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Complementary care

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Abstract

• The webinar will provide an overview of Complementary Care and how it is currently being used in the practice of occupational therapy. A review of types of techniques and methods, including current evidence that supports the use of techniques in clinical practice will be shared; resource information will be provided concerning liability and state level practice.
As a result of this course, participants will be able to:

• List 3-4 complementary care methods that they could use in their everyday clinical practice and articulate how they could be used, based on competency with each method.

• Be able to identify 2-3 evidence based and clinical resource articles about their Complementary Care methods of interest; and describe how this/these method(s) could be utilized in their practice settings.

• Identify a complementary care method in which they want to be trained, a plan of action for how they would gain competence (training and experience) in the method, so that they could directly utilize the method in their own clinical practice.

National Center for Complementary and Alternative Medicine (NCCAM)

“a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine” (NCCAM, 2002).
The five domains of CAM practice:

1) alternative medical systems
2) mind-body interventions
3) biologically-based treatments
4) manipulative and body-based methods
5) energy therapies

Official papers and documents

• AOTA: Official document

“The American Occupational Therapy Association, Inc. (AOTA) asserts that complementary and alternative medicine (CAM) may be used by occupational therapists and occupational therapy assistants as part of a comprehensive approach to enhance engagement in occupation (Giese, Parker, Lech-Boura, Burkhardt, & Cook, 2003).”
Alternative medical systems

- Homeopathy: use of dilute, biologically active substances to provoke the body to have an immune reaction to fight the condition.
- Naturopathy: Use of plants, flowers, herbs to treat the root cause of a biological problem.
- Traditional Medicine: indigenous or folk medicine. (Ayurveda, Native American sweat lodges, etc.).

Alternative medical systems

Often meant to be done in exclusion of traditional medical care:

**Homeopathy:**

“Homeopathic remedies are derived from substances that come from plants, minerals, or animals, such as red onion, arnica (mountain herb), crushed whole bees, white arsenic, poison ivy, belladonna (deadly nightshade), and stinging nettle. Homeopathic remedies are often formulated as sugar pellets to be placed under the tongue; they may also be in other forms, such as ointments, gels, drops, creams, and tablets. Treatments are “individualized” or tailored to each person—it is not uncommon for different people with the same condition to receive different treatments.”
Homeopathy: US

• An estimated 5 million adults and 1 million children used homeopathy in 2011
• About 1.8 percent of children use homeopathy, only 0.2 percent of children went to a homeopathic practitioner. (2012)
• Out-of-pocket costs for adults were $2.9 billion for homeopathic medicines and $170 million for visits to homeopathic practitioners. (2007)

https://nccih.nih.gov/health/homeopathy

Homeopathy

• Arizona, Connecticut, and Nevada are the only states with homeopathic licensing boards for doctors of medicine (holders of M.D. degrees) and doctors of osteopathic medicine (holders of D.O. degrees).
• Arizona and Nevada also license homeopathic assistants, who are allowed to perform medical services under the supervision of a homeopathic physician. Some states explicitly include homeopathy within the scope of practice of chiropractic, naturopathy, and physical therapy.

https://nccih.nih.gov/health/homeopathy
Homeopathy

“Homeopathy is a controversial topic in complementary medicine research. A number of the key concepts of homeopathy are not consistent with fundamental concepts of chemistry and physics. For example, it is not possible to explain in scientific terms how a remedy containing little or no active ingredient can have any effect. This, in turn, creates major challenges to rigorous clinical investigation of homeopathic remedies. For example, one cannot confirm that an extremely dilute remedy contains what is listed on the label, or develop objective measures that show effects of extremely dilute remedies in the human body.”

https://nccih.nih.gov/health/homeopathy

Naturopathy

Definition of Naturopathic Medicine

• House of Delegates Position Paper, Amended 2011

Naturopathic medicine is a distinct primary health care profession, emphasizing prevention, treatment, and optimal health through the use of therapeutic methods and substances that encourage individuals’ inherent self-healing process. The practice of naturopathic medicine includes modern and traditional, scientific, and empirical methods.

