

**Trends in Complementary and Integrative Health
Selected Web Resources for Health Science Librarians**

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Presentation Outline

Part I. Introduction – 10 minutes

Part II. Review of Selected Web Resources – 30 minutes

- A. Definitions**
- B. Consumer Use Trends – National Health Interview Surveys (NHIS)**
- C. Cost Trends – Expenditures – National Health Statistics Reports**
- D. Research Trend – NCCIH 2016 Strategic Plan (Objective 2) – Improve Care for Hard to Manage Symptoms**
- E. Medical Education Trends – Academic Consortium for Integrative Medicine and Health**
- F. Public Education Trends – NCCIH 2016 Strategic Plan (Objective 5) – Scientific Literacy (Consumers, Health Professionals, Policymakers, Researchers)**
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Presentation

Part I. Introduction – 10 minutes

Greetings

Hello, Everyone. My name is Evelyn Cunico. I am here to speak with you on the topic, **Trends in Complementary and Integrative Health – Selected Web Resources for Health Science Librarians.**

Acknowledgment

I would like to publicly thank Roy Jones, the Co-Chair of the 2016 Health Science Librarians of Illinois (HSLI) Annual Conference. I appreciate that Roy invited me to speak with you all today. When I suggested Trends in Complementary and Integrative Health Web Resources, Roy not only encouraged me to develop the topic, he also agreed to our phone discussions, which helped to guide my Web selections.

Objective

My overall objective today is to focus on Web Resources that are likely to be of most interest professionally to health science librarians.

For example, we might be thinking about questions we may be asked, or Lib Guides we might create, or Special Collections we might develop.

I have selected 26 Web Resources, all of which are from the Federal government, except for Web Resources from the Academic Consortium for Integrative Medicine and Health.

In preparing my Presentation topic, I identified seven Trend Categories. I have outlined these categories A to G.

- A. Definitions
- B. Consumer Use Trends
- C. Cost Trends
- D. Research Trends – Example: Improve Care for Hard to Manage Symptoms
- E. Medical Education Trends
- F. Public Education Trends
- G. Scientific Research Funding

In the interest of time, I may not visit all 26 of the Web Resources that I have selected. However, my Presentation, including all of the Web Resources, will be available on the HSLI Web site, sometime after our Annual Conference.

Integrative Health – Toward a Definition

Currently, there is no standard definition for Complementary and Integrative Health.

In general, Integrative Health includes a broad range of philosophies, products, therapies, and disciplines that share the common goals of modifying health behaviors to manage Chronic Illness and to promote health across the lifespan.

We all have a wide range of understandings about what Complementary and Integrative Health encompasses.

So, let us get focused on the topic with a personal story.

Personal Story

I was reading the fall issue of MedlinePlus Magazine, a free Web Resource published by the National Institutes of Health and the Friends of the National Library of Medicine.

A feature story highlights a woman who has experienced Chronic Pain for more than 20 years. She is not comfortable taking opioids. And, she feels she needs more than physical therapy.

As a step toward self-care, she started taking classes in the mind-body practice called Tai Chi. She finds that Tai Chi helps to relieve her perception of pain.

So, her medical doctor and team have integrated Tai Chi lessons into her healthcare treatment plan. This successful integration, through coordinated planning, is an example of the growing interdisciplinary field of Integrative Health.

Overarching Healthcare Trend

As a whole, the Healthcare field is undergoing a major shift – which is an overarching trend – from the treatment of disease to the prevention of disease and the promotion of wellness and self-care.

Trends in Complementary and Integrative Health are part of this overarching trend in the Healthcare field.

Let us turn now to specific Web Resources that reflect the seven Trend Categories that I identified in Complementary and Integrative Health.

Part II. Selected Web Resources – 30 minutes

A. Definitions

Background: In 2014, the NIH National Center for Complementary and Alternative Medicine (NCCAM) changed its name to the National Center for Complementary and Integrative Health (NCCIH).

Large population-based surveys in the U.S. found that consumer use of alternative medicine is rare. Integrative health care that brings together complementary and conventional therapies is more common.

Trend: Name change from Alternative to Complementary and Integrative

Trend: Complementary and Integrative Health has grown from individual consumer use to use within care settings across the United States, including hospitals, hospices, and military health facilities.

