



## Complementary & Alternative Medicine For Women

It was bad enough when Jennifer Tilofi\* was diagnosed with rheumatoid arthritis six years ago at age 31; but when, after nearly four years of treatment with some pretty toxic drugs, she felt no better, she knew something had to change.

“My liver enzymes were intermittently elevated (a sign of potential liver problems), and the kidney specialist I saw told me the medicine I was on would eventually harm my kidneys,” she recalled. She knew she couldn’t just stop taking the large doses of Advil, methotrexate and rituxan (Remicade)—if she did, her joints could become permanently damaged. Plus, she needed the medications for pain. So she started looking outside conventional medicine for relief.

That’s how she found Victoria Maizes, MD, executive director of the University of Arizona’s Program in Integrative Medicine. Ms. Tilofi, a physical therapist from Longwood, FL, wrote a “pitiful” e-mail begging the integrative medicine specialist to see her, even though the doctor’s Web site said she didn’t treat out-of-state patients. Dr. Maizes relented, and Ms. Tilofi flew out to meet her.

It took just one visit to know that this doctor was different from any other. For one, even before Ms. Tilofi met with Dr. Maizes, she had to write an essay describing the physical, emotional and spiritual aspects of her life. That essay, as well as the hour-plus initial visit Dr. Maizes conducted, led to a plethora of new treatment options designed to complement, not replace, the Western medicines Ms. Tilofi already took. These included daily doses of the anti-inflammatory supplements fish oil and primrose oil; an anti-inflammatory diet primarily devoid of wheat and sugar and high in vegetables and fish; meditation for stress relief; and craniosacral therapy, in which light touch and massage are used to relieve pain and emotional tension. The insight she gained during her sessions with Dr. Maizes, and a greater understanding of how stress worsens her disease, also led Ms. Tilofi to switch jobs.

Two years later, Ms. Tilofi uses far less medication than before she added the alternative therapies. Instead of monthly Remicade infusions, today she gets one every seven weeks. She’s no longer taking methotrexate, and instead of the 24 grams a day of liquid Advil and the pain pills she took every night, she only takes Advil as needed for pain—rarely.

Ms. Tilofi is part of a growing trend in this country for people to seek care outside the conventional health care system. In 2002, about 62 percent of American adults—including 40 percent of women—used some sort of complementary and alternative medicine (CAM), everything from prayer to deep breathing to chiropractic, yoga, massage and nutritional approaches.<sup>1</sup> Even if you take prayer out of the picture, one out of three people in the

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## COMPLEMENTARY & ALTERNATIVE MEDICINE *continued from page 1*

United States still used some form of CAM.<sup>2</sup> And most paid for it themselves, since much is not covered by insurance. By the late 1990s, Americans were spending an estimated \$270 billion a year out of pocket for CAM therapies, about as much as they spent on conventional medical approaches.<sup>3</sup>

The use of CAM appears to cross not only gender, but also age, racial and ethnic boundaries. An AARP telephone survey of more than 1,500 adults ages 50 and older conducted in late 2006 found that nearly two out of three reported using some form of CAM [See Ages & Stages on page 6].<sup>4</sup> If you include prayer in the definition of CAM, about 60 percent of Asians and Latinos, and 71 percent of African Americans use CAM.<sup>5,6</sup> Even kids are using it. A recently published study found that more than 30 percent of American children 18 and younger take some form of dietary supplements, mostly multivitamins and/or multiminerals.<sup>7</sup>

### Talk to Your Doctor

But here's the hitch: Patients don't tell their health care providers about their use of CAM. In one study of 1,013 parents and caregivers, researchers found that while 12 percent of the children were using some form of CAM, only a third of their parents told the doctor.<sup>8</sup> National studies find the same thing: about 60 percent of those using CAM say they've never discussed it with their doctors.<sup>9</sup>

