



Alternative Medicine that Describes Medical Treatments that are used Instead of Traditional (Mainstream) Therapies. Woman Uses Alternative Medicine (Ayurveda) More than Man

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Abstract

Such “alternative” modalities are unproven or were studied and found worthless. These can be harmful Alternative & Integrative Medicine focused on the areas such as Ayurveda medicine, homeopathy, osteopathy, chiropractic, aromatherapy and anthroposophy medicine, traditional Chinese medicine, traditional Tibetan medicine, traditional-medicine, complementary-therapy. An even greater proportion of cancer patients use “complementary” therapies along with mainstream cancer treatment. Most are helpful adjunctive approaches that control symptoms and enhance quality of life. Evidence regarding the efficacy and safety of complementary/alternative medicine (CAM) is reviewed, and implications for oncologists are discussed. To encourage open communication of CAM use by patients, oncologists should be knowledgeable about the most popular remedies and know where to find reliable information for themselves and for their patients. Most research to date has involved a cross-sectional snapshot of CAM use rather than an exploration into the longitudinal, nonlinear treatment trajectories that cancer patients develop. Our aim is to explore and describe different treatment and decision-making pathways that individuals develop after receipt of a diagnosis of either breast, colorectal, or prostate cancer.

Keywords: Complementary and alternative medicine; Ayurveda medicine; Homeopathy; Osteopathy; Chiropractic; Aromatherapy and anthroposophy medicine; Traditional Chinese medicine; Traditional Tibetan medicine; Traditional-medicine; Complementary-therapy

Abbreviations: CAM: Complementary and Alternative Medicine; TCM: Traditional Chinese Medicine

Introduction

Public health is commonly defined as ‘the science and art of preventing disease, prolonging life and promoting

health through the organized efforts of society. It centers on promoting and protecting the health of communities, individual citizens and the wider population. Epidemiology with its focus on exploring and identifying the determinants of ill-health and why and how some stay healthy, and by extension health inequalities, is a core contributory discipline generating on influences, causes and potential ways to break the causal chain, thus enhancing health. In a European context where a cross-country average of 3% is spent on prevention one must question why a greater proportion of healthcare expenditure is not targeted and invested thus, intervening with whom or whatever is 'pushing them into the river'. The difficult of funding and policy action is compounded by population ageing and increased survival, accompanied by an increasing burden of chronic illness and associated co-morbidity [1].

Materials and Methods

Alternative medicine is a conventional method of healing the disease by examining the symptoms without collecting clinical evidences. The first case study, undertaken in the modality of Traditional Chinese Medicine (TCM) acupuncture, provides insight into the issue of whole person and whole therapy effects and the question of what might be appropriate outcomes in evaluating a CAM modality, giving primacy to the user/patient's perspective. The second case undertaken in the modality of shiatsu, a body-based life-energy therapy developed in Japan and influenced by Western knowledge, casts light on the potential of a CAM to enhance critical health literacy [2]. The case study is situated within a wider research study which aimed to provide cross-European insight into patient perceived experiences and effects of shiatsu. The case study drew on data on factors associated with advice-giving, for example: what clients 'hoped to get from having shiatsu' (at baseline); features of the client-practitioner relationship and advice-giving 'in the (baseline) session'; changes made 'in their life as a result of having these shiatsu treatments' (at 3 and 6 months); and, if they had made any changes, in some area(s), chosen from a list of possibilities (for example, diet, exercise, rest and relaxation) and described 'any other changes' in the space provided.

Results and Discussion

Alternative Medicine that describes medical treatments those are used instead of traditional (mainstream) therapies. Some people also refer "integrative or complementary" medicine [3]. About 40% of adults in the US say they use some form of alternative medicine AM

comprises a diverse set of modalities and multiple healing systems. It includes alternative systems of health and healing, involving alternative diagnostic approaches to conventional bio-medicine (for example, Traditional Chinese Medicine (TCM), TCM acupuncture, ayurvedic medicine, homeopathy) and/or disciplines/modalities (for example, herbal medicine, massage, reflexology, Reiki, shiatsu). One commonly cited definition depicts CAM as 'a group of diverse medical and healthcare systems, practices and products that are not presently considered to be part of conventional (bio), medicine. Another definition within the Cochrane Collaboration points to complementary medicine as 'include (in) all such practices and ideas which are outside the domain of conventional medicine in several countries and define by its users as preventing, treating illness, or promoting health and well-being. These practices complement mainstream medicine...'. Yet others talk of mind-body interventions (yoga, Reiki, meditation), energy-related modalities (acupuncture, reflexology, shiatsu), body alignment (chiropractic), herbal medicine and nutrition, including dietary supplements available 'over the counter'. Some are pull into CAM (attracted to its mode of practice, underlying whole treatment approach), others pushed (experiencing bad side effects from conventional treatments or these not working for them as well as they might), and yet others being 'committed' users with CAM as a preferred treatment option, though not necessarily only using CAM [4].

Conclusion

Approximately of adults in the US use complementary and alternative medicine (CAM) yet less than 40 percent disclose such use to their physician and other health care providers. Women are likely than men to use CAM therapies; use appears to increase as education level increases; use patterns vary by race, depending on the type of CAM therapy consider, and those who use CAM generally use more than one CAM modality and do so in combination with conventional medical care. Some forms are being incorporated into services provided by hospitals; covered by health maintenance organizations; delivered in conventional medical practitioners' offices; and taught in medical, nursing, and other health professions schools. Insurance coverage these therapies are increasing and integrative medicine centers and clinics are being established.

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