

ABSTRACTS from the annual 2013 UK conference on Complementary and Alternative Medicine Strategies, Training, Research and New Developments (CAMSTRAND)

Oral presentations

Exploring the role of Chinese herbal medicine in the treatment of recurrent urinary tract infections



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Introduction: Approximately 50% of women will experience one episode of acute urinary tract infection during their lives and 3% of women will experience recurrent UTIs (RUTIs)-defined as 3 or more episodes of infection in a year. RUTIs can have a major impact on quality of life and make considerable demands on health care resources. Antibiotic prophylaxis can reduce the incidence of RUTIs but 50–60% of women experience a recurrence within 3 months of stopping treatment. Increasing levels of microbial resistance to antibiotics mean that new methods of managing this condition are being considered. One approach now being investigated with funding from the UK's National Institute of Health Research (NIHR) is Chinese herbal medicine (CHM).

Methods: Phase 1 of this research involves exploring the experience of women with RUTIs through an analysis of an internet discussion forum and subsequent focus groups. In Phase 2 GPs have been interviewed to investigate their experience of treating RUTIs and their attitudes to CAM in general and CHM

in particular. Phase 3 involves a novel approach to defining good practice of CHM including a small prospective observational study; a survey of the historical use of CHM in the treatment of urinary tract disorders; in vitro biological assays to investigate the effects of two CHM formulae; developing professional consensus on good practice via focus group discussion and interviews with experienced practitioners; and a Cochrane Review of CHM RCTs and a broader Evidence Synthesis of available material. Phase 4 will be a double blind placebo controlled pilot study comparing a standardised herbal remedy delivered by GPs with individualised treatment administered by CHM practitioners.

Results: A preliminary finding from an analysis of internet data has confirmed that for some women RUTIs are a serious cause of morbidity and have a profound impact on their quality of life. 13 out of a target of 20 GPs have been interviewed so far with themes emerging on how GPs treat RUTIs and their concerns in relation to CHM. An observational study involving 15 women has been completed with promising preliminary data. A survey of the historical literature has produced interesting information on the traditional understanding of the pathophysiology and treatment of RUTIs. In vitro assays have so far revealed little direct antibacterial effect from 2 CHM formulae but have provided some evidence of possible protective mechanisms mediated via urothelial cell attachment and some modification of antibiotic resistance/sensitivity. A protocol for a Cochrane review has been accepted and is currently underway, and the initial stages of developing the pilot study have begun.

Discussion: We have developed a multifaceted research programme to investigate the experience and treatment of women with RUTIs. By combining historical and laboratory insights with the findings of a synthesis of diverse sources of available evidence, the aim is to develop treatment protocols that have model validity and a sound basis in clinical practice. The viability and the effectiveness of delivering standardised CHM in primary care and comparing this to an individualised practitioner administered CHM is also being explored. We believe these are

important developments within CHM research that could be of wider interest to other CAM interventions.

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Integrated treatment for low back pain: A systematic review



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Introduction: Integrative medicine (IM) is described as the discipline of combining of conventional (allopathic) medicine and Complementary and Alternative Medicine (CAM) to address the biological, psychological, social, and spiritual aspects of health and illness. The term has been increasingly used but the understanding of IM varies throughout the world. The extent of integrated care provision for low back pain (LBP) has been poorly documented, and lacks scientific evidence, with few controlled trials on the efficacy of integrated treatment. Lack of standard definitions and terminology, diversities in different practices and types of practitioner, and diverse policies in IM make it difficult to conduct research. A systematic review was carried out to identify the clinical effectiveness and cost-effectiveness; and also to inform the method of conducting systematic reviews in IM (particularly focusing on the differences between Chinese and English literature).

Methods: The review was registered (CRD42013003916) and was conducted following the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA). A literature search was carried out on 8 English and 4 Chinese databases from inception to December 2012. Randomized controlled trials evaluating the effectiveness and cost-effectiveness of predefined integrated treatments for musculoskeletal related LBP were included. Reporting and methodological quality were assessed by two independent researchers, with consensus by a third reviewer, using Consolidated Standards of Reporting Trials (CONSORT), Standards for Reporting Interventions in Clinical Trials of Acupuncture (STRICTA) and the Cochrane Back Review guidelines. Relevant clinical characteristics were extracted by two independent reviewers in both languages.

Results: Preliminary findings have identified a total of 61 randomized controlled trials were included, among which 24 treatments included acupuncture (17 in Chinese, 7 in English). Of the 24 acupuncture involved studies ($n = 5406$), studies conducted in China were poorer in reporting and methodology quality. The similarity of scores between reviewers was 83% and 85% for Chinese and English papers respectively. The majority of the papers published in Chinese were conducted in (Western) medical hospitals (9/16); while studies conducted in other

countries were multicentre (3/8). The most popular treatment combination in China was acupuncture combined with traction (8/16); while in other countries acupuncture in addition to usual care (5/8) was the most popular combination. A visual analogue scale (VAS) was the most commonly used outcome measure.

Discussion: The effectiveness of a package of IM has not previously been adequately or directly compared with either conventional medical treatments or single CAM treatments. One difficulty in conducting this review was the variation in terminology/policy/registration system/education/clinical practices and how integrated care is defined and provided in different countries. Different combinations of IM care packages between different countries will now be extracted, analysed and compared to identify whether there is any evidence for the use of specific combinations of IM provided for LBP.

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To evaluate the effectiveness of Emotional Freedom Techniques (EFT) to reduce the side effects caused by Tamoxifen and Aromatase Inhibitors in women with breast cancer: A preliminary service evaluation



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Introduction: Despite the well documented efficacy of adjuvant hormonal therapy to reduce breast cancer recurrence and mortality rates, no or poor adherence has become a significant issue, mainly due to the side effects associated with tamoxifen and aromatase inhibitor use. As a provider of psychological support and complementary therapies to people diagnosed with breast cancer, The Haven (a registered breast cancer support charity) is committed to finding ways for them to help themselves. Emotional Freedom Techniques (EFT) is a self-help tool which involves gentle tapping with the fingers on specific acupuncture points whilst focusing attention on a negative emotion or physical symptom. A number of small research studies have shown that EFT may improve psychological distress in individuals with post-traumatic stress disorder, phobias and anxiety. However, no research has been published as to its possible effectiveness in people with breast or any other type of cancer, although Visitors to the Haven centres attending EFT groups have told us that using EFT has helped to relieve both their physical and emotional symptoms: This preliminary service evaluation was carried out to assess whether EFT has the potential to be used as a self-help tool for alleviating the side effects of hormonal therapies in women with breast cancer and to evaluate the need for a formal study.

Aims:

1. To develop a self-help protocol for women with breast cancer with Tamoxifen or Aromatase Inhibitor-associated menopausal symptoms.