Given that many of the herbs, supplements and other CAM treatments people turn to could have potentially dangerous interactions with conventional therapies, particularly pharmaceutical medications,

that's a problem. "People who are using CAM need to talk to their health care providers," said Richard Nahin, PhD, the Senior Advisor for Scientific Coordination at the National Center for Complementary and Alternative Medicine (NCCAM). Integrative medicine—the use of both conventional and CAM approaches—doesn't mean parallel health care approaches, he said. "It means doing everything together." This is particularly important since understanding patients' CAM practices could provide valuable insight into their values, lifestyles and health beliefs, all of which are important in providing quality health care.<sup>10</sup>

Patients cite a variety of reasons for not sharing their CAM use with their doctors: The doctor doesn't ask, they don't know if they should bring it up, there isn't enough time during the office visit.<sup>4</sup> Many don't believe it's important that their doctors know; some think it isn't any of their doctor's business, and still others think their doctor wouldn't understand.

In addition, nearly 40 percent of patients with a serious medical condition (cancer, coronary artery disease or diabetes) said they don't tell their doctor because they don't think their physician "would approve."<sup>9</sup>

In fact, studies of doctors find they rarely ask their patients about CAM, even though most suspect patients are using it. One study found that more than half of physicians did not have a positive attitude about CAM when they talked to their patients about it, and most felt uncomfortable during the discussions. Not surprisingly, the more physicians knew about CAM options, the more comfortable they felt discussing it with their patients.<sup>11</sup>

Ironically, notes Dr. Maizes, “Most patients say they want their physician to know about this.”

The first step in starting that conversation is examining your relationship with your doctor. “I have patients come in and say, ‘I love my doctor; but he sure doesn’t know about this,’” she says. “If you love your doctor, then your doctor loves you, and you can say, ‘I’m using this, and here is how it helps me.’” If your doctor criticizes or shames you, she says, it may be time to find a new doctor.

Ms. Tilofi has seen both sides. Her rheumatologist, while “tolerant” of her use of CAM, doesn’t believe it’s the reason behind Ms. Tilofi’s improvement. Rheumatoid arthritis often goes into remission, and her doctor believes that’s what’s happened to Ms. Tilofi. The fact that it coincided with the lifestyle changes Ms. Tilofi made and the supplements she takes is just coincidental, the doctor told her. But Ms. Tilofi’s primary care physician “has been super interested.” She asks questions, delves into the specifics of the treatments and “just gets it,” said Ms. Tilofi.

One of the biggest challenges Theyry Raby, MD, who directs the Center for Integrative Medicine at Northwestern Memorial Hospital in Chicago, faced when she started the center 11 years ago, was suspicion from other doctors. She made a point to involve referring or primary care physicians in patients’ treatment, insisting that all her staff—even nutritionists—write a note to the

referring physician after every patient interaction. Slowly and surely, she said, the center gained credibility. One major reason? “Physicians see patients get better.”

### **Not One or the Other: Understanding Integrative Medicine**

Most people who use CAM don’t choose it instead of conventional medicine. Like Ms. Tilofi, they choose it in addition to conventional medicine in what has come to be known as integrative medicine. Dr. Raby defines integrative medicine as: “A healthy balance between conventional and alternative medicine.” That means if you have an infection, you might receive an antibiotic along with a probiotic to replace the good bacteria the antibiotic wipes out, and herbs or a prescription for yoga to strengthen your immune system. If you break your leg, you get surgery, but you may also receive acupuncture, as well as a prescription for bone-building minerals and vitamins like calcium, magnesium and vitamin D.

Although a relatively new concept, integrative medicine is catching on. Today, the Consortium of Academic Health Centers for Integrative Medicine, devoted to training medical students, residents and physicians in CAM and integrative medicine, boasts 38 members, including such prestigious schools as Albert Einstein College of Medicine and Columbia University in New York, Harvard Medical School, Yale Medical School and the University of Pennsylvania Medical School. All also offer integrative medicine programs for patients.