http://www.naturopathic.org/content.asp?contentid=59
Naturopathy

“A licensed naturopathic physician (ND) attends a four-year, graduate-level naturopathic medical school and is educated in all of the same basic sciences as an MD, but also studies holistic and nontoxic approaches to therapy with a strong emphasis on disease prevention and optimizing wellness. In addition to a standard medical curriculum, the naturopathic physician also studies clinical nutrition, homeopathic medicine, botanical medicine, psychology, and counseling. A naturopathic physician takes rigorous professional board exams so that he or she may be licensed by a state or jurisdiction as a primary care general practice physician.”

There are 7 Naturopathic Medical schools in the US.

http://www.naturopathic.org/education

Naturopathy and OT

• There are OTs who have completed the education/certification to call themselves Doctor of Naturopathic Medicine (ND)
Traditional medicine

Examples:
• Native American Medicine
• Shamanistic practices

“Traditional medicine is the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness.” (WHO)

http://www.who.int/medicines/areas/traditional/definitions/en/

Traditional medicine

• Herbs: Herbs, herbal materials, herbal preparations, finished herbal products.
• Prescribed activities:
  — the successful prevention, diagnosis and treatment of physical and mental illnesses;
  improvement of symptoms of illnesses; as well as beneficial alteration or regulation of the physical and mental status of the body.

Mind body interventions

- Meditation
- Guided imagery
- Yoga
- Tai Chi
- Qi Gong
- Alexander Technique
- Hypnosis
Meditation

• ‘Meditation is a practice where an individual trains the mind or induces a mode of consciousness, either to realize some benefit or for the mind to simply acknowledge its content without becoming identified with that content, or as an end in itself.”

https://en.wikipedia.org/wiki/Meditation

Meditation

Based in religious practice
• East Indian religions
  – Janism, Hinduism, Buddhism
• East Asian religions
  – Taoism
• Iranian: Bahá'í Faith
• Abrahamic: hisbodedus
• Christian: prayer
• Islam: sufi, muraquaba

Secular
• New age: “freeing the mind”
• Pagan: Wicca
• Spiritualism: clearing the mind to commune with spirits
Adjuncts to meditation

- Prayer beads
- Mantras
- Singing bowls
- Bells
- Music

https://youtu.be/Q5dU6serXkg?t=18s

Guided imagery

- Although it has been called "visualization" and "mental imagery", these terms are misleading. Guided imagery involves far more than just the visual sense. Instead, imagery involves all of the senses, and almost anyone can do this. Neither is it strictly a "mental" activity - it involves the whole body, the emotions and all the senses, and it is precisely this body-based focus that makes for its powerful impact.

http://www.med.umich.edu/podcast/CConnection/Imagery_Intro.mp3
Yoga

“a Hindu spiritual and ascetic discipline, a part of which, including breath control, simple meditation, and the adoption of specific bodily postures, is widely practiced for health and relaxation.” origin: Sanscrit

Types: Hatha, Vinyasa, iyengar, Ashtanga, Bikrim, hot yoga, Kundalini, yin, restorative
Yoga-most commonly used

• Hatha
  – Movement, establishment of the yoga postures

• Vinyasa
  – flow on in this dynamic practice that links movement and breath together

Tai Chi and Qi Gong

• Tai chi and qi gong are centuries-old, related mind and body practices. They involve certain postures and gentle movements with mental focus, breathing, and relaxation. The movements can be adapted or practiced while walking, standing, or sitting. In contrast to qi gong, tai chi movements, if practiced quickly, can be a form of combat or self-defense.

https://youtu.be/hI0HGrYCEJ4
Tai Chi

https://youtu.be/bRs0nFgvcOQ
Qi Gong
Tai Chi & Qi Gong

Tai Chi research is funded by the NIH
There are outcome studies that prove efficacy with
• Symptoms of anxiety and sleep quality in young adults
• Fibromyalgia
• Knee osteoarthritis.

Qi Gong is not currently funded by the NIH
• Qi Gong focuses heavily on the power of breathing as it influences Chi, the life force.

