

FROM COUNTERCULTURE TO MAINSTREAM:

# INTEGRATIVE MEDICINE GOES BIG

BY GLENN RIFKIN

**THE EMBRACE OF UNORTHODOX MEDICAL TREATMENTS IS NOTHING NEW.**

Today's popularity of alternative medicine—herbal supplements, acupuncture, tai chi, yoga and meditation—is predated over the past two centuries by a raft of unusual, sometimes absurd, treatments that inevitably spawned vocal and angry pushback from conventional physicians. But rather than drawing the vitriolic reactions that past medical movements faced, the alternative, holistic treatments offered today are being embraced on a broad scale by physicians, hospitals, medical schools and clinicians in every discipline. Individuals and corporations alike are shedding decades of skepticism and integrating methods into their lives that many once shunned. Like any movement, the emergence of integrative medicine is now reaching a tipping point, and the implications are significant.

Given the health care landscape, it is hardly a surprise that corporations as well as doctors and patients are embracing alternatives. According to a Deloitte study, the U.S. spent \$3.8 trillion on health care in 2014, and that number will surpass \$4 trillion in 2015. As the costs spiral upward, the outcomes continue to fall short. For Dr. Andrew Weil, director of the Center for Integrative Medicine at the University of Arizona's College of Medicine, the steady march toward acceptance is not a surprise.





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—DR. ANDREW WEIL

“The current state of medicine and health care is disastrous,” said Weil, who is considered the father of the field of integrative medicine. “Costs cannot be contained, and even though we spend more per capita on health care than any people in the world, our health outcomes are dismal. Integrative medicine can be the basis of a new, more cost-effective system. It prioritizes prevention and health promotion above disease management. Integrative medicine is becoming mainstream, and along with it, alternative methods are much more accepted.”

Weil defines integrative medicine as “a new system that emphasizes the natural healing power of human beings, treats the whole person (body, mind and spirit), attends to all aspects of lifestyle that influence health, values the practitioner/patient relationship and makes use of all available therapies that do not cause harm and show reasonable evidence of efficacy. Integrative medicine neither rejects conventional approaches nor accepts alternative treatments uncritically.”

For Weil, the outcome is clear. “One day, we will be able to drop the word ‘integrative,’ and it will just be good medicine.”

For patients who simply want to become and stay healthy without emptying their retirement accounts, the debate over what constitutes “good medicine” rages on. Integrative medicine has made strides as

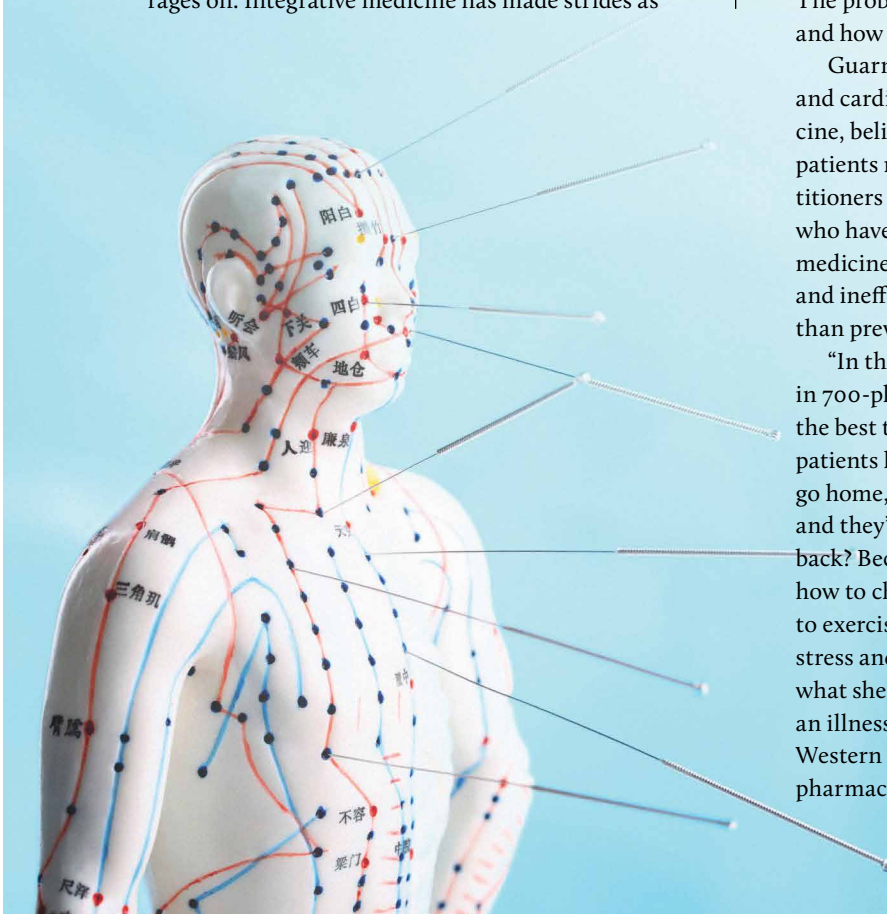
companies, like individuals, are seeking better, more cost-effective ways to stay healthy. But what does it all mean for the average consumer?