Many integrate CAM with oncology. For instance, Dr. Maizes sees many women with metastatic breast cancer. She doesn’t try to take the place of the women’s oncologists; instead, she recommends therapies to strengthen her breast cancer patients’ immune systems and help combat the fatigue and other side effects of chemotherapy, as well as reduce risk factors that could stimulate the growth of cancer cells.

For instance, she warns women away from alcohol, which can increase estrogen levels—a potent fuel for cancer cells. She also recommends melatonin, which some studies suggest may increase survival, and mushrooms and the herb astragalus to strengthen the immune system (typically suppressed during chemotherapy) and help prevent infection. If women are receiving the chemotherapy taxol, she adds glutamine or alpha lipoic acid, potent antioxidants that tend to get depleted with taxol therapy. And she teaches her patients mind/body practices to help minimize the stress that comes from coping with a chronic form of cancer: the constant doctor appointments, tests, and, most stressful of all, waiting.

It’s something breast cancer patients of all stages apparently crave. A survey of 105 women diagnosed with breast cancer found that 64 percent used vitamins and minerals, and a third regularly used antioxidants, herbs and health foods. Nearly half (40

**In 2002, about 62 percent of American adults—including 40 percent of women—used some sort of complementary and alternative medicine.**

*continued on page 4*

Western medicine tends to compartmentalize the mind and the body; alternative medicine views them as one and the same.

percent) regularly used prayer and spiritual healing, while 37 percent used support groups and 21 percent used humor or laughter therapy as part of their healing treatment. All are considered CAM.<sup>12</sup>

The use of CAM is so prevalent in cancer patients that in September the American College of Chest Physicians (ACCP) became the first professional oncology organization in the United States to formally provide recommendations on the use of CAM during cancer treatment. While the AACP guidelines note that some herbal remedies may interfere with chemotherapy,

they add that other therapies, such as acupuncture, may help with pain and other symptoms.<sup>13</sup>

Most oncologists, however, feel differently about CAM than their patients. While they agree that CAM can help relieve symptoms and side effects of treatment, they are less likely than their patients to expect that CAM improves immunity or quality of life, cures disease or prolongs life.<sup>14</sup>

### Empowering the Patient

The women Dr. Raby sees usually find her after they become frustrated with what modern medicine has to offer. They tend to be educated, between the ages of 25 and 52, and want to share in a relationship with their physician. Her goal is to empower them to care for themselves instead of dictating to them what they should do for their health. “We do whatever we need to do as long as it is safe,” she said. Many women she sees have chronic conditions like fibromyalgia, rheumatoid arthritis, multiple sclerosis, depression, anxiety, irritable bowel syndrome (IBS) or chronic fatigue syndrome, conditions in which Western medicine can only go so far.

So, for instance, when she treats women with IBS, she focuses on stress, which often triggers symptoms: “What is the core of their stress and what are their coping mechanisms?” Often,

she finds, women internalize stress, which then manifests itself as migraines, reflux, back pain and headaches. Western medicine, she said, tends to compartmentalize the mind and the body; alternative medicine views them as one and the same. “Every aspect of your life has an impact on your body,” she reminds her patients.

But Dr. Raby, a board-certified internist, always keeps one foot firmly planted in Western medicine. That woman with IBS? Dr. Raby will also run tests to make sure she doesn’t have something more serious like ulcerative colitis or Crohn’s disease.

