postdoc







Home

Articles

Authors

Reviewers

About this journal

My BMC Health Services Research

Top

Abstract

Background

Methods

Results

Discussion

Conclusion

Competing interests

Authors' contributions

Acknowledgements

References

Pre-publication

history

Research article

Highly accessed

Open Access

Towards a model for integrative medicine in Swedish primary care

Tobias Sundberg¹, Jeremy Halpin², Anders Warenmark³ and Torkel Falkenberg¹*

* Corresponding author: Torkel Falkenberg torkel.falkenberg@ki.se

Author Affiliations

- 1 Unit for Studies of Integrative Health Care, Department of Neurobiology, Care Sciences and Society, Division of Nursing, Karolinska Institutet 23300, 141 83 Huddinge, Sweden
- 2 Axelsons Gymnastiska Institut, Gästrikegatan 10-12, 113 82 Stockholm, Sweden
- 3 Rågsveds Husläkare, Kumlagatan 15, 124 65 Bandhagen, Sweden For all author emails, please log on.

BMC Health Services Research 2007, 7:107

doi:10.1186/1472-6963-7-107

The electronic version of this article is the complete one and can be found online at: http://www.biomedcentral.com/1472-6963/7/107

Received: 21 December 2006

Accepted: 10 July 2007 Published: 10 July 2007

© 2007 Sundberg et al; licensee BioMed Central Ltd.

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/2.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.



Welcome to a unique Swedish center about Complementary,
Alternative and Integrative Care.
Read more •

THE CRATIVE CARE SCIENCE OF THE CHARLES OF THE CHAR

Research D

Education ()

Consultancy D

About us



Policy News

EDITORIAL. Torkel Falkenberg: "Join Us!" •

Seeing the human being prevents burnout o

Research guides work in existential care

Research News

Meditation or training may cut frequency of UTIs •

Error exaggerated side effect numbers for tea tree oil o

Loving kindness meditation may offset affective disorder o

CritiCAM

Read more about CritiCAM o

Dialogue

Dialogue Forum o Links o FAO:s o

www.integrativecare.se





Research in Complementary Medicine



Science update

"The two systems of traditional and Western of pr "We wonder if considering an integrative be health care system approach with a of ez diversity of therapeutic options and no in at We particular differentiation between any WI health care paradigms might be more Cy de appropriate..." ne

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







Karolinska Institutet

COMMINENTAL · RESEARCH