The surge of acceptance of integrative medicine, also known as complementary and alternative medicine (CAM), is evident in every aspect of medical treatment and in the proliferation of wellness and mindfulness programs and practices in settings once reserved exclusively for conventional medicine. Sales of natural products and herbal and homeopathic remedies such as fish oil, probiotics and melatonin have skyrocketed in the past decade. The number of Americans embracing Eastern medicines and methods and doing yoga, meditation, tai chi and acupuncture has also increased as more consumers take control of their own health needs and seek preventative methods to incorporate into their lifestyles. Rather than espouse one philosophy over another, integrative medicine is inclusive of whatever works.

“Western medicine is great in acute care situations,” said Dr. Mimi Guarneri, a cardiologist, president of the Academy of Integrative Health and Medicine and founder of the Scripps Center for Integrative Medicine in San Diego. “If somebody is having a heart attack, a stroke, or they get hit by a truck, that’s a great time to be near a major medical center. The problem is in the concept of disease prevention and how we handle chronic disease management.”

Guarneri, who trained and worked as an internist and cardiologist before focusing on integrative medicine, believes, like many in the growing field, that patients need and want the best of both worlds. Practitioners tend to be physicians with medical degrees who have grown weary of the monolith that Western medicine has become: an expensive, often impersonal and ineffective system aimed at fixes and cures rather than prevention of maladies.

“In the 1990s, as a cardiologist, I was putting in 700-plus stents a year,” she said. “I was doing the best that Western medicine can do, and yet my patients kept coming back. We’d stent them, they’d go home, they’d come back. We’d stent them again, and they’d come back again. Why were they coming back? Because we were doing nothing to teach them how to change their lives, how to eat differently, how to exercise, how to change the way they respond to stress and emotion.” She became disillusioned with what she calls the “ill to the pill” method—diagnose an illness, prescribe a medication—that characterizes Western medicine and is fueled by the \$310-billion pharmaceutical industry.



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The road to acceptance, however, has not been smooth. When Weil and his growing legion of followers began to consider an alternative philosophy in the late 1960s, the immediate reaction from conventional physicians was cynicism and scorn. Despite the progress, skeptics remain.

Steven Salzberg, a professor of biomedical engineering at Johns Hopkins University School of Medicine, is a vocal critic of what he terms “pseudoscience.” “Whatever term is used—alternative medicine or integrative medicine—this isn’t medicine,” he stated in an article in the *American Association of Medical Colleges Reporter* in 2012. “At best, these are hypotheses. Over 20 years, NCCAM [the National Center for Complementary and Alternative Medicine, part of the National Institutes of Health] has spent more than \$1 billion, and [there is] no strong evidence that these activities work.”