Alexander Technique

• A form of therapeutic exercise in which there is conscious correction of posture to restore normal spinal suspension; and to overcome postural shifts that may have developed from postural stress and strain associated with engagement in an activity or as a response to pain or stress.
• Developed by F.M. Alexander (1869-1955), an Australian actor who began to experience chronic laryngitis whenever he performed. When his doctors could not help him, Alexander discovered a solution on his own. He had not been aware that excess tension in his neck and body were causing his problems, and began to find new ways to speak and move with greater ease.
• The Alexander technique was presented at the NUSTEP symposium in the mid 1960s.

https://youtu.be/_ZzP5kR3Ak8
Hypnosis

• the induction of a state of consciousness in which a person apparently loses the power of voluntary action and is highly responsive to suggestion or direction. Its use in therapy, typically to recover suppressed memories or to allow modification of behavior by suggestion, has been revived but is still controversial.
• Requires advanced training/certification
• Is evidence-based

https://youtu.be/SUIWSb_VDGA

Biologically based treatments

• Aromatherapy (sense of smell)
• Music therapy (hearing and vibratory sense)
Aromatherapy

- lavender

the use of aromatic plant extracts and essential oils in massage or baths.

https://www.naha.org/

“Ain some instances, OT practitioners may want to recommend that clients use topical application of essential oils for wellness purposes. For example, an OT practitioner, who has acquired competence in aromatherapy and massage techniques, can instruct family members or caregivers on how to perform localized aromatherapy massages on family members or clients.”

Cook, A. & Burkhardt, A., 1997
Aromatherapy

“These applications may be in the form of hand or foot massages. This intervention is particularly appropriate for dementia or palliative care and empowers a caregiver to engage in an occupation that helps a loved one who is being cared for. OT practitioners can also teach clients to use aromatherapy baths for relaxation and stress reduction, as part of overall wellness plans. In this instance aromatherapy is integrated into the realm of personal self-care occupations.”

Cook, A. & Burkhardt,A., 1997

Aromatherapy

“Occupational therapists who are trained in aromatherapy are therefore strongly encouraged to take a client-centered, occupation-based approach by teaching clients and their caregivers about aromatherapy and how to use it safely for the purpose of individualized self-care or for care of others. We have successfully implemented this type of educational and occupation-based approach with clients with a variety of physical and psychosocial challenges.”

Cook, A. & Burkhardt,A., 1997
Music therapy

Music Therapy is the clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program.

“...some sounds, such as lullabies, may soothe pre-term babies and their parents, and even improve the infants' sleeping and eating patterns, while decreasing parents' stress.” (Pediatrics, 2013).

Music therapy and pulmonary rehabilitation

A randomized control study was done to examine the effect of a multimodal psycho-music therapy intervention on respiratory symptoms, psychological well-being and quality of life of patients with Chronic Obstructive Pulmonary Disease and other lung diseases as adjunct to Pulmonary Rehabilitation (PR) with a design of music therapy plus PR compared to Pulmonary Rehabilitation alone.

Music for pulmonary rehabilitation

Outcome measures included the Beck Depression Inventory Scale 2nd edition-Fast Screen (BDI-FS), Chronic Respiratory Questionnaire Self-Reported (CRQ-SR), and Dyspnea Visual Analog Scale (VAS). Results showed improvement in symptoms of depression (LS mean −0.2) in the music therapy group with statistical divergence between groups (p = 0.007). The CRQ-SR demonstrated improvement in dyspnea (p = 0.01 LS mean 0.5) and mastery (p = 0.06 LS mean 0.5) in the music therapy group and fatigue (p = 0.01 LS mean 0.3). VAS demonstrated highly significant effect in the music therapy group between weeks 5 and 6 (p < 0.001). The findings of this study suggest that music therapy combined with standard PR may prove to be an effective modality in the management of pulmonary disease. (Canga,B., Azoulay,R., Raskin,J., and Loewy,J., 2015)

