Complementary and Integrative Medicine: No Longer ‘Alternative’

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Medical nomenclature is always changing. For example, the term “complementary and alternative medicine,” usually referred to as CAM, is thought by some to imply that these treatments are on the fringe. Instead, researchers and clinicians prefer the term “integrative medicine,” as it seeks to incorporate the newer practices with more traditional ones. This emphasizes that these are not so much “alternative” as they are fully integrated into mainstream practice. Complementary and integrative medicine (CIM) may be the preferred name for the future.

– Elspeth Cameron Ritchie, MD, MPH (Col. US Army, retired)
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Psyciatric Annals’ ongoing series reviewing the military’s search for effective healing modalities for post-traumatic stress disorder is further evidence that complementary and integrative medical practices are no longer “alternative” for a growing body of medical, surgical, and neuropsychiatric concerns.

The National Center for Complementary and Alternative Medicine (NCCAM) of the National Institutes of Health defines complementary and alternative medicine (CAM) “as a group of diverse medical and health care systems, practices, and products that are not generally considered part of conventional medicine,” that is, mainstream medicine usually practiced by physicians holding an MD or DO.

Although some practices such as acupuncture, meditation, and yoga, are ancient by our current medical standards, the fact that they are readily accessible, patient-centered, “high touch, low tech” forms of care, shown to be effective in managing the suffering associated with the sorts of injuries sustained on today’s battlefield, means these modalities are also quite modern.

This group of approaches to health, wellness, and healing are considered “integrative” on several levels or dimensions. First, in their best use they are integrated with more conventional approaches or therapies; optimally, they are employed as an integrated combination of conventional and CAM modalities. Second, they often involve an integrated team of healing professionals who work collaboratively to find the best approach to the particular patient and problem being managed. Ultimately, they integrate the individual, placing the whole person at the center of all healing efforts,

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As this series illustrates, and the following article by Paul D. Sargent, MD, and colleagues describes, the US Military is incorporating a larger variety of these practices across a wider range of problems, from the management of posttraumatic stress disorder (PTSD) to post-surgical and chronic pain to chronic disease management.

In recognition of the increasing reliance by our patients upon these CAM approaches, we have begun orienting medical students within the federal medical school at the Uniformed Services University of the Health Sciences to their application and widespread use. It remains for those who advocate for the best outcomes for our patients to insist upon sound practices performed by well-trained and, ideally, certified practitioners, using evidence-based techniques. In some cases this evidence now exists; in others the work of competent researchers is still needed.

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