To help women learn to undo the damaging effects of stress on their bodies, she refers them to a clinical psychologist, has them learn guided imagery or self-hypnosis or recommends biofeedback. She may suggest journaling, yoga or tai chi, sometimes just meditation or prayer. “You figure out what is right for them,” she said. “The person in front of me may have the exact same symptoms as the one next to me, but you individualize care.” ✕

### Resources

**American Association of Acupuncture and Oriental Medicine**  
866-455-7999  
[www.aaaonline.org](http://www.aaaonline.org)

**Association for Applied Psychophysiology and Biofeedback**  
800-477-8892  
[www.aapb.org](http://www.aapb.org)

**American Naturopathic Medical Association**  
702-897-7053  
[www.anma.com](http://www.anma.com)

**American Association of Naturopathic Physicians**  
866-538-2267  
[www.naturopathic.org](http://www.naturopathic.org)

**Consortium of Academic Health Centers for Integrative Medicine**  
612-624-9166  
[www.imconsortium.org/cahcm/home.html](http://www.imconsortium.org/cahcm/home.html)

**National Center for Complementary and Alternative Medicine**  
888-644-6226  
[www.nccam.nih.gov](http://www.nccam.nih.gov)

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## Who's Who in Complementary & Alternative Medicine

Practitioner	Training	Licensure required	Services provided
Integrative medicine specialist	Typically an MD or DO* (doctor of osteopathy). Completed conventional medical training including four years of medical school followed by internship and residency (usually in family practice, internal medicine, OB/GYN, or pediatrics). May have completed a fellowship in integrative medicine.	Medical license from the state. Should be board certified in their specialty (internal medicine, OB/GYN, family practice, etc.).	A combination of conventional and alternative medicine.
Naturopathic doctor (ND)	Traditional four-year undergraduate school followed by training at one of the five naturopathic schools accredited by the Council on Naturopathic Medical Education: Bastyr University; Canadian College of Naturopathic Medicine; the National College of Naturopathic Medicine; the Southwest College of Naturopathic Physicians; and the University of Bridgeport College of Naturopathic Medicine. Additionally, Boucher Institute of Naturopathic Medicine in British Columbia has candidacy status.	Fewer than 20 states license naturopaths. Still, look for an ND who passed the Naturopathic Physicians Licensing Examination, or NPLEX, the standard examination used by all licensing jurisdictions for naturopathic physicians in North America.	Naturopaths are trained in a variety of areas, including homeopathy, herbal therapy, bodywork, chiropractic, aromatherapy and acupuncture. They bring a holistic approach to health. A naturopath's practice is limited by "scope of practice" rules in states that license them. Some, like Oregon, allow NDs to prescribe certain drugs and give immunizations; others restrict their prescribing ability.
Traditional Chinese Medicine (TCM)	Traditional four-year college, then another three years of intensive training at an accredited TCM program. Look for practitioners certified by the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) in acupuncture, Chinese herbology, and/or Oriental bodywork therapy, which ensures they have met strict training and testing criteria.	Most states require a license to practice acupuncture, but training requirements are generally minimal. While some states have separate boards of acupuncture or Oriental medicine, others oversee these specialties via the board of medical examiners or even commerce or health departments.	Herbal therapies, acupuncture and Oriental bodywork (tai chi, etc.).
Chiropractor	Traditional four-year undergraduate and then trained at one of 14 U.S. chiropractic colleges accredited by the Council on Chiropractic Education.	Must be licensed in all states and territories and take and pass the National Board of Chiropractic Examiners' standard national certification examination.	Provides spinal manipulation for musculoskeletal injuries.
Massage therapist	Should have graduated from a program accredited by the Commission on Massage Therapy Accreditation or from a school that is a member of the American Massage Therapy Association.	Most states license massage therapists, requiring at least 500 hours of in-class, supervised training. Massage therapists must also pass the National Certification Board of Therapeutic Massage and Bodywork certification exam; maintain continuing education credits; and hold malpractice insurance.	Various types of massage and reflexology. Some massage therapists also specialize in aromatherapy.
Homeopathic physician	Training varies significantly. Look for an MD or DO who is also board-certified through the American Board of Homeotherapeutics or for an ND.	Just a handful of states license homeopaths.	Mixes and prescribes homeopathic remedies, most of which are considered over-the-counter drugs. Homeopathy is based on the theory that "like treats like," so homeopathic remedies contain minute amounts—often just a molecule or two—of a compound related to the medical condition itself.
Biofeedback specialist	Varies. Look for those certified by the Biofeedback Certification Institute of America in their specialty area.	Some states require practitioners to be licensed psychologists, nurses or other medical professionals. If practitioners are treating medical or mental conditions, they must be licensed as health care providers.	Teach methods of learning to consciously control unconscious physical processes such as slowing brain waves, blood pressure, etc.
Hypnotherapist	Varies. Find one licensed through the American Society of Clinical Hypnosis or the Society for Clinical and Experimental Hypnosis.	Many physicians are trained in hypnosis. If hypnotherapists are treating a medical or mental condition, they must be licensed as health care providers.	Train you in the use of hypnosis to help manage pain, anxiety and other medical conditions.