Sufi and traditional use of music

“For the Sufi, purification and enlightenment came through the heart. The heart was described as the most virtuous organ and the symbolic center of man’s existence and the feeling of love felt through the heart was accepted as the key of being aware of the existence of the Creator. This was an educational approach to music. Sufi music was used as a means of training for ideal perfection, which also meant becoming harmonious with oneself. Man, being accepted as the symbol of the universal creation, was described and evaluated as a micro-cosmos. It was believed that all the characteristics of the universe were awarded to man by the Creator. Therefore, the ultimate aim of music was to attain freedom of the self (nefs), so as to reach his/her soul to the divine origin.”

http://www.muslimheritage.com/article/ottoman-music-therapy#sec_4
Manipulative and body-based methods

- Cranio-sacral therapy
- Osteopathy
- Massage

Osteopathy-US

- In the US, there are schools of Osteopathic Medicine, doctors of osteopathy, known as DOs, graduate from medical colleges, take boards and practice a blended form of medicine. A DO in the US is equivalent to an MD. This is not the same elsewhere in the world. Dos are licensed in 65 countries worldwide.
- Osteopathic manipulation treatment emphasizes the physical manipulation of the body's muscle tissue and bones over the use of oral, biologically active medicine (e.g. pills). DOs do prescribe medicine in the US. They are full medical doctors.

https://en.wikipedia.org/wiki/Comparison_of_MD_and_DO_in_the_United_States
Craniosacral Therapy (CST)

A system of osteopathic medicine intended to relieve pain and tension by gentle manipulations of the skull, spine and pelvis that are theorized to be harmonizing with restoration of a natural rhythm in the flow of the central nervous system. Also called ‘cranial osteopathy’ (UK)

In the US, certification training: Upledger Institute [http://www.upledger.com/]
CST

• Practitioners of both cranial osteopathy and craniosacral therapy assert that there are small, rhythmic motions of the cranial bones attributed to cerebrospinal fluid pressure or arterial pressure.

• The premise of CST is that palpation of the cranium can be used to detect this rhythmic movement of the cranial bones and selective pressures may be used to manipulate the cranial bones to achieve a therapeutic result. However, the degree of mobility and compliance of the cranial bones is considered controversial and is a critically important concept in craniosacral therapy

Seimetz, Christina N.; Kemper, Andrew R.; Duma, Stefan M. (2012).

Massage

Massage

• Massage therapy encompasses many different techniques. In general, therapists press, rub, and otherwise manipulate the muscles and other soft tissues of the body. They most often use their hands and fingers, but may use their forearms, elbows, or feet.

https://nccih.nih.gov/health/massage

Acupressure massage

Pressure is applied to points along meridians that are known to effect muscle, nerve and alignment.

The Haiku point, known as the ‘palace of anxiety’ is at the base of the thumb
Massage Therapy

- Massage therapy dates back thousands of years. References to massage appear in ancient writings from China, Japan, India, and Egypt.
- In general, massage therapists work on muscle and other soft tissue to help you feel better.
- In Swedish massage, the therapist uses long strokes, kneading, deep circular movements, vibration, and tapping.
- Sports massage combines techniques of Swedish massage and deep tissue massage to release chronic muscle tension. It is adapted to the needs of athletes.
- Myofascial trigger point therapy focuses on trigger points—areas that are painful when pressed and are associated with pain elsewhere in the body.
- Massage therapy is sometimes done using essential oils as a form of aromatherapy.

https://nccih.nih.gov/health/massage/massageintroduction.htm

Research on massage therapy

- A lot of the scientific research on massage therapy is preliminary or conflicting, but much of the evidence points toward beneficial effects on pain and other symptoms associated with a number of different conditions. Much of the evidence suggests that these effects are short term and that people need to keep getting massages for the benefits to continue.
- Researchers have studied the effects of massage for many conditions. Some that they have studied more extensively are the following. (Look on the link for a summary of the research)
  - Pain
  - Cancer
  - Mental health

https://nccih.nih.gov/health/massage/massageintroduction.htm
Energy therapies

Clearing cellular memory through the human energy field- promoting health, balance and relaxation.

