“CAM Therapies Are No Longer Complementary or Alternative: Yoga, Acupuncture, and Mind-Body Medicine”

Presented by:
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Webcast Questions and Answers
(Answers are in bold)

Questions:

1. Has it been considered that the interstitium is responsible for the mechanism of acupuncture?
   a. Yes. That is one theory, but there is not much evidence as it is hard to measure the interstitium or even agree on what that constitutes.

2. Question for Dr. Belgrade: Is there a website I can look for a well-trained acupuncturist in the area I live in?
   a. Training is a hard one to quantify when it comes to skill level. The best you can do is see who is licensed in your state and assume they meet basic qualifications. If they are associated with an established medical facility, then someone has already looked into their qualifications.

3. Please, what is the neuropharmacological mechanism of normal walking (3km) on Anxiety and Depression.
   a. There is vast literature published on the mental health benefits of exercise/movement including walking. Brendon Stubbs out of South London has done a lot of research in this area. His book “Exercise-Based Interventions for Mental Illness” is a good place to start. Also see “How Exercise Changes your Brain and Reduces your Risk of Depression” by Dr. Rangan Chatterjee (#97). There are great links to relevant up to date research in the show notes speaking to the neuropharmacology of movement and how it changes the brain.

4. Please address insurance coverage of acupuncture.
   a. Medicare does not cover it. Many commercial insurers do cover acupuncture though reimbursement is pitiful. In Minnesota, Medicaid covers acupuncture.

5. For Dr. Belgrade: Please discuss acupressure as a possible substitute to acupuncture for patients who may be squeamish about needles.
   a. Acupressure is based on the same principles as acupuncture and employs the same set of points and meridians. Shiatsu is one name for it. The difference is the practitioner typically applies pressure one point at a time and often will apply pressure at every point on the meridian being treated.
rather than selected points. There is not as much of a scientific evidence basis but the principle is the same. There is another painless approach to stimulating acupuncture points—laser treatment which uses a laser pointer with similar wavelength characteristics. This is a nice option for children.

6. Do participants in your yoga program report an awareness of the impact in the activities of daily living? (Mobility, social and emotional function and satisfaction) Are you using a specific clinical tool to track response of individual patients over time?
   a. Yes, the modified pain interference subscale of the Brief Pain Inventory and the PROMIS Physical Function 8-Item Short form are the scales we use to evaluate physical function over time.

7. The first speaker addressed how to find an appropriately trained yoga practitioner and it would be great to hear from the second speaker how to evaluate the training of an acupuncturist?
   a. See #2 above

8. If VA does not provide acupuncture in the local clinic, are VA patients referred out?
   a. Yes they are often referred to “community care”

9. Is this program at the Columbia, SC VA?
   a. I don’t know :( 

10. What is the website to locate therapeutic yoga?
    International Association of Yoga Therapists (IAYT)
    https://www.iayt.org/search/custom.asp?id=4160

11. I use the Dolphin needleless acupuncture device successfully with patients. Is there any research on such devices?
    a. I’m not aware of any studies on that proprietary device, but any form of stimulation of acupuncture points—heat, pressure, needle, electrical, etc. would theoretically share the same mechanism of action so one could extrapolate from the acupuncture literature

12. Are there Yoga virtual sites that you would recommend for our chronic pain patients?
    a. I have found Yoga with Adriene on YouTube to be quite easy and accessible for most people. There are other specialty programs specific to chronic pain that have DVD’s. One of these where I trained is out of Oregon Health & Science University (OHSU)-Mindful Yoga for Chronic Pain with Kimberly and Jim Carson. The NIH website has some great resources including a eBook to download: https://www.nccih.nih.gov/health/yoga-what-you-need-to-know

13. Are yoga instructors trained to teach yoga to someone that may have a physical disability?
    a. Not in most trainings, however, there are specific yoga trainings one can take to learn to work with people with physical disabilities such as spinal cord injuries, MS, Parkinsons. In MN, Matthew Sanford developed a program “Mind Body Solutions”. Matthew himself had a spinal cord injury and found yoga as a way to help feel more connected to his body. He offers trainings to health care professionals and we have welcomed him at HealthPartners as he has trained many of our PT/OT/Speech therapists. There is also a large group, Accessible Yoga
by Jivana Heyman who adapts the pose to each person and has options for people who are even bedbound.

14. Why are CAM therapies not reimbursed well? Is it lack of quality evidence, expense, prioritization of western medicine (turf war)?

a. The evidence is there and growing, however, insurances are late to cover these effective strategies. As we discussed, there needs to be more of a focus on how to blend integrative therapies into Western medicine. Most of the time they are seen as a last resort or thought of after the fact rather than preventive, which is how many of them are used in eastern medicine. Our western culture views medicine as a ‘fix me’ after chronic disease states have developed. There needs to be a culture shift towards engaging patients and having them become an active participant in their healthcare. Yoga is great to this! It empowers people and gives them a sense of self-agency as well as resiliency.