- National Center for Complementary and Integrative Health (NCCIH). Complementary, Alternative, or Integrative Health: What's in a Name? <https://nccih.nih.gov/health/integrative-health>
- NIH Complementary and Integrative Health Agency Gets New Name <https://www.nih.gov/news-events/news-releases/nih-complementary-integrative-health-agency-gets-new-name>
- Terms Related to Complementary and Integrative Health. <https://nccih.nih.gov/health/providers/camterms.htm>

B. Consumer Use Trends – National Health Interview Surveys (NHIS)

Background: The 2012 National Health Interview Survey provides the most comprehensive information on the use of complementary health approaches in the United States. There are two types of complementary health approaches: (1) Mind and Body Practices and (2) Natural Products.

Trend: The overall use of complementary health approaches in 2012 among U.S. adults was not significantly different from 2002 or 2007. However, there have been changes in the use trends of individual approaches.

The only group of Mind and Body approaches to significantly increase from 2007 was the use of yoga, tai chi, or qi gong, each of which relies on focused attention, which is a form of Meditation. In 2012, 8.0 (eight point

zero) percent of adults (18 million) used meditation, compared to 7.6 (seven point six) percent in 2002.

Among Natural Products, the health benefits of non-vitamin, non-mineral dietary supplements are unclear. Despite this fact, such supplements were consistently the most used complementary health approach across the three time points of 2002, 2007, and 2012.

For example, in 2012, 1.6 (one point six) percent of adults (3.9 million) used Probiotics or Prebiotics. The use of Probiotics or Prebiotics by adults in the United States was four times higher than in 2007. Nearly 3 million more adults used probiotics or prebiotics in 2012 than in 2007.

- Trends in the Use of Complementary Health Approaches among Adults: United States, 2002-2012
<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4573565/>
- Use of Complementary Health Approaches in the U.S. National Health Interview Survey 2012
<https://nccih.nih.gov/research/statistics/NHIS/2012>
- **Mind-Body Example:** Meditation
<https://nccih.nih.gov/research/statistics/NHIS/2012/mind-body/meditation>
- **Natural Products Example:** Probiotics
<https://nccih.nih.gov/research/statistics/NHIS/2012/natural-products/biotics>

C. Cost Trends – Centers for Disease Control and Prevention National Health Statistics Reports

Background: In 2012, one in five persons aged 4 years and over in the United States had one or more expenditures for complementary health approaches. This equates to about 59 million persons.

For persons aged 4 years and over, \$30.2 billion was spent out-of-pocket on complementary health approaches. Of this amount, more was spent on visits to complementary practitioners than for purchases of natural product supplements or self-care approaches.

Trend: The 2012 National Health Interview Survey data indicate that the U.S. public spent billions of dollars out of pocket on complementary health approaches. These expenditures are comparable to out-of-pocket costs for conventional physician services and prescription drug use.

- Expenditures on Complementary Health Approaches: United States, 2012
<https://www.cdc.gov/nchs/data/nhsr/nhsr095.pdf>
- **Agency for Healthcare Research and Quality (AHRQ) Medical Expenditure Panel Survey (MEPS)**

Background: MEPS is the most complete source of data on the cost and use of health care and health insurance coverage.

Trend: In 2008, the top 10 costliest medical conditions [for U.S. adults] were heart disease, cancer, mental disorders, trauma-related disorders, osteoarthritis, asthma, hypertension, diabetes, back problems, and hyperlipidemia.

Top Ten Most Costly Conditions among U.S. Adults, 2008
https://meps.ahrq.gov/data_files/publications/st331/stat331.shtml

D. Research Trend – NCCIH 2016 Strategic Plan (Objective 2) – Improve Care for Hard to Manage Symptoms

Background: The NCCIH 2016 Strategic Plan: Exploring the Science of Complementary and Integrative Health is NCCIH’s fourth strategic plan. The NCCIH Strategic Plan is updated every five years. Objective 2 is one of five.

Trend: Pain is the most common reason why Americans use complementary and integrative health practices....Conventional care often fails to manage chronic pain effectively....Research has shown that some complementary health modalities may reduce pain associated with some conditions; examples include massage, spinal manipulation, and yoga for chronic back pain and tai chi for fibromyalgia pain [NCCIH 2016 Strategic Plan, Introduction, p. 8].