\*An osteopath receives the same training as an MD. The main difference is that osteopaths attend a college of osteopathic medicine and receive extra training in the musculoskeletal system (nerves, muscles and bones) so they can better understand how an injury or illness in one part of the body affects other parts. They also receive variable amounts of training in the manual manipulation of the musculoskeletal system.

If you think acupuncture, music therapy and yoga are only for twenty-somethings, think again. A 2006 survey of 1,559 people aged 50 and older conducted by the AARP and the National Center for Complementary and Alternative Medicine (NCCAM) found 63 percent of respondents had used one or more CAM therapies.<sup>16</sup>

**T**he top choices? Massage therapy, chiropractic, spinal manipulation or other bodywork (used by 45 percent of respondents), closely followed by herbal products or dietary supplements (42 percent of respondents). The study also found that most people chose CAM to treat specific conditions or maintain wellness, and 45 percent chose it to supplement conventional medicine.

Other studies analyzing data from the 2002 National Health Interview Survey on 10,572 respondents with cardiovascular disease and 2,474 with diabetes found 36 percent of those with heart disease and 38 percent of those with diabetes had used CAM (excluding prayer) in the previous 12 months.<sup>17,18</sup>

There's a good reason older people turn to alternative therapies and integrative medicine: Studies suggest such approaches can help with many medical conditions associated with aging.

For instance, taking a daily calcium/magnesium/vitamin D supplement can help slow bone loss, preventing falls. Prevent falls as you age, and you prevent one of the major reasons behind disability in the elderly.<sup>19</sup>

The herb saw palmetto has a pretty good track record in improving symptoms of enlarged prostate, with an analysis of 21 clinical trials involving more than 3,000 men finding it worked about as well as the most widely prescribed medication, finasteride (Proscar).<sup>20</sup>

Meanwhile, studies investigating the use of vitamin C hint that it may significantly reduce the risk of Alzheimer's in healthy people, likely due to its antioxidant effects.<sup>21</sup> And an analysis of more than a dozen studies on acupuncture finds it works as well if not better than conventional medications at relieving the pain and disability of osteoarthritis—with a far lower likelihood of side effects.<sup>22</sup>

Plus, yoga and tai chi have been linked in studies to everything from reducing blood pressure, strengthening bone and reducing the risk of falls to preventing shingles and improving pain and disability from arthritis.<sup>23,24,25</sup>

However, people 50 and older are just as likely as younger people to keep their CAM use from their doctors. This is particularly dangerous in older adults, who are more likely to be taking prescription medications that could interact with herbal remedies or supplements, or vice versa. For instance, vitamin E, garlic supplements and ginkgo biloba have anticoagulant, or blood thinning, properties; if you're also taking daily aspirin or warfarin (Coumadin), you run the risk of excessive bleeding.

