

Complementary and Alternative Medicine in Multiple Sclerosis Care

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Complementary and alternative medicine is difficult to define, but generally refers to health practices not presently considered to be part of conventional medicine. Even so, conventional practitioners who work with MS patients must understand these practices because they are widely used by people with MS. In addition, there are some CAM modalities that may be beneficial and some that may be harmful. To assist health care practitioners and patients understand these various potential benefits and risks, the Rocky Mountain MS Center has developed our multi-faceted CAM program. Selected resources made available through our CAM program are described.

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CAM Defined. There are many different definitions of complementary and alternative medicine (CAM). The National Center for Complementary and Alternative Medicine (NCCAM) defines CAM as “a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine — that is, medicine as practiced by holders of MD (medical doctor) or DO (doctor of osteopathy) degrees and their allied health professionals, such as physical therapists, psychologists, and registered nurses.”¹

The problems with this definition are immediately apparent. The term means one thing in the United States, another in Germany, and something completely different in China. Furthermore, in the United States, the definition is a “moving target,” since increasingly alternative medicine therapies are provided in hospitals and alternative medicine courses are offered in medical schools. Finally, it describes what CAM is *not* rather than what it *is*.

Because of these problems with the definition, it is helpful to understand the different categories sometimes used to

describe CAM — this is closer to a useful definition of what CAM is. According to the NCCAM¹, CAM therapies may generally be organized into 5 overlapping categories:

- Biologically based practices use substances found in nature, such as herbs, special diets, or vitamins (in doses outside those used in conventional medicine).
- Energy medicine involves the use of energy fields, such as magnetic fields or biofields (energy fields that some believe surround and penetrate the human body).
- Manipulative and body-based practices are based on manipulation or movement of one or more body parts. This category includes practices such as chiropractic and osteopathic manipulation, massage therapy, reflexology, and rolfing.
- Mind-body medicine uses a variety of techniques designed to enhance the mind’s ability to affect bodily function and symptoms. Examples of CAM therapies within this category include relaxation, hypnosis, visual imagery, meditation, yoga, biofeedback and spirituality.

- Whole 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 US. Examples of whole medical systems include traditional Chinese medicine, which includes acupuncture, and Ayurvedic medicine, one of India's traditional systems of medicine.

A few other details about the terms complementary and alternative medicine are also useful to know. Alternative medicine refers to unconventional treatments that are used instead of conventional medicine. Complementary medicine refers to unconventional treatments used in addition to conventional medicine. People with MS are more likely to use unconventional therapies in a complementary rather than in an alternative manner.^{2,3}

CAM Use Among People With MS.

Among people with MS, it is usually estimated that the the lifetime use of CAM, excluding prayer and exercise, ranges from 50 percent -60 percent.^{2,7} This is similar to CAM use in the general population.⁸ As in the general population, people with MS who use CAM tend to be disproportionately female, better educated, and have a higher income.^{2,4,8} However, although there are superficial similarities between CAM use in the general population and in the MS population, there may be significant difference as well. For example, people with MS may use CAM for different reasons, visit practitioners of CAM (such as acupuncturists, massage therapists, or chiropractors) more often, may use dietary supplements more frequently, and probably use different kinds of supplements than the general population.^{2,8,9}

Given that CAM use is high among people with MS, it is incumbent upon professionals to learn basic information about the subject. It is also important to know about as CAM modalities may produce a placebo effect with little risk or cost, and for some modalities, there is even evidence of a treatment effects beyond the placebo effect. CAM therapies for which there is a possible treatment effect in MS include certain biologically-based approaches, such as omega-3 fatty acid supplementation to modify the disease process, and certain mind-body approaches, such as yoga, for the treatment of fatigue. On the other hand, for some forms of CAM, especially some biologically based approaches, such as the use of unreasonable doses of immune-stimulating dietary supplements, there may be general and even MS-specific risks.

The Rocky Mountain MS Center CAM Program. Despite the widespread use of CAM therapies, and despite the possible benefits and risks of using forms of CAM, there are relatively few information resources available for people with MS or for health care professionals. For this reason, we have developed our Rocky Mountain MS Center Complementary and Alternative Medicine Program. There are many aspects to this program, some primarily for patient education and others designed primarily for professionals.

We are also in the process of implementing a novel one-on-one educational service called the Individualized Integrated Educational Program (IIEP). This service will provide evidenced-based information to people with MS so they can make informed choices about how they might sensibly augment their care by incorporating various CAM modalities.

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A detailed review of possibly helpful and possibly harmful forms of CAM for people with MS is beyond the scope of this brief introduction, but some useful resources are provided below.

Patient Resources

- *IIEP*: For patients with MS who are interested in complementary and alternative medicine, consider referring to our IIEP, a one-on-one educational program. Participants in the program will receive detailed, evidence-based information about CAM and MS in light of their unique clinical history.
- www.ms-cam.org: Includes detailed information about a number of CAM therapies, including over 100 dietary supplements, which are described in view of the special considerations of someone living with MS. Also includes a number of interactive features, including surveys and a forum. More than 30,000 people have registered worldwide.
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Professional Resources

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