Trend: NCCIH is particularly interested in clinical studies of complementary health approach interventions for Pain, Anxiety, and Depression [all of which are “Hard-to-Manage Symptoms”]. NCCIH is also interested in better understanding the transition from acute to chronic pain and testing and developing interventions that may prevent it [NCCIH 2016 Strategic Plan, Objective 2, p. 19].

- NCCIH 2016 Strategic Plan
https://nccih.nih.gov/sites/nccam.nih.gov/files/NCCIH_2016_Strategic_Plan.pdf

Objective 2: Improve Care for Hard-to-Manage Symptoms

<https://nccih.nih.gov/about/strategic-plans/2016/Objective-2-Improve-Care-Hard-to-Manage-Symptoms>

Scientific Priority: Non-pharmacologic Management of Pain

<https://nccih.nih.gov/about/strategic-plans/2016/Nonpharmacologic-Management-Pain>

- **Mind-Body Example:** Meditation
Meditation: In Depth
<https://nccih.nih.gov/health/meditation/overview.htm>
- **Natural Products Example:** Probiotics
Probiotics: In Depth
<https://nccih.nih.gov/health/probiotics/introduction.htm>
- **Noninvasive Technology Example:** Bio Sensors and Mobile Health (wearables, sensors, and apps)
<https://www.ncbi.nlm.nih.gov/pubmed/27384501>

E. Medical Education Trends – Academic Consortium for Integrative Medicine and Health

Background: The Consortium advances integrative medicine and health through academic institutions and health systems. The Consortium seeks to transform the healthcare system, promoting integrative medicine and health. As of May 2016, the Consortium has 69 institutional members.

Trend: The focus of the Education Working Group is to facilitate (1) the incorporation of teaching on Integrative Medicine and Health into all levels of healthcare education and (2) the application of integrative medicine and health principles and practices to all healthcare disciplines.

- Academic Consortium for Integrative Medicine and Health Members
<http://www.imconsortium.org/members/members.cfm>
- Education Working Group
<http://www.imconsortium.org/about/education-working-group.cfm>
- Leadership and Education Program for Students in Integrative Medicine (LEAPS), in collaboration with American Medical Student Association
<http://www.imconsortium.org/events/leaps.cfm>

F. Public Education Trends – NCCIH 2016 Strategic Plan (Objective 5) – Scientific Literacy (Consumers, Health Professionals, Policymakers, Researchers)

Background: NCCIH faces several challenges with regard to translating and disseminating complex scientific information to an interested and engaged public.

First, the landscape of complementary and integrative health is inundated with information, some of it overtly promotional, and much of it either not based on evidence or of questionable quality and reliability.

Second, there is evidence that individuals who use complementary health approaches often do not discuss their use with their conventional health care providers. [NCCIH 2016 Strategic Plan, Objective 5, p. 29].

Trend: Going forward....NCCIH must provide information that is engaging, accessible, and of value to the public, health care providers, researchers, and policymakers, given the flood of information in the public domain and the frequent self-care use of complementary health approaches. [NCCIH 2016 Strategic Plan, Objective 5, p. 29].

- NCCIH 2016 Strategic Plan
https://nccih.nih.gov/sites/nccam.nih.gov/files/NCCIH_2016_Strategic_Plan.pdf

Objective 5: Disseminate Objective Evidence-based Information

<https://nccih.nih.gov/about/strategic-plans/2016/Objective-5-Disseminate-Objective-Evidence-based-Information-Complementary-Integrative-Health-Interventions>

- NCCIH Clinical Digest (monthly e-newsletter for health professionals)
<https://nccih.nih.gov/health/providers/digest>
- NCCIH. Be an Informed Consumer
<https://nccih.nih.gov/health/decisions>
- NCCIH Live Chats with Experts. Twitter Chats.
<https://nccih.nih.gov/news/events/livechat>
- National Institutes of Health (NIH). Office of Dietary Supplements.
<https://ods.od.nih.gov>

G. Scientific Research Funding – NCCIH

- NCCIH-supported Funding Opportunities
<https://nccih.nih.gov/grants/funding>
- Complementary and Integrative Health Funding by NIH Institute/Center
<http://nccih.nih.gov/about/budget/institute-center.htm>

Thank You

Thank you for listening, Everyone. I am happy to respond to your questions.

Editorial Note:

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