But such objections have not blocked the wave of interest and belief in the effectiveness of alternative methods. Health insurance companies, though still generally reluctant to recognize alternative treatments, are beginning to soften their opposition, and in some cases acupuncture, chiropractic and stress-reduction courses are covered. Though that battle remains daunting, the feeling is that a new generation of health care providers is embracing an integrative approach.

Dr. Peter Wayne, assistant professor of medicine at Harvard Medical School and director of research for the Osher Center for Integrative Medicine at Brigham and Women’s Hospital in Boston, says Western medicine tends to operate in silos: A patient with joint pain goes to a rheumatologist; a patient with a bone problem goes to an orthopedist; a patient with heart ailments goes to a cardiologist. A holistic view of the

patient is missing. “They’re not so good at seeing the connections between all these things,” he concludes about old-school practitioners. “In both my training in evolutionary biology as well as my training in Chinese practices that treat the body as an ecological system that is in a dynamic balance, I got pointed in the direction of research I’m now doing.”

Wayne, who happens to be a tai chi instructor, has seen a dramatic shift in bringing these two worlds together. Many academic medical centers, such as the Harvard Medical School hospital system, now offer acupuncture as part of their pain program or as palliative care for cancer patients. Most have mind/body courses in meditation or tai chi or yoga. “This wasn’t happening years ago. This is a culture change,” he said. “And some of this is because of the impact of strong, compelling evidence that these methods are effective.”

**F**OR MANY AMERICANS, the turn to integrative medicine comes after years of feeling frustrated, fearful, skeptical and even paranoid about the treatments they had been receiving for much of their lives. Patients with chronic health problems have grown tired of long waits for five-minute consultations with their primary care physicians, prescription medications that have little effect and a growing alienation from an overburdened health care system. When they see herbal supplements on the shelves at CVS and hear friends talking about the benefits of yoga, large numbers are now willing to consider alternatives.

According to a report from the National Center for Complementary and Integrative Health (NCCIH, formerly NCCAM) and the National Center for Health Statistics of the U.S. Centers for Disease Control and Prevention, since 2007, Americans have increased their use of fish oil, probiotics and melatonin, among hundreds of supplements. Sales of such supplements jumped 7.9 percent in 2013, reaching an estimated \$6 billion, according to the Herb Market Report published annually by the quarterly journal *HerbalGram*. Among Americans ages 45 to 64, yoga is now practiced by 7.2 percent of the population, up from 5.2 percent in 2002. Nearly 20 million adults had chiropractic or osteopathic manipulation, and nearly 18 million adults practiced meditation.

Many medical schools are embracing the concept. Dr. Brian Berman, a professor of family and community medicine at the University of Maryland School of Medicine, has witnessed the metamorphosis. Having studied at the Royal College of Surgeons in Ireland in the 1970s and practiced conventional medicine in England for eight years, Berman learned how to incorporate alternative therapies such as acupuncture and nutrition into his practice. "It was a most satisfying way to practice; to be able to partner with my patients and offer them more than just drugs and surgery," he said. "I could offer them some ways that they could begin to help themselves with a wider medical toolbox."

But when he returned to the U.S. in the 1980s, he discovered a strong bias against these integrative methods. He remembered what one of his mentors in England, Sir James Watt, president of the Royal Society of Medicine, had said. This field, Watt told him, would never be taken seriously without solid scientific evidence to support it. To that end, in 1991, Berman approached the University of Maryland and proposed the first program for integrative medicine to be based in an academic medical center. With the university's support, the Center for Integrative Medicine opened and began the effort to influence the field and change some minds. By the early 2000s, Berman helped found the Academic Consortium for Integrative Medicine and Health. He started with seven universities; today there are 61 member universities.

The aim of these efforts is to place the patient in

the center of care and emphasize the relationship between the doctor and patient, Berman explained. The idea is to consider the whole person, not individual symptoms, and it is "informed by evidence, evidence that is really rigorous but also relevant, and uses all therapeutic and lifestyle approaches to emphasize the idea of optimal health and healing," he said.