So speak up. Tell your doctor what you're taking, how often and why. Any good doctor/patient relationship should begin and end with good communication. ✕

### References

- 1 Upchurch DM, Chyu L, Greendale GA, et al. Complementary and alternative medicine use among American women: findings from The National Health Interview Survey, 2002. *J Women's Health (Larchmt)*. Jan-Feb 2007;16(1):102-113.
- 2 Barnes PM, Powell-Griner E, McFann K, Nahin RL. Complementary and alternative medicine use among adults: United States, 2002. *Adv Data*. May 27 2004(343):1-19.
- 3 Eisenberg DM, Davis RB, Ettner SL, et al. Trends in alternative medicine use in the United States, 1990-1997: Results of a follow-up national survey. *JAMA*. 1998;280:1569.
- 4 AARP and NCCAM. *Complementary and Alternative Medicine: What People 50 and Older Are Using and Discussing with Their Physicians*. AARP. Washington, DC. 2007.
- 5 Barnes PM, Powell-Griner E, McFann K, Nahin RL. Complementary and alternative medicine use among adults: United States, 2002. *Adv Data*. May 27, 2004(343):1-19.
- 6 Tindle HA, Davis RB, Phillips RS, Eisenberg DM. Trends in use of complementary and alternative medicine by US adults: 1997-2002. *Altern Ther Health Med*. Jan-Feb 2005;11(1):42-49.
- 7 Picciano, MF et al., *Arch Pediatr Adolesc Med*. 2007; 161(10):978-985.
- 8 Sawani-Sikand A, Schubiner H, Thomas RL. Use of complementary/alternative therapies among children in primary care pediatrics. *Ambul Pediatr*. Mar-Apr 2002;2(2):99-103.
- 9 Eisenberg DM, Kessler RC, Van Rompay MI, et al. Perceptions about complementary therapies relative to conventional therapies among adults who use both: results from a national survey. *Ann Intern Med*. Sep 4, 2001;135(5):344-351.
- 10 Pappas S, Periman A. Complementary and alternative medicine. The importance of doctor-patient communication. *Med Clin North Am*. Jan 2002;86(1):1-10.
- 11 Corbin Winslow L, Shapiro H. Physicians Want Education About Complementary and Alternative Medicine to Enhance Communication With Their Patients. *Arch Intern Med*. May 27, 2002;162(10):1176-1181.
- 12 Lengacher CA, Bennett MP, Kip KE, et al. Frequency of use of complementary and alternative medicine in women with breast cancer. *Oncol Nurs Forum*. Nov-Dec 2002;29(10):1445-1452.
- 13 Cassileth BR, Deng GE, Gomez JE, Johnstone PAS, Kumar N, Vickers AJ. Complementary Therapies and Integrative Oncology in Lung Cancer: ACCP Evidence-Based Clinical Practice Guidelines (2nd Edition). *Chest*. 2007;132(3-suppl):340S-354.

## Commonly Asked Questions & Answers about Complementary & Alternative Medicine

**Q** How safe and effective are herbal remedies and nutritional supplements? Is there any government oversight?

**A** When it comes to herbal remedies and nutritional supplements, it is very much a “buyer beware” market. Unlike prescription or over-the-counter drugs, manufacturers of nutritional supplements and herbal remedies do not have to prove their products are effective. They also do not have to prove their products are safe. The U.S. Food and Drug Administration (FDA) can only take action against a manufacturer if it finds a supplement is unsafe once the product is on the market.

Soon, however, the FDA will have oversight over manufacturing processes for supplements to ensure they are produced in a quality manner, do not contain contaminants or impurities and are accurately labeled. In addition, by the end of the year, the supplement industry will be required to report all serious dietary supplement-related adverse events to the FDA, something it hasn't had to do previously.

—Pamela Peeke, MD  
NWHRC Medical Advisor  
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Baltimore, MD

**Q** How do I know if an alternative medicine recommendation will work?

**A** We are only now beginning to build a record of scientific evidence for many CAM modalities. But it is often difficult to test CAM therapies using the medical gold standard of a randomized, double-blind, placebo-controlled trial. It's hard to standardize the ingredients being tested, to come up with adequate “sham” techniques and to isolate just one treatment since CAM therapies are often provided simultaneously to complement and balance each other. However, many of these therapies have been used for thousands of years and are much less likely to cause harm when used as directed than many prescription products.