*biofield therapies, and bioelectromagnetic-based therapies*

- Therapeutic touch
- Reiki
- Magnets

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Therapeutic touch

Therapeutic Touch® is a holistic, evidence-based therapy that incorporates the intentional and compassionate use of universal energy to promote balance and well-being.

Technique developed by Dr. Dolores Krieger, RN And Dora Kunz In New York City.

https://youtu.be/1dUW-i4VwGY

http://therapeutic-touch.org/
Therapeutic Touch

Therapeutic Touch is based on the idea that human beings are energy in the form of a field. When you are healthy, that energy is freely flowing and balanced. In contrast, disease is a condition of energy imbalance or disorder. The human energy field extends beyond the level of the skin, and the Therapeutic Touch practitioner attunes him or herself to that energy using the hands as sensors.

Training in Therapeutic Touch

• Complete Basic Therapeutic touch training program with a qualified teacher

http://therapeutic-touch.org/about-us/qualified-teachers/

There is research being done. There was a controversial article in the 2000s in JAMA which attempted to debunk the method. Qualitative studies have upheld efficacy. Links to research is available on the website.
Reiki

• Reiki is a Japanese technique for stress reduction and relaxation that also promotes healing. It is administered by "laying on hands" and is based on the idea that an unseen "life force energy" flows through us and is what causes us to be alive. If one's "life force energy" is low, then we are more likely to get sick or feel stress, and if it is high, we are more capable of being happy and healthy. [http://www.reiki.org/FAQ/WhatIsReiki.html](http://www.reiki.org/FAQ/WhatIsReiki.html)

• Reiki has been studied for a variety of conditions, including pain, anxiety, fatigue, and depression, but evidence of efficacy does not yet exist. ([NICAM, NIH](https://www.youtube.com/watch?v=HZpFm8SUYo))
Magnets

- A magnet produces a measurable force called a magnetic field. Static magnets have magnetic fields that do not change (unlike electromagnets, which generate magnetic fields only when electrical current flows through them). Magnets are usually made from metals (such as iron) or alloys (mixtures of metals, or of a metal and a nonmetal).
- Magnets come in different strengths, often measured in units called gauss (G) or, alternatively, units called tesla (T; 1 T = 10,000 G). Magnets marketed for pain relief usually claim strengths of 300 to 5,000 G.
- Magnets are often marketed for many different types of pain, including foot pain and back pain from conditions such as arthritis and fibromyalgia. Various products with magnets in them include shoe insoles, bracelets and other jewelry, mattress pads, and bandages.
- Research has been inconclusive.


The OT Practitioner determines whether

- the use of CAMs is consistent with the client’s cultural practices, priorities and needs, is safe to use, and is an appropriate approach to facilitate the ability of the client to participate in daily life occupations.
Coaching

• When the practitioner has knowledge of a CAM, explores client interest, assists to seek out resources for education and training, coaches the client through training and incorporating method into their daily life, habits and patterns.

Direct use of CAM in OT session

• When OT has competence in the CAM modality
  – Training in theory
  – Has been instructed in technique and can demonstrate competence in technique
  – Client is accepting of type of intervention
  – State law supports role of OT in using CAM (CAM probably is not billable as the center of the treatment itself, only as something that ‘sets the stage’ for success to the achievement of well-being for the client.)
To check on state licensing in the US

http://www.nbcot.org/state-license-info

Interactive map to direct you to the state in which you practice or are licensed & where you can find contacts to inquire if you have specific practice questions.

The great debate....

• If you are only providing the CAM modality,
  – Is it billable as OT?
  – What if it is adjunctive to asking the client to do something in the OT session?
  – If you only provide the CAM, should you identify yourself as an OT? Or as a CAM practitioner trained in use of the modality?
  – Do you have other scenarios?
Evidence based dilemma...

• If there isn’t adequate evidence that the modality/technique works, should you use it in practice?

References


Homeopathy, National Center Complementary and integrative Health, NIH, retrieved May/8/2016, from https://nccih.nih.gov/health/homeopathy

References


