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ELDER CARE

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Integrative Medicine in Elder Care: Mind-Body and Energy Medicine

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What is Integrative Medicine?

The National Center of Complementary and Alternative Medicine (NCCAM) defines Complementary and Alternative Medicine (CAM) as the following: a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine¹ and are not commonly taught in US medical schools. NCCAM groups CAM into four domains: mind-body medicine, biologically based practices, manipulative and body-based practices, and energy medicine.¹

A major criticism from the scientific community is the lack of controlled research on CAM therapies and practices. Integrative medicine overcomes this by combining treatments from conventional medicine and CAM for which there is some high-quality evidence of safety and effectiveness.¹ This first fact sheet will focus on Mind-Body and Energy Therapies that have evidence of benefit in elderly populations.

Do Elders Use CAM?

Recent studies show that between 30% and 58% of older adults use CAM,² and CAM use is continuing to rise.³ A significant concern is, of elders who use CAM, 58% do not discuss these therapies with their medical doctor.³ Further, only 35% of reported CAM use was recorded in the patient chart.² Many people using CAM assume that "natural" equals "benign", but a number of CAM practices have significant interactions and contraindications with conventional medical treatment. It is essential that all vitamins, minerals, botanicals, and practices be reported and recorded to assure patient safety.

Mind-Body Medicine

Mind-body medicine uses a variety of techniques designed to enhance the mind's capacity to affect bodily function and symptoms. Some techniques that were considered CAM in the past are today considered main stream (e.g., patient support groups and cognitive-behavioral therapy). Other mind-body techniques are still considered CAM, including meditation, prayer, mental healing, and therapies that use creative outlets such as art, music, or dance.¹ When used with standard medical practice, these therapies have few negative effects. Caution should be taken to assure that these are used as complementary rather than alternative practices.

Meditation has been employed successfully to enhance well being in elderly populations; a review of 25 years of studies showed that meditation-relaxation is easily taught to older subjects. In fact, one study showed that demented individuals were able to remain in a relaxed state and tolerate meditative experiences longer than those who were cognitively intact.⁴ Generally, meditation reduces anxiety, increases self-esteem, decreases agitated behavior and increases relaxation, even in elders with advanced dementia.⁴ The NIH recommends meditation and relaxation as one of the first interventions to treating hypertension.⁴ Mindfulness meditation taught to community dwelling elders with chronic back pain improved their acceptance of pain and their physical functioning.⁵ Further, meditation and stress reduction may confer lasting benefit: long-term follow-up (average of 7.6 years) of 202 persons aged 55 and above who participated in studies involving transcendental meditation

TIPS FOR INTEGRATIVE MEDICINE

- Remember that the goal for all patients is to be healthy and pain free while participating in the daily activities of their choice.
- Be open minded regarding safe alternative and complementary medicine techniques which may help patients to realize their health goals.
- Remember to ask about complementary and alternative medicine practices in your elder population, as you would ask about over the counter and herbal medication.

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(TM) showed that all-cause mortality was decreased by 23%, cardiovascular mortality by 30%, and cancer mortality by 49% as compared with control subjects in the same studies.⁶ All studies demonstrated that the aged are fully capable of understanding, learning, and practicing various meditative techniques.⁴

Energy Medicine

Energy therapies involve the use of energy fields. They are of two general types, as explained below.

- Bioelectromagnetic-based therapies involve the unconventional use of electromagnetic fields, such as pulsed fields, magnetic fields, or alternating-current or direct-current fields.¹ Some of these are considered mainstream, such as TENS units for pain treatment.
- Biofield therapies are intended to affect energy fields that purportedly surround and penetrate the human body. The existence of such fields has not yet been scientifically proven.¹ Examples include ai gong, tai chi, reiki and Therapeutic Touch. While the existence of biofields is open to debate, some of the therapies have been found useful. Again, these should be undertaken as complementary rather than alternative practices.

Tai Chi has existed as a systematic exercise and martial art in China for more than 2000 years. It consists of slow, circular movements that require muscles to remain relaxed while

making a sustained, even, and continuous effort.⁷ It can be considered both a body-based and an energy-based practice, as it is purported to move *chi*, the life-energy. Tai Chi Chih is a standardized and manualized series of exercises based on Tai Chi that has been adapted for Western elders⁸ and is easily taught and well tolerated. The Cochrane Review has determined that tai chi is likely effective in preventing falls in the elderly.⁹ It is more effective than brisk walking in improving balance, flexibility, and lower extremity strength;¹⁰ it decreases the likelihood of falls at 6 months following exercise program;¹¹ and improves static balance.¹² Further, it has been shown to increase physical functioning (as measured by the SF-36), increase reported feelings of relaxation, increase energy, and decrease fatigue.⁸ Besides having a beneficial impact on balance and falls, tai chi has been found to acutely decrease sympathetic nervous system activity,¹³ and stimulate varicella-zoster virus specific cell-mediated immunity.⁸

Conclusion

When used as complementary treatments, mind-body and energy therapies may confer benefit in the elderly. As with all modalities, it is important to evaluate each patient individually for the feasibility of treatment tolerability and effectiveness.



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