

A.M.B.E.R. clinic
Albuquerque
Multidisciplinary
Behavioral Evaluation for
Recovery and Resiliency

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**“Complementary and
Alternative Medicine
(CAM) --
application to
I/DD or TBI”**

Terms...

- **What constitutes CAM?**
 - **Complements allopathic medicines**
 - **Herbs & vitamins**
 - **Eastern medicine**
 - **Body work: massage, yoga, etc.**
 - **Cranio-sacral therapy**
 - **Medicine woman; medicine man**
 - **Spiritual approaches**

Types of CAM

- **Acupuncture**
- **Anthroposophy**
- **Auriculotherapy**
- **Holistic Health**
- **Homeopathy**
- **Horticultural therapy**
- **Mesotherapy**
- **Mind-Body therapies**
- **Musculo-skeletal manipulations**
- **Naturopathy**
- **Organotherapy**
- **Phytotherapy**
- **Relexotherapy**
- **Rejuvenation**
- **Sensory Art therapies.**
- **Speleotherapy**
- **Spiritual themes**

When is it important

- Ongoing:
 - Unexpected change
 - Secondary conditions
 - Medical conditions
- Sensitivity to western medications
- Sensitive to side effects.

Sleep

- **Maintenance of sleep hygiene**
 - affects cognitive patterns
 - energy and worry patterns
- **Melatonin**
 - pharmaceutical grade (behind the counter)
- **Diet and exercise**
- **Pain!**

Collaboration

- **Respect for differing frames of reference.**
 - **Has to be conveyed to patient on a consistent basis.**
- **Communication about outcomes and expectations.**
 - **Written, verbal?**
 - **Direct; via the patient or another party?**
- **Rates of change;**
 - **who is directing changes;**
 - **timing of changes.**

Pain

- **Sleep/wake cycle**
- **Exercise and mobility**
- **Soft tissue**
- **Nervous system**
 - **Acupuncture; acupressure**
 - **Neuromodulators**
- **Autonomic nervous system**

Headache

- Sources of pain
- Habits
- Cranio-sacral therapy
- Musculo-skeletal
 - chiropractic
 - massage therapies
- Vitamins

Anxiety

- **Cognitive patterns**
- **Spiritual impact**
 - **Belief and expectation**
- **Kava-kava, other herbal preparations**
- **Remove activating substances.**

Placebo?...

- **Mind influence over somatic symptoms**
- **Can trump other effects**
- **Hypnosis – by an outside person, or by oneself.**

Summary

- People with TBI are often sensitive to hyperarousal and side effects of standard treatments.
- Engaging people and their caregivers in most comprehensive care improves outcomes.
- As clinicians we need to know all the substances and modalities our patients are using.
- Expertise in CAM is not required to integrate into allopathic medical treatment.

Some references

- **Rahimi R, Abdollahi M: "Herbal medicines for the management of irritable bowel syndrome: a comprehensive review." World J Gastroenterol. 2012 Feb 21; 18(7): 589-600.**
- **Wong V, Cheuk DK, Lee S, Chu V: "Acupuncture for acute management and rehabilitation of traumatic brain injury." Eur. J. Phys. Rehabil. Med. 2012 Mar; 48(1): 71-86.**
- **Dwyer AV, Whitten DL, Hawrelak JA. "Herbal medicines, other than St. John's Wort, in the treatment of depression: a systematic review." Altern Med. Rev. 2011 Mar; 16(1):40-9.**
- **Huang W, Kutner N, Bliwise DL: "Autonomic activation in insomnia: the case for acupuncture." J. Clin. Sleep Med. 2011 Feb 15; 7(1): 95-102.**



Next presentation:

10-16-2012

**“Psychopharmacology of Impulse
Dyscontrol...”**

resources and back issues can be found at Continuum
of Care website:

<http://som.unm.edu/coc/Training/powerpointnew.html>