With support from the NIH, academic centers and hospitals, "people are voting with their feet," Berman said. "Doctors are being asked for it, and there's not the outright dismissal right off the bat" as in the past.

The embrace of alternative treatments has spawned countless thriving practices around the country. Dr. Glenn Rothfeld has been practicing integrative medicine for 35 years, and his Rothfeld Center for Integrative Medicine, with offices in Waltham and Plymouth, Mass., has 3,000 patients and a two-to-three-month waiting list.

Rothfeld holds a medical degree from the University of Buffalo Medical School and is also a licensed acupuncturist. But even though he doesn't accept health insurance (and most insurance companies wouldn't reimburse for a lot of what he does), his practice is thriving. "There's a lot of disconnect between physicians and patients," he said. "A physician is taught to look for a disease and either treat it or reassure the patient that they don't have a disease. A patient doesn't care about the diagnosis most of the time. They care about getting rid of their headache, their bellyache, their disrupted sleep cycle."

BY THE NUMBERS

# IN THE CORPORATE WORLD

In the early 1980s, Dr. Kenneth R. Pelletier received a call from Robert Beck, I.B.M.'s senior vice president of human resources. Beck wanted help in designing a wellness program for the computer giant, which would be among the first of its kind in corporate America. Pelletier, along with several colleagues at the Univer-

-32%

Health promotion  
programs see a  
32 percent reduction in  
workers' compensation  
and disability claims.



Though most of his patients are those who have become dissatisfied with conventional approaches to their illnesses or cannot tolerate treatments such as chemotherapy, Rothfeld sees many who are “alternative in their thinking and wouldn’t even think about going to a conventional physician.” Some of those patients, he said, have to be persuaded to take antibiotics when they have an infection or prodded to accept medicine for high blood pressure. “Remember, an integrative approach doesn’t rule out using standard conventional treatments,” Rothfeld said.

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## AN INTEGRATIVE RESULT

**I**n the end, nothing succeeds like success. Guarneri, working with Dr. Dean Ornish in the late 1990s, participated in a research study in which severely ill heart patients were taught how to eat better foods, do yoga and meditation, join support groups and increase physical exercise. “What we found was there was a

91 percent reduction in chest pain; patients lost weight; their blood sugars got better,” Guarneri said. “The data was so compelling that for every dollar we spent on such treatments, we saved \$6.60 per patient.”

According to Weil, the payoff is simple yet potent. Integrative medicine “is producing better outcomes at lower cost in the management of common disease,” Weil said, “and through its emphasis on prevention and lifestyle, can greatly reduce the incidence of many of these chronic conditions.”

For those who believe in alternative options, this is “commonsense medicine,” Guarneri said. Ultimately, the conversation comes down to money. “What do insurance companies pay for?” she asked. “They pay for us to do things to people. Do a test. Put in a stent. Put in a pacemaker. They don’t pay for us to teach people how to eat or how to keep people well.” But that is changing. Health insurers are beginning to offer more extensive coverage for alternative treatments such as chiropractic and acupuncture. Medicare is now covering heart health programs such as the one Guarneri established with Ornish.

But for most current integrative medicine, patients are paying out-of-pocket dollars, and this means that people who lack the means—minorities and other underserved populations—are far less likely to have access. “When the insurance companies turn around and say, ‘You know what; we’re going to pay you to keep this guy well,’ that would be a game changer,” Guarneri said. “We’re not there yet.”

sity of California, San Francisco, School of Medicine designed a program for I.B.M. that focused on addressing the known risk factors for heart disease, cancer, pain management and other conventional health concerns. When Beck left I.B.M. and took a similar job at Bank of America in 1985, he offered grant

money to Pelletier to investigate the effectiveness of such wellness programs. In 1985, armed with those funds, Pelletier created the Corporate Health Improvement Program (CHIP), aimed specifically at developing and evaluating innovative preventive health and medical interventions at big companies.

