

Naturopathic Support for Patients with Cancer*

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What is Naturopathic Medicine?

- Naturopathic Doctors (NDs) are the general practitioners of CAM / natural medicine.
- A licensed ND has completed 4 years of pre-med, 4 years of graduate school at an accredited Naturopathic medical college, and has passed North American-wide board exams (NPLEX).
- Scope includes: nutrition, herbal medicine, acupuncture,* homeopathy, lifestyle counseling, physical medicine, and mind-body medicine.
- Training: Western medical understanding of the body (e.g. differential diagnosis, physical diagnosis, lab work, pathology, microbiology etc.); holistic philosophy
- Focus on **evidence based** complementary and alternative medicine (EBCAM).

Defining Evidence-based Practice

- “...the integration of *best research evidence* with *clinical expertise* and *patient values*.”
- In other words, finding and using the best available evidence for practice is just **one part** of developing an evidence-based approach. Experience, intuition, and respect for the patient’s values is also part of ethical, competent clinical decision making.

Sackett, D.L., Straus, S.E., Richardson, W.S., Rosenberg, W., Haynes, R.B., (2000). Evidence-Based Medicine: How to Practice and Teach EBM. Edinburgh: Churchill Livingstone. p.1.

What is Naturopathic Oncology?

- Emerging field of complementary cancer treatment*
- Provides adjunctive care to support patients in their conventional cancer treatments (i.e. surgery, chemotherapy and radiation) – a healthier person will have better outcomes and fewer side-effects
- Ensures there are no negative herb-drug or nutrient-drug interactions, *and identifies positive interactions*
- Prevention of recurrence – empowers patients to be proactive through lifestyle changes and the use of herbs, supplements, etc.
- Oncology Association of Naturopathic Physicians – active list serve, continuing education, tumor board:
*www.oncanp.org***

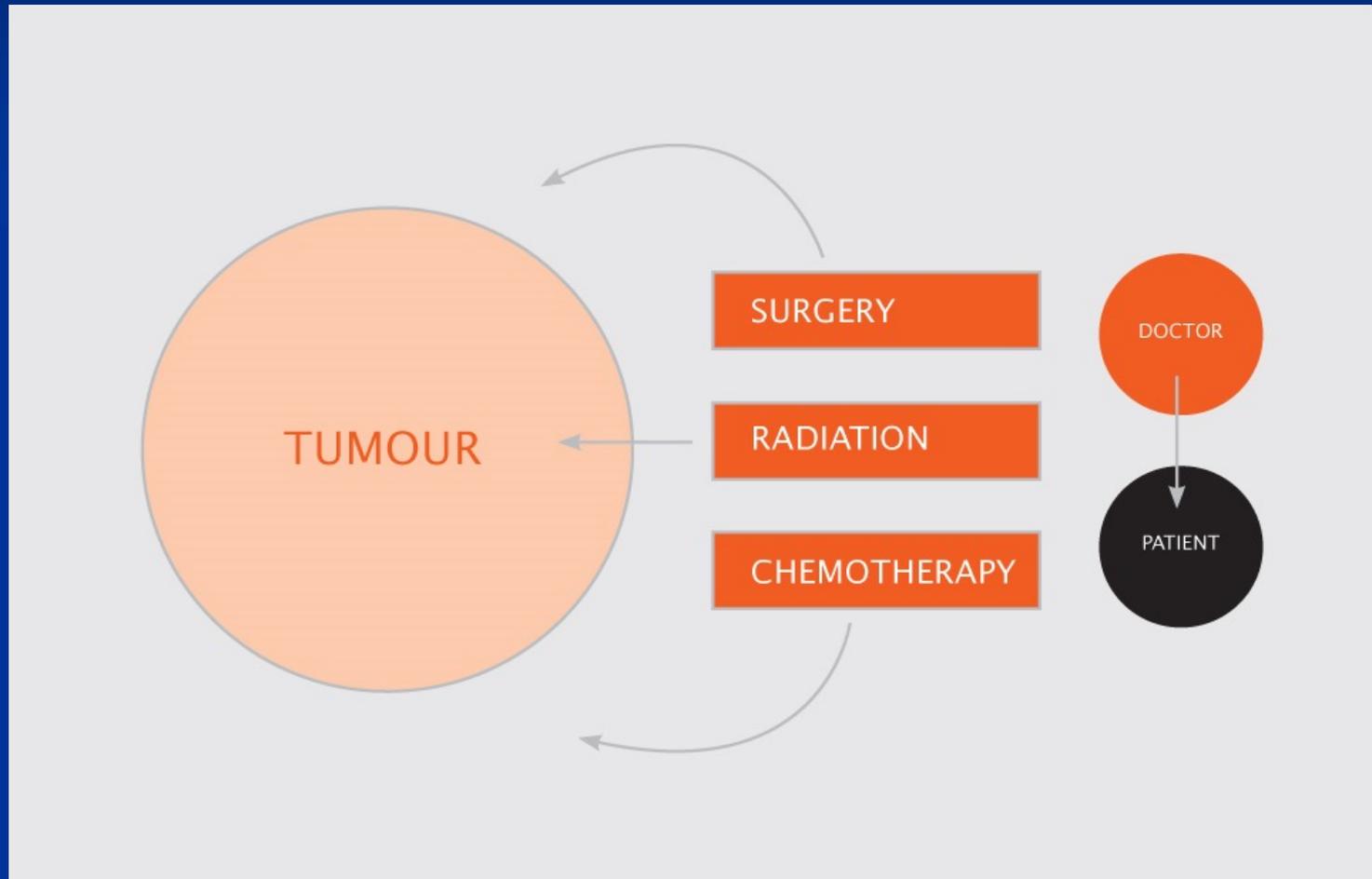
Who Uses Our Services?