—Victoria Maizes, MD  
Executive Director  
University of Arizona  
Program in Integrative Medicine  
Tucson, AZ

**Q** I'm pregnant. Can I take nutritional supplements and herbal remedies while I'm pregnant or breastfeeding?

**A** Yes, there are a number of nutritional supplements and herbal remedies a pregnant or nursing mother may take. The most common is a well-rounded prenatal vitamin containing folic acid and other B vitamins, important in reducing the risk of neural tube defects in the fetus, such as spina bifida. The second thing I recommend is a mercury-free source of fish oil to provide DHA, an omega-3 fatty acid. DHA is involved in the brain and eye development of the fetus. While there are other supplements and herbs that a pregnant or lactating woman can safely take, it is best to work with an experienced health care provider who is familiar with herbs and other supplements and their safety during this stage of life.

—Barbara Lawson Boston, NP, IBCLC,  
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- 14 Richardson MA, Masse LC, Nanny K, Sanders C. Discrepant views of oncologists and cancer patients on complementary/alternative medicine. *Support Care Cancer*. Nov 2004;12(11):797-804.
- 15 Eisenberg DM, Cohen MH, Hrbek A, Grayzel J, Van Rompay MI, Cooper RA. Credentialing complementary and alternative medical providers. *Ann Intern Med*. Dec 17, 2002;137(12):965-73.
- 16 AARP, NCCAM. *Complementary and Alternative Medicine: What People 50 and Older Are Using and Discussing with Their Physicians*. AARP. Washington, DC. 2007.
- 17 Yeh GY, Davis RB, Phillips RS. Use of complementary therapies in patients with cardiovascular disease. *Am J Cardiol*. Sep 1, 2006;98(5):673-680.
- 18 Garrow D, Egede LE. National patterns and correlates of complementary and alternative medicine use in adults with diabetes. *J Altern Complement Med*. Nov 2006;12(9):895-902.
- 19 Rubenstein LZ, Josephson KR. Falls and their prevention in elderly people: what does the evidence show? *Med Clin North Am*. Sep 2006;90(5):807-824.
- 20 Wilt T, Ishani A, Mac Donald R. *Serenoa repens* for benign prostatic hyperplasia. *Cochrane Database Syst Rev*. 2002(3):CD001423.
- 21 Zandi PP, Anthony JC, Khachaturian AS, et al. Reduced Risk of Alzheimer Disease in Users of Antioxidant Vitamin Supplements: The Cache County Study. *Arch Neurol*. 2004;61(1):82-88.
- 22 Ernst E. Complementary or alternative therapies for osteoarthritis. *Nat Clin Pract Rheumatol*. Feb 2006;2(2):74-80.
- 23 Kuramoto AM. Therapeutic benefits of Tai Chi exercise: research review. *WMJ*. Oct 2006;105(7):42-6.
- 24 Luskin FM, Newell KA, Griffith M, et al. A review of mind/body therapies in the treatment of musculoskeletal disorders with implications for the elderly. *Altern Ther Health Med*. Mar 2000;6(2):46-56.
- 25 Luskin FM, Newell KA, Griffith M, et al. A review of mind-body therapies in the treatment of cardiovascular disease. Part 1: Implications for the elderly. *Altern Ther Health Med*. May 1998;4(3):46-61.
- 26 Barker SB, Pandurangi AK, Best AM. Effects of animal-assisted therapy on patients' anxiety, fear, and depression before ECT. *ECT*. Mar 2003;19(1):38-44.
- 27 Cooke M, Chaboyer W, Hiratos MA. Music and its effect on anxiety in short waiting periods: a critical appraisal. *Clin Nurs*. Feb 2005;14(2):145-55.
- 28 Hernandez-Ruiz E. Effect of music therapy on the anxiety levels and sleep patterns of abused women in shelters. *J Music Ther*. Summer 2005;42(2):140-158.
- 29 Pawlow LA, Jones GE. The impact of abbreviated progressive muscle relaxation on salivary cortisol and salivary immunoglobulin A (sIgA). *Appl Psychophysiol Biofeedback*. Dec 2005;30(4):375-387.
- 30 Yoo HJ, Ahn SH, Kim SB, Kim WK, Han OS. Efficacy of progressive muscle relaxation training and guided imagery in reducing chemotherapy side effects in patients with breast cancer and in improving their quality of life. *Support Care Cancer*. Oct 2005;13(10)
- 31 Deshmukh VD. Neuroscience of meditation. *Scientific World Journal*. 2006;6:2239-2253.