**-26%**



**26 percent overall reduction in health care costs, and a 57 percent reduction in the use of pain medications.**

**-57%**

For every dollar invested in wellness, employers saw an average of **\$5.81** due to improved employee health and reduced medical claims.

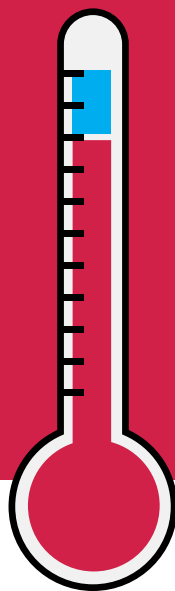
“There was no such thing as integrative medicine 30 years ago,” said Pelletier, director of the CHIP program and clinical professor of medicine at the University of Arizona College of Medicine. But over time, as the advent of alternative medicines and treatments began to have an impact, he grew more convinced that these innovative practices could find support in the unlikeliest of places: corporations.

Today, Pelletier oversees a CHIP membership of 15 Fortune 500 companies, including Prudential Insurance, Oracle, PepsiCo, Lockheed Martin, IBM, Dow Chemical and Ford. The group, including medical directors or human resources executives from each company, meets twice a year to develop research projects that are put in place inside the companies and then evaluated for both the clinical and cost outcomes. Over the past decade, “we’ve moved into doing genuinely integrative medicine,” Pelletier said.

In 2010 at Ford Motor Co., for example, Pelletier’s team helped create the Integrative Medicine Intervention for Back Pain program. A control group was offered conventional care for lower-back pain, which is a serious and costly issue for companies such as Ford, while the second group was given conventional care plus integrative medical treatments, including acupuncture, chiropractic and mindfulness meditation. The results were dramatic. Employees in the integrative medicine group experienced faster return to work, less recurrence of problems and a

# -27%

Health promotion programs see a 27 percent reduction in sick leave-related absenteeism.



58 percent reduction in the use of opioid pain medications.

“That’s important to Ford,” Pelletier said, “because when a worker is on opioid medications, they cannot be actively employed; so in effect, they are on short-term disability. So a 58 percent reduction in medication is a savings on medication costs but also an enormous savings in getting workers back onto the assembly line.” Ford has adopted the basic integrative model for managing back pain throughout its corporate clinics.

In another recent study, CHIP initiated a telemedicine program at Dow Chemical. Using computers, phones and coaches, a mindfulness meditation program was created for Dow’s executives at the corporate headquarters. The results showed “extraordinary improvements” in measures of performance and productivity, the ability to manage

stress on the job and an increased appreciation of life as opposed to work. Dow Chemical has incorporated the program into other executive programs throughout the company’s global offices.

The difficulty in measuring outcomes is tied to the variety of wellness programs. Some companies make serious investments; others pay little more than lip service to the concept. But those that do make the commitment are seeing trends such as lower absenteeism, higher job satisfaction and productivity, higher employee retention and lower health care costs. A 2012 report from the *American Journal of Health Promotion* analyzed 56 published studies on workplace health promotion programs. The findings were significant. Employers with health promotion programs saw a 27 percent reduction in sick-leave absenteeism, a 26 percent reduction in health care costs and a 32 percent decrease in workers’ compensation and disability claims.

The return on investment was impressive. For every dollar invested in wellness, employers saw an average of \$5.81 due to improved employee health and reduced medical claims.

“The good thing about the corporate sector is it is very practical,” Pelletier said. “Their business is not medicine; it’s making rocket ships or cars or tires. They are not doctrinaire, and their objective is not about conventional versus alternative medicine. Their objective is to produce a healthy, high-performing, productive, happy, retained work force. We take their employees, which is a high cost area for them, and demonstrate that there is a less expensive, more clinically effective way to take care of this.” —G.R.