- 68.7% of cancer patients surveyed had used at least one CAM therapy (not including prayer)
- 81% of radiotherapy cancer patients used supplements
- 53% of patients using dietary supplements during chemo did *not* seek advice from a medical provider
- Most patients do *not* disclose their use of herbs and supplements to their doctors
- Cancer patients are particularly vulnerable to false claims of natural “cures” for cancer
- Patients often get their information from the internet and well-meaning friends and family

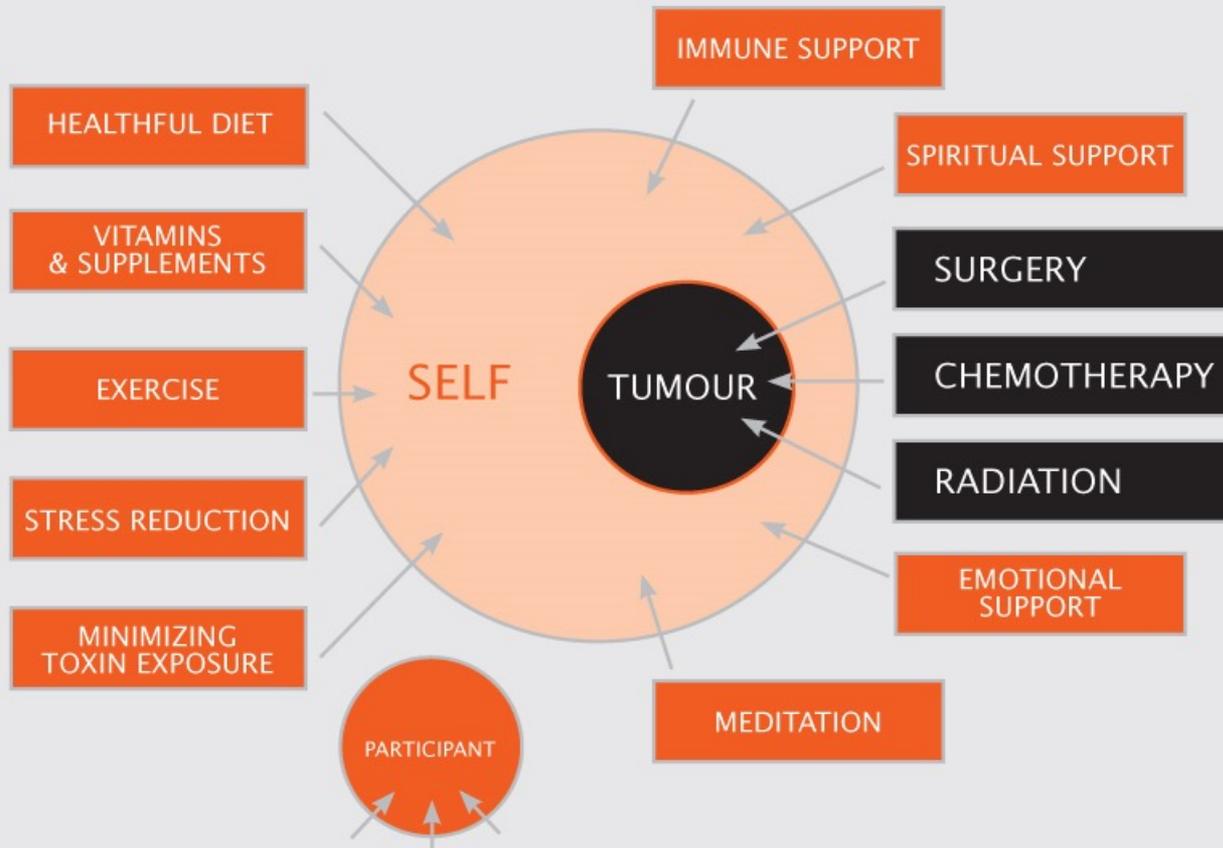
Visiting an ND for Cancer Care

- Initial consultations last up to 1.25 hours
- Includes the review of health history, chief concerns, psychosocial issues, and current treatments (including all medications and supplements)
- Naturopathic recommendations are based on current best evidence
- Follow-up visits typically last 30-45 min, and may include acupuncture and / or physical medicine in addition to reviewing progress of the treatment and making necessary modifications to the protocol
- Visits are covered by most private insurance plans (but not the herbs or supplements)

Conventional Tumour-oriented Model



Integrated Cancer Care Model



Goals of Naturopathic Oncology

1. To provide safe and effective integrated cancer care
2. To avoid negative (and promote positive) herb-drug and nutrient-drug interactions
3. To keep patients healthy enough to complete their course of care as prescribed by their oncologist (i.e. reduce side-effects)
4. To restore balance to the body and optimize overall health so that cancer is less likely to return
5. To help resolve conflicting advice from conventional and complementary caregivers
6. To be a reliable and well-informed resource for those with questions on complementary cancer care

Toward Integration^{1*}

- In a recent synthesis of 26 studies of cancer patients' experiences of CAM use, 'polarization' was the most notable barrier to positive experience
- Patients wanted to be certain that the therapies were not interfering with their conventional treatment.
- Patients valued: taking control, relieving symptoms, improving well-being, promoting reconnection and social interaction.

Toward Integration¹

- Conventional physicians perceived to be poorly informed or negative about CAM approaches induced: patient anxiety, safety concerns, and difficulties in access; such MDs may compromise their therapeutic relationship and may trigger patients to abandon conventional medicine
- Integrated advice and/or services were highly valued by cancer patients
- **CONCLUSIONS:** “complementary therapies, in a supportive role, should be integrated into mainstream cancer care.”