## Six Tips to Manage Stress

Personally, I love the idea of integrative medicine. To me, integrative medicine means doing what I've always done in my practice: Treating the whole patient. That's why I work with my patients to make lifestyle changes like optimizing diet and exercise to lower their cholesterol levels and high blood pressure before turning to pills.

It's also why I question women about the stress in their lives when they come to see me for things like headaches, back pain, constipation and other digestive problems, insomnia and fatigue. And it's why I take the time to show them that it's often not the stress itself that's making them sick, but how they manage it. Rather than writing a prescription for an anti-anxiety medication or a sleeping pill, I propose some of my favorite alternative methods of managing and relieving stress:

**1. Sip on herbal tea.** The use of teas and tinctures to treat health conditions dates back thousands of years. I recommend calming teas like valerian or chamomile. Brew the tea, sit in a quiet, cozy spot, and just sip as you listen to the silence and feel your body unknot.

**2. Practice deep breathing.** You probably don't worry much about how you're breathing (as long as you're still breathing!), but too many women (and men) are shallow breathers. We don't take the kind of deep, diaphragmatic breaths needed to trigger the relaxation response. So the next time you feel your shoulders tightening and your stomach clenching, stop whatever you're doing and just take a few slow, deep breaths.

**3. Get a pet.** Numerous studies find that playing, snuggling, even petting a dog or cat reduces levels of anxiety.

Bet you never thought of your golden retriever as an alternative therapy before!<sup>26</sup>

**4. Listen to some soft music.** There's a reason they play New Age music in spas: the soothing sounds of water falling or a gently strummed guitar enables relaxation. If you're not into New Age, how about classical? In one study of 143 women undergoing breast biopsies, women who listened to classical music during the procedure reduced their levels of anxiety as much as women who took a prescription antianxiety medication.<sup>27</sup> Another study found that music therapy reduced anxiety and improved sleep in a group of women at a domestic abuse shelter.<sup>28</sup>

**5. Relax your muscles—one at a time.** This is called progressive muscle relaxation. Start at your toes and tense and relax each muscle, systematically moving up your body. Many studies show this simple relaxation works wonders in reducing anxiety and stress hormones.<sup>29</sup> One even found that women with breast cancer who practiced progressive muscle relaxation were significantly less anxious, depressed and hostile than women who didn't and

had considerably less nausea and vomiting both before and after their chemotherapy.<sup>30</sup>

**6. Meditate.** Meditation is not about chanting; it is about being in the moment, which is much more difficult to do than it sounds. Or, as one author put it, "The art of being serene and alert in the present moment, instead of constantly struggling to change or to become."<sup>31</sup> I recommend you take a class or join a meditation group to learn, and then practice, practice, practice.

And remember the cornerstones of complementary and alternative medicine (CAM) and using it successfully:

- CAM acknowledges the psychological, environmental and social contributions to disease.
- CAM actively involves the patient in the treatment process.
- CAM emphasizes preventive medicine, alternative therapies and a lifestyle that lessens the risks for developing disease. Don't forget, CAM takes time to work, often more time than pharmaceutical remedies. Don't get impatient and exceed recommended treatments or dosages.

And, most important, talk to your health care professional about any alternative treatments.✕



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